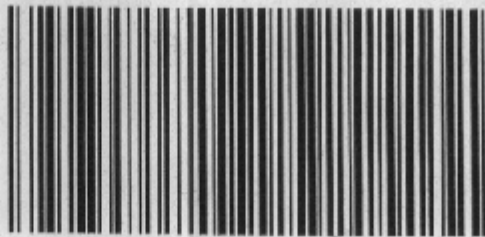


CONTRACT FOR CARRIAGE / DISPATCH NOTE



DSV Road (Pty) Ltd  
 t/a DSV Distribution  
 PO Box 63, The Reeds 0061  
 Tel (012) 673-2000  
 Reg. No. 2000/016342/07  
 VAT No. 4880189685



SUBBD27648341

2 2 2 E E E 2 2 2


POD COPY

Sender's Details		Consignee's Details. Full Street Address Please	
Company Name	LE CREUSET HOBART GROVE	Company Name	Le creuset Shop G1 Ob2
Street Address	SHOP G1 CNR HOBART & GROSVENOR ROAD	Street Address	Shop G1 Ob2 Wall of the South C/o Kiplivier drive and Southkoppies Hesper Hills
Suburb	BRYANSTON	Suburb	Hesper Hills
City / Town	JNB	City / Town	JNB
Postal Code	2021	Postal Code	
Contact	SEVARIAN	Contact	Delicity
Phone	011 568 4708	Phone	010 500 0223
Destination Country	South Africa	Destination Country	South Africa
Sender's Reference		Analysis Code	

Mark Service Required

Same Day

Express

With Sunrise Option

With Saturday Service

Public Holiday Service

Economy

After Hours

BLNS Customs Tariff

**SPECIAL INSTRUCTIONS**

Bill Charges To Account No. **027766**

Bill To  Sender  Consignee  Other (Name Please)

If Consignee Or Other (Third Party) Is Billed, Sender Remains Liable For Unpaid Charges.

IF THIS SHIPMENT CONTAINS ANY DANGEROUS GOODS ALL REGULATIONS MUST BE COMPLIED WITH. THIS IS YOUR RESPONSIBILITY AS SHIPPER (SEE CLAUSE 14.14 OVERLEAF). GOODS ARE SHIPPED AT OWNERS RISK SUBJECT TO CONTRACT FOR CARRIAGE OVERLEAF. DSV DISTRIBUTION LIMITS ITS LIABILITY TO R 250.00 PER SHIPMENT (SEE CLAUSE 14.5 OVERLEAF). IF YOU WISH DSV DISTRIBUTION TO ACCEPT A HIGHER LIABILITY, THE VALUE OF THIS SHIPMENT MUST BE DECLARED IN THE SPACE PROVIDED. (SEE CLAUSE 14.6, 14.6 AND 14.7 OVERLEAF).

*Handwritten Signature* **SEVARIAN** DATE **10/07/18**

SENDER'S AUTHORISED SIGNATURE **LE CREUSET** Total Mass (Kg)

Total Parcels	NO. OF PARCELS PER DIMENSIONS	LENGTH (CM)	WIDTH (CM)	HEIGHT (CM)
1				

WILLIAMSON'S **LE CREUSET MAIL OF THE SOUTH**  
 CO. REG.: 1997/021366/07  
 VAT: 4130178069  
 TEL: 010 500 0223

Goods received in full without damage (unless endorsed)

Name Of Receiver (PLEASE PRINT CLEARLY)  
**Charlean**

Date Received: **110718** Time Received: **1327**

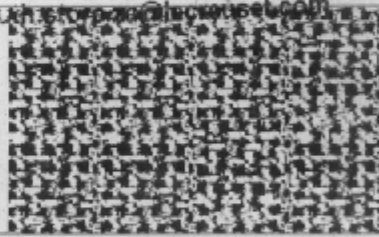
Signature: *[Signature]*

Received By DSV

Name Of Consignee (PLEASE PRINT CLEARLY)  
**SI OAS**

Date Received: **100718** Time Received: **1520**

Signature: *[Signature]*



Version Control: 08/2017