

CONTRACT FOR CARRIAGE / DISPATCH NOTE

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DSV Road (Pty) Ltd
t/a DSV Distribution
PO Box 53, The Reeds 0961
Tel (012) 673-2000
Reg. No. 7309/016342/07
VAT No. 4880189685



SUBBD27648349

Sender's Details		Consignee's Details. Full Street Address Please	
Company Name: LE CREUSET HOBART GROVE	Company Name: LE CREUSET HYDE PARK SHOP 71 UPPER MAIL	Street Address: HYDE PARK CORNER C/O JAN SMUTS 67 AVENUE HYDE PARK	Street Address: HYDE PARK CORNER C/O JAN SMUTS 67 AVENUE HYDE PARK
Suburb: BRAYANSTON	Suburb: HYDE PARK	City/Town: JOHANNESBURG	City/Town: JOHANNESBURG
City/Town: JNB	City/Town: JNB	Postal Code: 2021	Postal Code: 2196
Contact: SEVARIAN	Contact: AFRICA	Phone: 011 568 4708	Phone: 011 325 5606
Phone: 011 568 4708	Phone: 011 325 5606	Destination Country: <input checked="" type="checkbox"/> South Africa <input type="checkbox"/> Botswana <input type="checkbox"/> Lesotho <input type="checkbox"/> Namibia <input type="checkbox"/> Swaziland <input type="checkbox"/> Other (Please Specify)	
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

1. ONLINE

3. EFT

SPECIAL INSTRUCTIONS

Bill Charges To Account No: **027766**

Bill To: Sender Consignee Other (Name Please)

If Consignee Or Other (Third Party) Is Elected, 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 14.5, 14.6 AND 14.7 OVERLEAF).

S/he **15/6/2018**
SENDER'S AUTHORIZED SIGNATURE DATE

Total Parcels: **1**

NO. OF PARCELS PER DIMENSIONS

LENGTH (CM) WIDTH (CM) HEIGHT (CM)

Goods received in full without damage (unless endorsed)

Name Of Receiver (PLEASE PRINT CLEARLY): **REFILWE**

Date Received: **18 06 18**

Time Received: **1040**

Signature: *Stronze*

Received By DSV

Name Of Courier (PLEASE PRINT CLEARLY): **SICAS**

Date Received: **15 06 18**

Time Received: **1800**

Signature: *[Signature]*

POD COPY