

CONTRACT FOR CARRIAGE / DISPATCH NOTE



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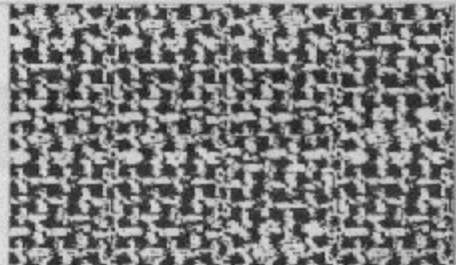
DSV Road (Pty) Ltd  
t/a DSV Distribution  
PO Box 63, The Reeds 0061  
Tel (012) 673-2000  
Reg. No. 2000/016342/07  
VAT. No. 4880169685

SUBBD27650804


Sender's Details				Consignee's Details. Full Street Address Please				Mark Service Required	
Company Name <b>LE CREUSET</b>				Company Name <b>Le creuset H.O</b>				<input type="checkbox"/> Same Day	
Street Address <b>CNR KLIPRIVIER DRIVE &amp; SWARTKOPPIES RD- SHOP G062</b>				Street Address <b>Unit 5 Heon Park Olive Grove Business Park Old Paardevlei Road</b>				<input type="checkbox"/> Express	
Suburb <b>ASPEN HILLS</b>				Suburb <b>Somerset West</b>				<input type="checkbox"/> With Sunrise Option	
City / Town <b>JNB</b>		Postal Code <b>2013</b>		City / Town <b>Cape Town</b>		Postal Code <b>8001</b>		<input type="checkbox"/> With Saturday Service	
Contact <b>LULO NONOISE</b>				Contact <b>Carmen</b>				<input type="checkbox"/> Public Holiday Service	
Phone <b>010 500 0223</b>				Phone <b>021 851 7178</b>				<input checked="" type="checkbox"/> Economy	
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)				<input type="checkbox"/> After Hours	
Sender's Reference <b>UT 12553830</b>				Analysis Code				<input type="checkbox"/> BLNS Customs Tariff	
<b>SPECIAL INSTRUCTIONS</b>									
Bill Charges To Account No. <b>027766</b>		Bill To Sender <input checked="" type="checkbox"/>		Consignee <input type="checkbox"/>		Other (Name Please) <input type="checkbox"/>		1. ONLINE <input type="checkbox"/>	
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 AND 14.7 OVERLEAF).									
e-mail / Fax / Proof of Delivery <input type="checkbox"/>				e-mail Address / Fax Number					
Total Parcels		NO. OF PARCELS PER DIMENSIONS		LENGTH (CM)		WIDTH (CM)		HEIGHT (CM)	
1									
Goods received in full without damage (unless endorsed) Name Of Receiver (PLEASE PRINT CLEARLY) <b>Lauren</b>					Received By DSV Name Of Courier (PLEASE PRINT CLEARLY) <b>Andrius</b>				
Date Received: <b>24 05 18</b>		Time Received: <b>08 33</b>			Date Received: <b>22 05 18</b>		Time Received: <b>14 06</b>		
Signature:					Signature:				

POD COPY

Total Mass (Kg)



Version Control (20/2017)