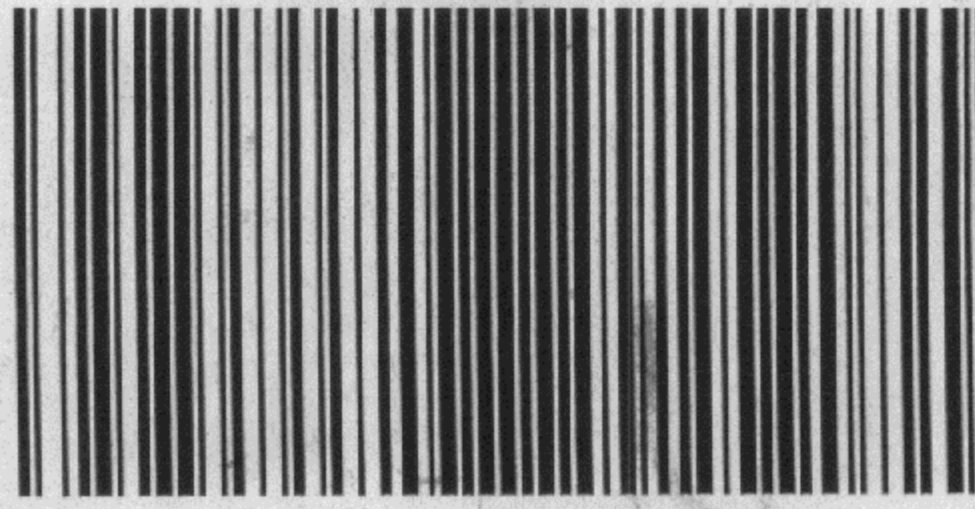


**CONTRACT FOR CARRIAGE / DISPATCH NOTE**



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



**SUBBD27758572**

2 2 2 E E E 2 2 2


Sender's Details		Consignee's Details. Full Street Address Please			
Company Name: <u>Pitw</u>	Street Address: <u>Songamwe Strand</u>	Company Name: <u>Le Creuset</u>	Street Address: <u>Unit 5 Heron Park</u>	Suburb: <u>Olive Grove Industrial</u>	
Suburb: _____	City / Town: <u>LTT</u> Postal Code: <u>0920</u>	Suburb: _____	City / Town: <u>Somerset West</u> Postal Code: <u>7130</u>	Contact: <u>Mary</u>	
Contact: <u>Shenaz Khan</u>	Phone: <u>084 786 4488</u>	Contact: <u>021 851 7178</u>	Phone: _____		
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: _____			
<b>SPECIAL INSTRUCTIONS</b>					
Bill Charges To Account No. <u>027877</u>	Bill To Sender <input type="checkbox"/>	Consignee <input type="checkbox"/>	Other (Name Please) <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 14.5, 14.6 AND 14.7 OVERLEAF).					
e-mail / Fax / Proof of Delivery <input type="checkbox"/>			e-mail Address / Fax Number _____		
<b>Total Parcels</b>	<b>NO. OF PARCELS PER DIMENSIONS</b>	<b>LENGTH (CM)</b>	<b>WIDTH (CM)</b>	<b>HEIGHT (CM)</b>	
<u>1</u>	<u>1</u>	<u>25</u>	<u>10</u>	<u>10</u>	
Goods received in full without damage (unless endorsed) Name Of Receiver (PLEASE PRINT CLEARLY) <u>ETUVINO</u>			Received By DSV Name Of Courier (PLEASE PRINT CLEARLY) <u>Jay M</u>		
Date Received: <u>160218</u>		Time Received: <u>0920</u>		Date Received: <u>130218</u>	
Signature: <u>[Signature]</u>		Signature: <u>[Signature]</u>			

Mark Service Required
Same Day
Express
With Sunrise Option
With Saturday Service
Public Holiday Service
<input checked="" type="checkbox"/> Economy
After Hours
BLNS Customs Tariff
1. ONLINE <input type="checkbox"/>
3. EFT <input type="checkbox"/>
Total Mass (Kg) <u>2</u>

POD COPY Version Control (08/2017)

