

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. 4880189685



SUBBD27826374

Sender's Details		Consignee's Details. Full Street Address Please						Mark Service Required	
Company Name LE CREUSET		Company Name LECREUSET Table bag.						<input type="checkbox"/> Same Day	
Street Address SHOP 6197 V & A WATERFRONT VICTORIA WHARF CENTRE		Street Address Shop G 086						<input type="checkbox"/> Express	
Suburb		Suburb Cnr R27 and Berkshire west Table Bay mall						<input type="checkbox"/> With Sunrise Option	
City / Town CAPE TOWN Postal Code 8001		City / Town Table Bay Postal Code 7436						<input type="checkbox"/> With Saturday Service	
Contact CINDY		Contact AIHADIA						<input type="checkbox"/> Public Holiday Service	
Phone 021 421 8521		Phone 021 300 3148						<input type="checkbox"/> Economy	
Destination Country South Africa		Other (Please Specify)						<input type="checkbox"/> After Hours	
Sender's Reference		Analysis Code						<input type="checkbox"/> BLNS Customs Tariff	
SPECIAL INSTRUCTIONS DEL. ON 13th April								<input type="checkbox"/> 1. ONLINE	
Bill Charges To Account No. 027766		Bill To <input type="checkbox"/> Sender <input type="checkbox"/> Consignee <input type="checkbox"/> Other (Name Please) <input type="checkbox"/>						<input type="checkbox"/> 3. EFT	
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							
Total Parcels		NO. OF PARCELS PER DIMENSIONS		LENGTH (CM)		WIDTH (CM)		HEIGHT (CM)	
1		1 x Box							
Goods received in full without damage (unless endorsed)					Received By DSV				
Name Of Receiver (PLEASE PRINT CLEARLY) SI BO					Name Of Courier (PLEASE PRINT CLEARLY) CHESROY				
Date Received: 13/04/18					Date Received: 12/04/18				
Time Received: 1200					Time Received: 1440				
Signature:					Signature:				

POD COPY

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