

CONTRACT FOR CARRIAGE / DISPATCH NOTE



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



SUBBD27826375

2 2 2 E E E 2 2 2


Sender's Details

Consignee's Details. Full Street Address Please

Company Name: **LE CREUSET**  
 Street Address: **SHOP 6197  
 V & A WATERFRONT  
 VICTORIA WHARF CENTRE**  
 Suburb: \_\_\_\_\_  
 City/Town: **CAPE TOWN** Postal Code: **8001**  
 Contact: **CINDY**  
 Phone: **021 421 8521**

Company Name: **Le Creuset Table bay**  
 Street Address: **Shop G08b CNR of R27  
 and Berkshire Blvd.**  
 Suburb: \_\_\_\_\_  
 City/Town: **CAPE TOWN** Postal Code: **7436**  
 Contact: **Angelica**  
 Phone: **021 300 3148**

- Mark Service Required
- Same Day
  - Express
  - With Sunrise Option
  - With Saturday Service
  - Public Holiday Service
  - ~~Emergency~~
  - After Hours

Destination Country	South Africa	Botswana	Lesotho	Namibia	Swaziland	Other (Please Specify)
Sender's Reference	<b>UT11135660</b>					Analysis Code

SPECIAL INSTRUCTIONS

Bill Charges To Account No. **027766**

Bill To:  Sender  Consignee  Other (Name Please)

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 14.8 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).

*10 AD Angelica 14 Feb 08 03.18*  
**SENDER'S AUTHORIZED SIGNATURE** **DATE**

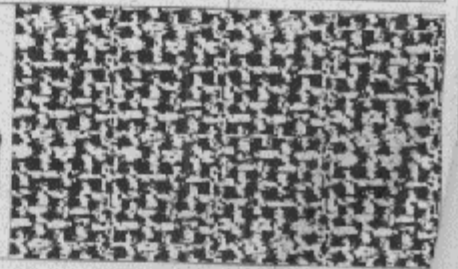
- 1. ONLINE
- 3. EFT

Total Mass (Kg)

Total Parcels	NO. OF PARCELS PER DIMENSIONS	LENGTH (CM)	WIDTH (CM)	HEIGHT (CM)
<b>1</b>				

Goods received in full without damage (unless endorsed)  
 Name Of Receiver (PLEASE PRINT CLEARLY): **Angelica Chesky**  
 Date Received: **08 03 18**  
 Time Received: **1530**  
 Signature: *[Signature]*

Received By DSV  
 Name Of Courier (PLEASE PRINT CLEARLY): **JORDAN**  
 Date Received: **09 10 3**  
 Time Received: **1400**  
 Signature: *[Signature]*



POD COPY