

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



SUBBD27985582

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Sender's Details		Consignee's Details. Full Street Address Please				Mark Service Required	
Company Name <u>Le Creuset Sandton</u>		Company Name <u>Le Creuset</u>				<input type="checkbox"/> Same Day	
Street Address <u>Shop L339 Lower level Sandton cnr Steg Rivonia Road Sandhurst</u>		Street Address <u>Unit 5 Fern Park, Industrial Estate Old Beardslevlei Road Somer-set West</u>				<input type="checkbox"/> Express	
Suburb <u>Sandhurst</u>		Suburb <u>Somer-set West</u>				<input type="checkbox"/> With Sunrise Option	
City / Town <u>JHB</u> Postal Code <u>2196</u>		City / Town <u>Capetown</u> Postal Code				<input type="checkbox"/> With Saturday Service	
Contact <u>Karabo</u>		Contact <u>Accounts</u>				<input type="checkbox"/> Public Holiday Service	
Phone		Phone				<input type="checkbox"/> Economy	
Destination Country		(Please Specify)				<input type="checkbox"/> After Hours	
South Africa		Lesotho Namibia Swaziland Other				<input type="checkbox"/> BLNS Customs Tariff	
Botswana							
Sender's Reference <u>0313487</u>		Analysis Code				1. ONLINE <input type="checkbox"/>	
<b>SPECIAL INSTRUCTIONS</b> Bill Charges To Account No. <u>037 26 6</u> Bill To <input type="checkbox"/> Sender 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			
Total Parcels		NO. OF PARCELS PER DIMENSIONS		LENGTH (CM)		WIDTH (CM)	
HEIGHT (CM)		Total Mass (Kg)					
1							
Goods received in full without damage (unless endorsed)				Received By DSV			
Name Of Receiver (PLEASE PRINT CLEARLY)				Name Of Courier (PLEASE PRINT CLEARLY)			
<u>ELVINO</u>				<u>Frank</u>			
Date Received:		Time Received:		Date Received:		Time Received:	
<u>050218</u>		<u>1030</u>		<u>010217</u>		<u>1430</u>	
Signature: <u>[Signature]</u>				Signature: <u>[Signature]</u>			

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Version Control (08/2017)