

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. 4880189665



SUBBD28212324

2 2 2 E E E 2 2 2

Sender's Details

Consignee's Details. Full Street Address Please

Company Name **LE CREUSET BRYANSTON**
Street Address **SHOP G1
CNR HOBART & GROSVENOR ROADS**
Suburb **BRYANSTON**
City/Town **JNB** Postal Code **2021**
Contact **SEVARIAN**
Phone **011 568 4708**

Company Name **Le Creuset Clearwater**
Street Address **Shop T1 Upper mall Hyde Park
center (10 Jan Smuts B 6th Ave
Hyde Park**
Suburb **Hyde Park**
City/Town **JNB** Postal Code **2196**
Contact
Phone

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

BLNS
Customs
Tariff

1. ONLINE
3. EFT

Total Mass (Kg)

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

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 14.5 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).

[Signature]
SENDER'S AUTHORIZED SIGNATURE
DATE **12/07/2018**

e-mail / Fax / Proof of Delivery e-mail Address / Fax Number _____

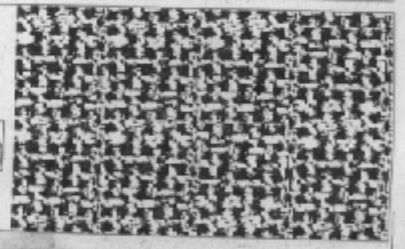
Total Parcels	NO. OF PARCELS PER DIMENSIONS	LENGTH (CM)	WIDTH (CM)	HEIGHT (CM)
1				

Goods received in full without damage (unless endorsed)

Name Of Receiver (PLEASE PRINT CLEARLY) **LE BOHANG**
Date Received: **130718** Time Received: **1100**
Signature: *[Signature]*

Received By DSV

Name Of Courier (PLEASE PRINT CLEARLY) **Silas**
Date Received: **120718** Time Received: **1630**
Signature: *[Signature]*



POD COPY

Version Control (08/2017)