

CONTRACT FOR CARRIAGE / DISPATCH NOTE

2 2 2 E E E 2 2 2



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. 4690189685



SUBBD28212334

Sender's Details		Consignee's Details. Full Street Address Please	
Company Name LE CREUSET BRYANSTON	Company Name <i>Le CREUSET CENTURION</i>	Street Address SHOP G1 CNR HOBART & GROSVENOR ROADS	Street Address <i>SHOP 312 E CENTURION MULL HEUWEL AVENUE</i>
Suburb BRYANSTON	Suburb <i>CENTURION</i>	City/Town JNB	City/Town <i>Peteroria</i>
Postal Code 2021	Postal Code <i>0157</i>	Contact SEYARIAN	Contact <i>012 004 0217</i>
Phone 011 568 4708	Phone <i>012 004 0217</i>	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	

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)

SPECIAL INSTRUCTIONS

Bill Charges To Account No. **027766**

Bill To Sender Consignee Other (Name Please)

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).

[Signature]
SENDER'S AUTHORISED SIGNATURE

12/07/2018
DATE

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)
EUREKA

Date Received: **160718**

Time Received: **1554**

Signature: *[Signature]*

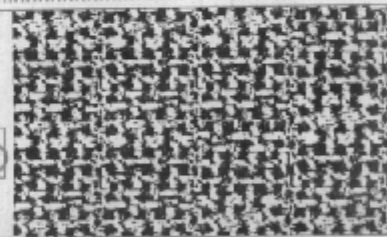
Received By DSV

Name Of Courier (PLEASE PRINT CLEARLY)
S/CAS

Date Received: **120718**

Time Received: **1630**

Signature: *[Signature]*



POD COPY

Version Contm (01/2017)