

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. 4880189685



SUBBD28212341

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| Sender's Details | | Consignee's Details. Full Street Address Please | | | | Mark Service Required | |
|---|--------------------------------------|--|-------------------|---|------------------------|---|--|
| Company Name LE CREUSET BRYANSTON | | Company Name Le creuset | | | | <input type="checkbox"/> Same Day | |
| Street Address SHOP G1 CNR HOBART & GROSVENOR ROADS | | Street Address Shop 100 Killarney Mall Riviera Road | | | | <input type="checkbox"/> Express | |
| Suburb BRYANSTON | | Suburb Killarney | | | | <input type="checkbox"/> With Sunrise Option | |
| City / Town JNB Postal Code 2021 | | City / Town JNB Postal Code 2193 | | | | <input type="checkbox"/> With Saturday Service | |
| Contact SEVARIAN | | Contact Fundi | | | | <input type="checkbox"/> Public Holiday Service | |
| Phone 011 568 4708 | | Phone 011 646 6316 | | | | <input type="checkbox"/> Economy | |
| Destination Country <input checked="" type="checkbox"/> South Africa | | Other (Please Specify) | | | | <input type="checkbox"/> After Hours | |
| Sender's Reference | | Analysis Code | | | | BLNS Customs Tariff | |
| SPECIAL INSTRUCTIONS | | | | | | | |
| Bill Charges To Account No. 027766 | | Bill To <input checked="" type="checkbox"/> Sender | | Consignee <input type="checkbox"/> | | Other (Name Please) <input type="checkbox"/> | |
| 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). | | | | | | | |
| | | | | 17/07/2018 | | <input type="checkbox"/> 1 ONLINE | |
| | | | | SENDER'S AUTHORISED SIGNATURE | | <input type="checkbox"/> 3 EFT | |
| 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) Boitumele | | | | Name Of Courier (PLEASE PRINT CLEARLY) S/1/25 | | | |
| Date Received: 18/07/18 | | Time Received: 04:20 | | Date Received: 17/07/18 | | Time Received: 16:00 | |
| Signature: (Signature) | | | | Signature: (Signature) | | | |

POD COPY

Version Control 05/2017

