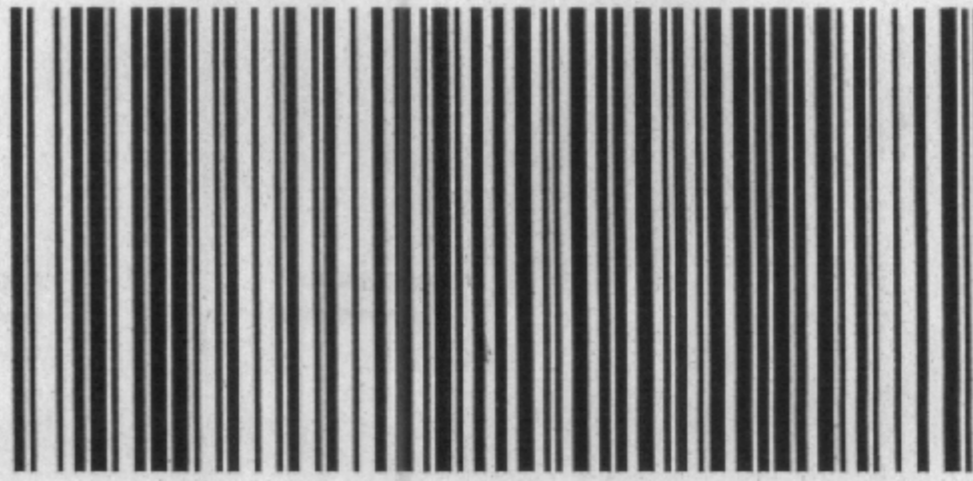


CONTRACT FOR CARRIAGE / DISPATCH NOTE



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



SUBBD28212376

2 2 2 E E E 2 2 2

Sender's Details		Consignee's Details. Full Street Address Please				Mark Service Required			
Company Name LE CREUSET BRYANSTON		Company Name Le Creuset head office				<input type="checkbox"/> Same Day			
Street Address SHOP G1 CNR HOBART & GROSVENOR ROADS		Street Address Unit 13 Heron Park Olive Grove Business Park the interchange Somerset West				<input checked="" type="checkbox"/> Express			
Suburb BRYANSTON		Suburb SOMERSET WEST				<input type="checkbox"/> With Sunrise Option			
City / Town JNB	Postal Code 2021	City / Town Capetown	Postal Code			<input type="checkbox"/> With Saturday Service			
Contact SEVARIAN		Contact VICKY				<input type="checkbox"/> Public Holiday Service			
Phone 011 568 4708		Phone 021 851 7178				<input type="checkbox"/> Economy			
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)			<input type="checkbox"/> After Hours		
Sender's Reference				Analysis Code				<input type="checkbox"/> BLNS Customs Tariff	
SPECIAL INSTRUCTIONS									
Bill Charges To Account No. 027766		Bill To <input checked="" type="checkbox"/> Sender		Consignee <input type="checkbox"/>		Other <input type="checkbox"/> (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).									
e-mail / Fax / Proof of Delivery <input type="checkbox"/>				e-mail Address / Fax Number				1. ONLINE <input type="checkbox"/>	
Total Parcels		NO. OF PARCELS PER DIMENSIONS		LENGTH (CM)		WIDTH (CM)		3. EFT <input type="checkbox"/>	
								Total Mass (Kg)	
Goods received in full without damage (unless endorsed) Name Of Receiver (PLEASE PRINT CLEARLY) Nadine				Received By DSV Name Of Courier (PLEASE PRINT CLEARLY) Mpho					
Date Received: 010818		Time Received: 1604		Date Received: 310718		Time Received: 1524			
Signature:				Signature:					

POD COPY

Version Control (08/2017)