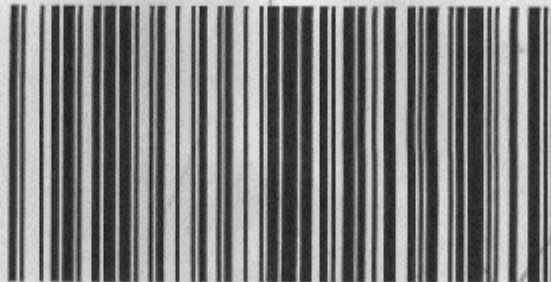


CONTRACT FOR CARRIAGE / DISPATCH NOTE

2 2 2 E E E 2 2 2



DSV Road (Pty) Ltd  
t/a DSV Distribution  
PO Box 53, The Reeds 0061  
Tel (012) 673-2000  
Reg. No. 2000/016342/07  
VAT. No. 4880189685



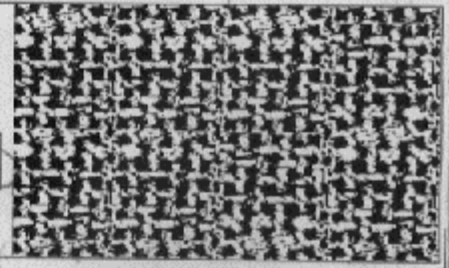
SUBBD28275956

<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ADDITIONAL TRACKING NUMBERS									

Sender's Details		Consignee's Details. Full Street Address Please				Mark Service Required	
Company Name <b>LE CREUSET</b>		Company Name <b>lecreuset</b>				<input type="checkbox"/> Same Day	
Street Address <b>BROOKLYN MALL SHOP 318 BROOKLYN MALL</b>		Street Address <b>Unit 5, Heron Park Olive Grove Industrial Estate Old Bardenlei Rd</b>				<input checked="" type="checkbox"/> Express	
Suburb <b>BROOKLYN - PRETORIA</b>		Suburb <b>Somerset West</b>				<input type="checkbox"/> With Sunrise Option	
City / Town <b>PTA</b>	Postal Code	City / Town <b>Cape Town</b>	Postal Code <b>7200</b>			<input type="checkbox"/> With Saturday Service	
Contact <b>FATIMA</b>		Contact <b>Carmen</b>				<input type="checkbox"/> Public Holiday Service	
Phone <b>012 346 2840</b>		Phone <b>021 851 7178</b>				<input type="checkbox"/> Economy	
Destination Country <input checked="" type="checkbox"/> South Africa		Other (Please Specify)				<input type="checkbox"/> After Hours	
Sender's Reference <b>4TJ2290647</b>		Analysis Code				<input type="checkbox"/> BLNS Customs Tariff	
<b>SPECIAL INSTRUCTIONS</b>							
Tariff Code <b>027766</b>		Bill To <input type="checkbox"/> Sender		<input checked="" type="checkbox"/> Consignee		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 1000.00 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)							
				<b>SENDER'S AUTHORISED SIGNATURE</b>		<b>DATE</b> <b>03-05-18</b>	
e-mail / Fax / Proof of Delivery <input type="checkbox"/>		e-mail Address / Fax Number					
<b>Total Parcels</b>		<b>NO. OF PARCELS PER DIMENSIONS</b>		<b>LENGTH (CM)</b>		<b>WIDTH (CM)</b>	
<b>1</b>		<b>Flyer</b>					
<b>HEIGHT (CM)</b>							
<b>Goods received in full without damage (unless endorsed)</b>				<b>Received By DSV</b>			
Name Of Receiver (PLEASE PRINT CLEARLY) <b>FRANCI</b>				Name Of Courier (PLEASE PRINT CLEARLY) <b>DUWON</b>			
Date Received: <b>040518</b>		Time Received: <b>0940</b>		Date Received: <b>030518</b>		Time Received: <b>1550</b>	
Signature:				Signature:			

POD COPY

Total Mass (Kg)



Version Control (01/2018)