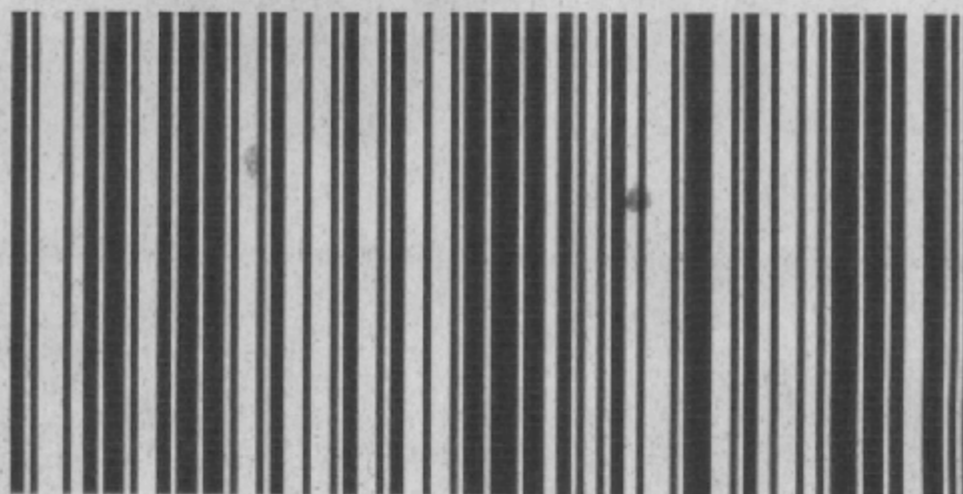


CONTRACT FOR CARRIAGE / DISPATCH NOTE



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



SUBBD28699610

2 2 2 E E E 2 2 2


ADDITIONAL TRACKING NUMBERS

Sender's Details

Consignee's Details. Full Street Address Please

Mark Service Required

Company Name Le Creuset SA  
Street Address Shop 105C  
Garden Route Mall  
CNR Va & Knysna Road  
Suburb George  
City / Town George Postal Code 6529  
Contact Elzanne  
Phone 044-0040112

Company Name Le Creuset South Africa  
Street Address Unit 5, Haron Bnk, Olive Grove  
Industrial Estate  
Old Paardeklei Road  
Suburb Somerset West  
City / Town Cape Town Postal Code 8001  
Contact Frank  
Phone 021-851 7178

Same Day

Express

With Sunrise Option

With Saturday Service

Public Holiday Service

Economy

After Hours

BLNS  
Customs  
Tariff

Destination Country South Africa  Botswana Lesotho Namibia Swaziland Other (Please Specify)

Sender's Reference UTJ 4615650 Analysis Code

SPECIAL INSTRUCTIONS

Tariff Code 27766 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 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)

Mandy  
SENDER'S AUTHORISED SIGNATURE

11/09/2018  
DATE

1. ONLINE

3. EFT

Total Mass (Kg)

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

BOX

warranty & inspite Damages  
transfer to Rosebank

Goods received in full without damage (unless endorsed)  
Name Of Receiver (PLEASE PRINT CLEARLY)

BASIL

Date Received:

120918

Time Received:

11040

Signature:

*[Handwritten Signature]*

Received By DSV  
Name Of Courier (PLEASE PRINT CLEARLY)

Curry

Date Received:

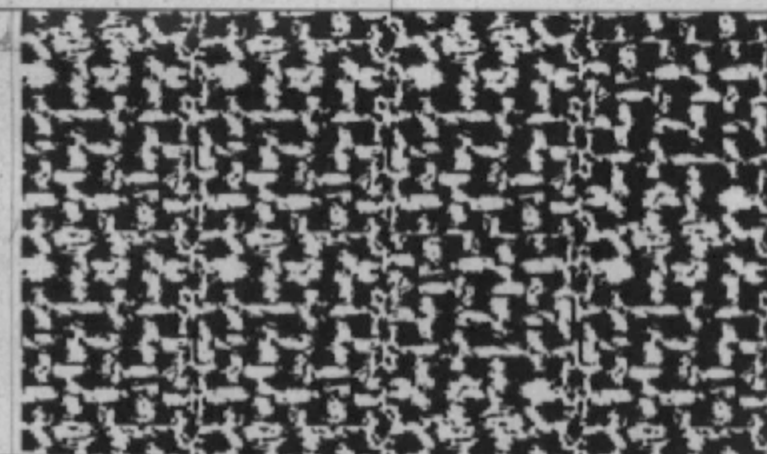
120918

Time Received:

1420

Signature:

*[Handwritten Signature]*



POD COPY

version Control (01/2018)