

CONTRACT FOR CARRIAGE / DISPATCH NOTE

2 2 2 E E E 2 2 2



DSV Boad (Pty) Ltd
t/a DSV Distribution
PO Box 63, The Reeds 0061
Tel (012) 673-2000
Reg. No. 2000/016342/D7
VAT. No. 4880189685



SUBBD28828031

POD COPY

Sender's Details		Consignee's Details. Full Street Address Please	
Company Name	LE CREUSET HYDEPARK	Company Name	LE CREUSET
Street Address	CNR 16T ROAD & JAN SMUT HYDEPARK CORNER HYDEPARK	Street Address	UNIT 7 OUDE PARK CORNER OF CHURCH & ANDKINGA STR
Suburb	SANDTON	Suburb	STELLENBOSCH
City / Town	JNB	City / Town	CAPE-TOWN
Postal Code	2196	Postal Code	
Contact	PATRICIA MOAGA	Contact	Sharon
Phone	011 325 5606	Phone	021 300 3168
Destination Country	<input checked="" type="checkbox"/> South Africa	Lesotho	<input type="checkbox"/>
	<input type="checkbox"/> Botswana	Namibia	<input type="checkbox"/>
	<input type="checkbox"/>	Swaziland	<input type="checkbox"/>
	<input type="checkbox"/>	Other (Please Specify)	<input type="checkbox"/>
Sender's Reference	NE12852979	Analysis Code	

Mark Service Required
Same Day
Express
With Sunrise Option
With Saturday Service
Public Holiday Service
Economy
After Hours
BLNS Customs Tariff

SPECIAL INSTRUCTIONS

Tariff Code: 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 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)

SENDER'S AUTHORIZED SIGNATURE: *Sharon* DATE: 10/06/18

1. ONLINE	<input type="checkbox"/>
3. EFT	<input type="checkbox"/>

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	1 BOX (CHERYL)			

Total Mass (Kg)

Goods received in full without damage (unless endorsed)

Name Of Receiver (PLEASE PRINT CLEARLY): *Cheryl*

Date Received: 10/06/18

Time Received: 13:15

Signature: *[Signature]*

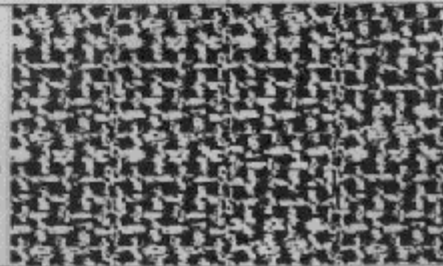
Received By DSV

Name Of Courier (PLEASE PRINT CLEARLY): *Santini*

Date Received: 10/06/18

Time Received: 16:00

Signature: *[Signature]*



Watson Control (011) 2418