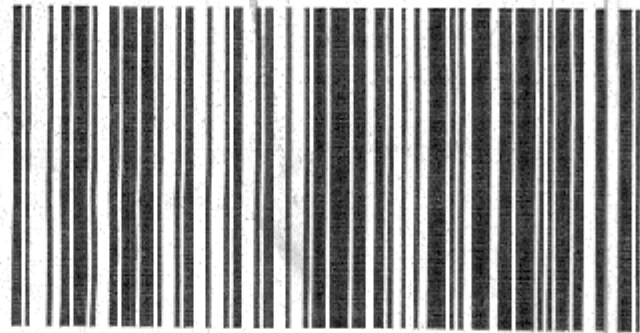


CONTRACT FOR CARRIAGE / DISPATCH NOTE

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



SUBBD28828060


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	SHOP LG43 BAJWEST MALL NR
Suburb	SANDTON	Suburb	EASTERN CAPE
City / Town	JNB	City / Town	PORT ELIZABETH
Postal Code	2196	Postal Code	
Contact	PATRICIA MOAGA	Contact	RENE
Phone	011 325 5606	Phone	

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

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)
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Sender's Reference	Uti4294451	Analysis Code	
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SPECIAL INSTRUCTIONS							
Tariff Code	027766	Bill To Sender	<input checked="" type="checkbox"/>	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 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)

*Shayne*  
SENDER'S AUTHORIZED SIGNATURE      DATE 13/08/18

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

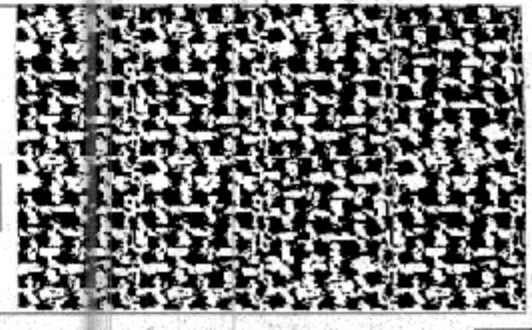
e-mail / Fax / Proof of Delivery  e-mail Address / Fax Number

Total Parcels	NO. OF PARCELS PER DIMENSIONS	LENGTH (CM)	WIDTH (CM)	HEIGHT (CM)
1	1 BOX			

Total Mass (Kg)

Goods received in full without damage (unless endorsed)  
Name Of Receiver (PLEASE PRINT CLEARLY)  
Yolanda  
Date Received: 16/08/18  
Time Received: 1326  
Signature: *[Signature]*

Received By DSV  
Name Of Courier (PLEASE PRINT CLEARLY)  
CHRIS  
Date Received: 14/08/18  
Time Received: 1515  
Signature: *[Signature]*



Version Control (01/2018)