

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



SUBBD28828062

2 2 2 E E E 2 2 2


Sender's Details

Company Name **LE CREUSET HYDEPARK**  
 Street Address **CNR 16T ROAD & JAN SMUT HYDEPARK CORNER HYDEPARK**  
 Suburb **SANDTON**  
 City / Town **JNB** Postal Code **2196**  
 Contact **PATRICIA MOAGA**  
 Phone **011 325 5606**

Consignee's Details. Full Street Address Please

Company Name **LE CREUSET**  
 Street Address **SHOP 45 SOMERSET MALL N2 and R44 SOMERSET WEST**  
 Suburb **SOMERSET WEST**  
 City / Town **CAPE TOWN** Postal Code **1180**  
 Contact **BELIZE**  
 Phone **021 851 0661**

- Mark Service Required
- Same Day
  - Express
  - With Sunrise Option
  - With Saturday Service
  - Public Holiday Service
  - Economy
  - After Hours

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

Sender's Reference **UT14260514**

SPECIAL INSTRUCTIONS

Tarif Code **027766** Bill To  Sender  Consignee  Other (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 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 AUTHORISED SIGNATURE  
 DATE **16/08/2018**

- BLNS Customs Tariff
- 1. ONLINE
  - 3. EFT

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**

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

**RENE**

Date Received: **20 08 18** Time Received: **12 50**

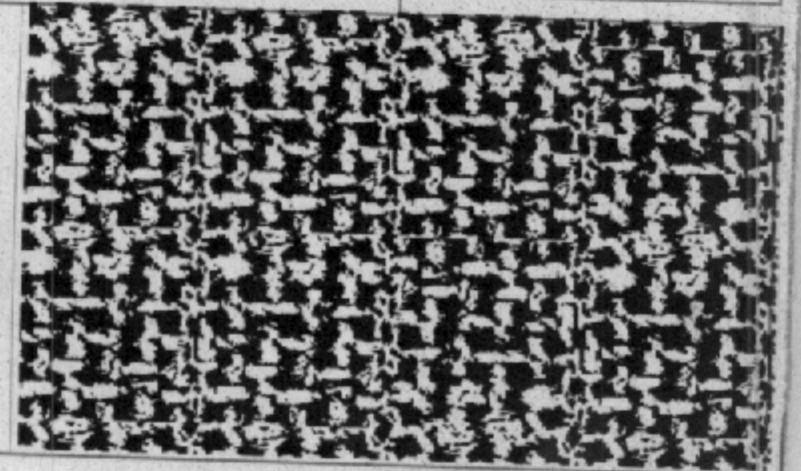
Signature: *[Signature]*

Received By DSV  
 Name Of Courier (PLEASE PRINT CLEARLY)

**CHRIS**

Date Received: **16 08 18** Time Received: **15 30**

Signature: *[Signature]*



Total Mass (Kg)

POD COPY