



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



SUBBD28943317

ADDITIONAL
TRACKING
NUMBERS

Sender's Details				Consignee's Details. Full Street Address Please				Mark Service Required	
Company Name: LE CREUSET BALLITO JUSTION				Company Name: LE CREUSET				<input type="checkbox"/> Same Day	
Street Address: SHOP 244 LEONORA DRIVE BALLITO DOLPHIN COAST DURBAN				Street Address: 90 WILLIAM CAMPBELL DRIVE LA LUCIA SHOPPING MALL SHOP 3 DURBAN NORTH				<input type="checkbox"/> Express	
Suburb: DURBAN				Suburb: DURBAN NORTH				<input type="checkbox"/> With Sunrise Option	
City / Town: DUR		Postal Code: 4399		City / Town: DURBAN		Postal Code: 4000		<input type="checkbox"/> With Saturday Service	
Contact: SONITHA SASHA				Contact: SONITHA				<input type="checkbox"/> Public Holiday Service	
Phone: 032 0040138				Phone: 031 512 5045				<input checked="" type="checkbox"/> Economy	
Destination Country: South Africa		<input checked="" type="checkbox"/> Botswana		<input type="checkbox"/> Lesotho		<input type="checkbox"/> Namibia		<input type="checkbox"/> Swaziland	
Other: (Please Specify)									
Sender's Reference: UTI				Analysis Code: -11				<input type="checkbox"/> After Hours	
SPECIAL INSTRUCTIONS FRAGILE								<input type="checkbox"/> BLNS Customs Tariff	
Tariff Code: 027766		Bill To: <input type="checkbox"/> Sender		Consignee: <input type="checkbox"/>		Other: <input type="checkbox"/> (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).									
				SENDER'S AUTHORISED SIGNATURE				DATE	
e-mail / Fax / Proof of Delivery <input type="checkbox"/>				e-mail Address / Fax Number					
Total Parcels		NO. OF PARCELS PER DIMENSIONS		LENGTH (CM)		WIDTH (CM)		HEIGHT (CM)	
1		1		x		BUBBLEWRAP UNIT			
Goods received in full without damage (unless endorsed)				Received By DSV					
Name Of Receiver (PLEASE PRINT CLEARLY): SITHEMBIILE				Name Of Courier (PLEASE PRINT CLEARLY): MUS9					
Date Received: 250918		Time Received: 1210		Date Received: 210918		Time Received: 1413			
Signature: Sashas				Signature: Su					
Total Mass (Kg)									

POD COPY

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