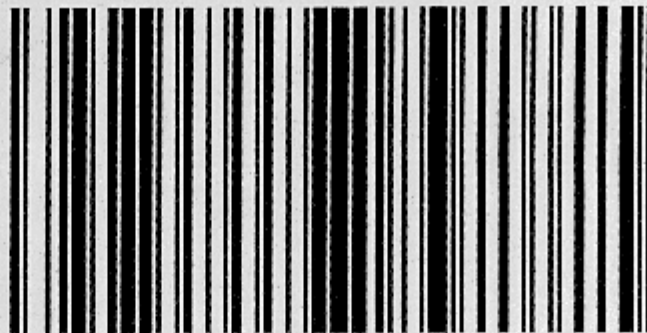


CONTRACT FOR CARRIAGE / DISPATCH NOTE

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



SUBBD28943340


<b>Sender's Details</b>		<b>Consignee's Details. Full Street Address Please</b>				<b>Mark Service Required</b>	
Company Name..... <b>LE CREUSET BALLITO JUSTION</b>		Company Name..... <b>LE CREUSET WALMER PARK</b>				<input type="checkbox"/> Same Day	
Street Address..... <b>SHOP 244 LEONORA DRIVE BALLITO DOLPHIN COAST</b>		Street Address..... <b>103 WALMER PARK STOPPING 4 CENTRE</b>				<input type="checkbox"/> Express	
Suburb..... <b>DURBAN</b>		Suburb..... <b>WALMER</b>				<input type="checkbox"/> With Sunrise Option	
City / Town <input type="text" value="DUR"/>	Postal Code..... <b>4399</b>	City / Town <input type="text" value="PORT ELIZABETH"/>	Postal Code..... <b>6070</b>			<input type="checkbox"/> With Saturday Service	
Contact..... <b>SARON SONITHA</b>		Contact..... <b>RENE</b>				<input type="checkbox"/> Public Holiday Service	
Phone..... <b>032 0040138</b>		Phone..... <b>041 367 2318</b>				<input checked="" type="checkbox"/> Economy	
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)
Sender's Reference <b>UT15124099</b>		Analysis Code				<input type="checkbox"/> BLNS Customs Tariff	
<b>SPECIAL INSTRUCTIONS</b>							
Tariff Code <input type="text" value="027766"/>		Bill To <input type="checkbox"/> Sender		Consignee <input type="checkbox"/>		Other (Name Please) <input type="checkbox"/>	
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)							
e-mail / Fax / Proof of Delivery <input type="checkbox"/>				e-mail Address / Fax Number			
<b>Total Parcels</b>		<b>NO. OF PARCELS PER DIMENSIONS</b>	<b>LENGTH (CM)</b>	<b>WIDTH (CM)</b>	<b>HEIGHT (CM)</b>	<b>Total Mass (Kg)</b>	
<input type="text"/>		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
<b>Goods received in full without damage (unless endorsed)</b>				<b>Received By DSV</b>			
Name Of Receiver (PLEASE PRINT CLEARLY) <b>T I F F A N Y</b>				Name Of Courier (PLEASE PRINT CLEARLY) <b>MUSY</b>			
Date Received: <b>221018</b>		Time Received: <b>1239</b>		Date Received: <b>181018</b>		Time Received: <b>1634</b>	
Signature:				Signature:			

POD COPY

