



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



SUBBD28981513

SUBHT02711053
 ADDITIONAL 4
 TRACKING
 NUMBERS

Sender's Details		Consignee's Details. Full Street Address Please				Mark Service Required	
Company Name: <u>Rustenburg Toyota</u>		Company Name: <u>Toyota SA</u>				<input type="checkbox"/> Same Day	
Street Address: <u>4444 Korokoro Avenue</u>		Street Address: <u>Stanley 1 Nesco park gate 3</u>				<input type="checkbox"/> Express	
Suburb: <u>Waterfall East</u>		Suburb: <u>Spartan Crescent</u>				<input type="checkbox"/> With Sunrise Option	
City / Town: <u>RTB</u>	Postal Code: _____	City / Town: <u>JHB</u>	Postal Code: _____			<input type="checkbox"/> With Saturday Service	
Contact: <u>Wille</u>		Contact: <u>Rose Mary</u>				<input type="checkbox"/> Public Holiday Service	
Phone: <u>0145 23 3000</u>		Phone: <u>011 509 2369</u>				<input type="checkbox"/> Economy	
Destination Country: <u>South Africa</u>	<u>Botswana</u>	<u>Lesotho</u>	<u>MOAR</u>	<u>Swaziland</u>	<input type="checkbox"/> After Hours		
Sender's Reference: <u>PZU52DD407</u>		ONE ONLY <u>SA</u>				<input type="checkbox"/> BLNS Customs Tariff	
SPECIAL INSTRUCTIONS							
Tariff Code: <u>008483</u>		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 R1000.00 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 14.6 AND 14.7 OVERLEAF).							
e-mail / Fax / Proof of Delivery <input type="checkbox"/>		e-mail Address / Fax Number: <u>53303KK03000</u> Box DAMAGED SA					
Total Parcels: <u>3</u>		NO. OF PARCELS PER DIMENSIONS		LENGTH (CM)		WIDTH (CM)	
				<u>1x35</u>		<u>1x29</u>	
				<u>1x143</u>		<u>1x46</u>	
				<u>1x33</u>		<u>1x18</u>	
						<u>1x20</u>	
						<u>1x24</u>	
						<u>1x23</u>	
						<u>15</u>	
Goods received in full without damage (unless endorsed) Name Of Receiver (PLEASE PRINT CLEARLY): <u>SA</u>				Received By DSV Name Of Courier (PLEASE PRINT CLEARLY): <u>P1750</u>			
Date Received: <u>21/01/19</u>		Time Received: <u>1108</u>		Date Received: <u>17/01/19</u>		Time Received: <u>1620</u>	
Signature: <u>[Signature]</u>				Signature: <u>PMB</u>			

POD COPY

Version Control: (01/2016)