

CONTRACT FOR CARRIAGE / DISPATCH NOTE



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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

ADDITIONAL
TRACKING
NUMBERS

SUBBD29245140

Sender's Details			Consignee's Details. Full Street Address Please				Mark Service Required	
Company Name <u>Le Creuset Watercrest</u>			Company Name <u>Le Creuset Warehouse</u>				Same Day	
Street Address <u>Shop UG 04</u>			Street Address <u>Unit S Heron Park</u>				Express	
<u>Watercrest MALU</u>			<u>Olive Grove Industrial Estate</u>				With Sunrise Option	
<u>WATERFALL</u>			<u>Old Paarduiel Road</u>				With Saturday Service	
Suburb <u>Du'INANDA ROAD</u>			Suburb <u>Somerset West</u>				Public Holiday Service	
City / Town <u>DURBAN</u> Postal Code			City / Town <u>CAPE TOWN</u> Postal Code <u>8001</u>				Economy <input checked="" type="checkbox"/>	
Contact <u>Supersande</u>			Contact <u>TERRA FRANCI</u>				After Hours	
Phone <u>031 763 1525</u>			Phone <u>021 851-7178</u>				BLNS Customs Tariff	
Destination Country	South Africa	Botswana	Lesotho	Namibia	Swaziland	Other	(Please Specify)	
Sender's Reference <u>DD magest Replacements</u>			Analysis Code				1. ONLINE <input type="checkbox"/>	

SPECIAL INSTRUCTIONS

Tariff Code Bill To Consignee Other (Name Please)

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)

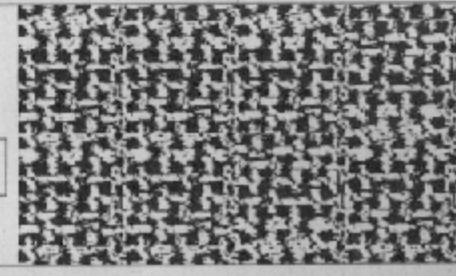
SENDER'S AUTHORIZED SIGNATURE [Signature] DATE 01/02/18

3. EFT

Total Mass (Kg)

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)
<u>1</u>	<u>Box</u>			

Goods received in full without damage (unless endorsed)		Received By DSV	
Name Of Receiver (PLEASE PRINT CLEARLY)		Name Of Courier (PLEASE PRINT CLEARLY)	
<u>BASIL</u>		<u>SIYABONGA</u>	
Date Received:	Time Received:	Date Received:	Time Received:
<u>04 02 19</u>	<u>09 50</u>	<u>01 02 19</u>	<u>15 00</u>
Signature: <u>[Signature]</u>		Signature: <u>[Signature]</u>	



COPY