

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. 4680189685



SUBBD29418176

2 2 2 E E E 2 2 2

SUBMIT 13464341
ADDITIONAL
TRACKING
NUMBERS

Sender's Details		Consignee's Details. Full Street Address Please				Mark Service Required					
Company Name LE CREUSET JHB		Company Name MADIKWE GAME RESERVE				<input type="checkbox"/> Same Day					
Street Address UNIT 4, EASTGATE BUSINESS PARK, CNR MARLBORO DRIVE & SOUTH RD		Street Address MADIKWE				<input type="checkbox"/> Express					
Suburb SANDTON		Suburb NORTH WEST				<input type="checkbox"/> With Sunrise Option					
City / Town JHB Postal Code		City / Town NORTH WEST Postal Code 2840				<input type="checkbox"/> With Saturday Service					
Contact DELANE		Contact LEANNE				<input checked="" type="checkbox"/> Public Holiday Service					
Phone 0735052470		Phone 062 495 0125				<input type="checkbox"/> After Hours					
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)		BLNS Customs Tariff				<input type="checkbox"/> 1. ONLINE					
Sender's Reference STOCK Analysis Code		SPECIAL INSTRUCTIONS FRAGILE				<input type="checkbox"/> 3. EFT					
Tariff Code		Bill To <input type="checkbox"/> Sender <input type="checkbox"/> Consignee <input type="checkbox"/> Other (Name Please) <input type="checkbox"/>		If Consignee Or Other (Third Party) Is Billed, Sender Remains Liable For Unpaid Charges.		Total Mass (Kg)					
<p>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, 14.8 AND 14.7 OVERLEAF)</p>											
e-mail / Fax / Proof of Delivery <input type="checkbox"/>		e-mail Address / Fax Number		<p><i>DeLaur</i> SENDER'S AUTHORISED SIGNATURE</p>		<p><i>21/11/2018</i> DATE</p>					
Total Parcels		NO. OF PARCELS PER DIMENSIONS		LENGTH (CM)		WIDTH (CM)		HEIGHT (CM)		Total Mass (Kg)	
2		boxes		46		46		51		54kg	
Goods received in full without damage (unless endorsed) Name Of Receiver (PLEASE PRINT CLEARLY)				Received By DSV Name Of Courier (PLEASE PRINT CLEARLY)							
Etienne				M. M. M. M.							
Date Received: 23/11/18		Time Received: 17:20		Date Received: 21/11/18		Time Received: 15:30					
Signature: <i>GA</i>				Signature: <i>[Signature]</i>							

POD COPY

Version Control (01/2016)