

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



SUBBD29718996

Sender's Details		Consignee's Details. Full Street Address Please						Mark Service Required	
Company Name <u>R. MEYER</u>		Company Name <u>LE CREUSET</u>						<input type="checkbox"/> Same Day	
Street Address <u>3302 ST JOHNS KARKLOOF RD</u>		Street Address <u>UNIT 5 HERON PARK OLIVE GROVE INDUSTRIAL</u>						<input type="checkbox"/> Express	
Suburb		Suburb						<input type="checkbox"/> With Sunrise Option	
City / Town <u>HOWICK</u> Postal Code		City / Town <u>SOMERSET WEST</u> Postal Code						<input type="checkbox"/> With Saturday Service	
Contact		Contact <u>MARY</u>						<input type="checkbox"/> Public Holiday Service	
Phone <u>0839812813</u>		Phone <u>021-851-7178</u>						<input checked="" type="checkbox"/> Economy	
Destination Country		South Africa <input checked="" type="checkbox"/>		Botswana		Lesotho		Namibia	
						Swaziland		Other (Please Specify)	
Sender's Reference		Analysis Code						<input type="checkbox"/> After Hours	
SPECIAL INSTRUCTIONS									
Tarrif Code <u>027877</u>		Bill To <input type="checkbox"/> Sender		Consignee <input type="checkbox"/>		Other (Name Please) <input type="checkbox"/>		BLNS Customs Tariff	
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			
Total Parcels		NO. OF PARCELS PER DIMENSIONS		LENGTH (CM)		WIDTH (CM)		HEIGHT(CM)	
<u>1</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>N A A I L A H</u>					<u>APRIZI...</u>				
Date Received:		Time Received:		Date Received:		Time Received:		Total Mass (Kg)	
<u>260918</u>		<u>1103</u>		<u>210918</u>		<u>1550</u>			
Signature: <u>[Signature]</u>					Signature: <u>[Signature]</u>				

POD COPY

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