

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. 4880189685



SUBBD29829729

2 2 2 E E E 2 2 2


ADDITIONAL  
TRACKING  
NUMBERS

Sender's Details		Consignee's Details, Full Street Address Please	
Company Name	PVT	Company Name	Le Creuset
Street Address	40 Mount Addison Cres (Hwy 2104)	Street Address	Unit 5, Olive Grove industrial
Suburb	MIDSTREAM	Suburb	Old Paardevlei Rd
City / Town	CENTURION	City / Town	CAPE TOWN
Contact	Anzette	Contact	MARY De Wit
Phone	082 7162 690	Phone	021 851 7178

Mark Service Required

Same Day

Express

With Sunrise Option

With Saturday Service

Public Holiday Service

Economy

After Hours

BLNS  
Customs  
Tariff

Destination Country	South Africa	Botswana	Lesotho	Namibia	Swaziland	Other (Please Specify)
Sender's Reference					Analysis Code	

**SPECIAL INSTRUCTIONS**

Tariff Code **027877** Bill To  Sender 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)

*Anzette* **SENDER'S AUTHORISED SIGNATURE** *06/12/18* **DATE**

1. ONLINE

3. EFT

e-mail / Fax / Proof of Delivery  e-mail Address / Fax Number

Total Parcels	NO. OF PARCELS PER DIMENSIONS	LENGTH (CM)	WIDTH (CM)	HEIGHT (CM)
1				

Total Mass (Kg)

Goods received in full without damage (unless endorsed)  
Name Of Receiver (PLEASE PRINT CLEARLY)  
**Margehle**

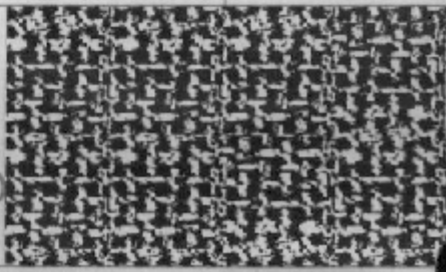
Date Received: **10/12/18** Time Received: **10:15**

Signature: *[Signature]*

Received By DSV  
Name Of Courier (PLEASE PRINT CLEARLY)  
**Silas**

Date Received: **06/12/18** Time Received: **14:00**

Signature: *[Signature]*



POD COPY

Version Control (01/2018)