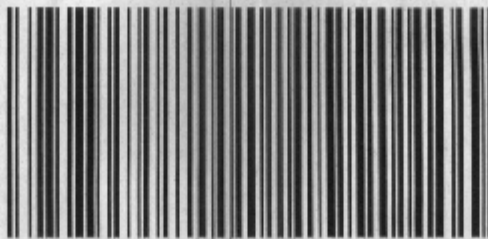


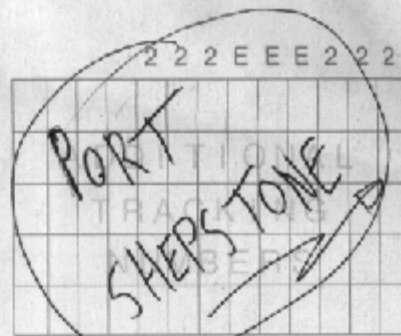
CONTRACT FOR CARRIAGE / DISPATCH NOTE



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. 4890169685



SUBBD29934423



Sender's Details

Company Name: **ATM SOL JH**
 Street Address: **7 DELPHI STREET**
 Suburb: **JHB**
 City/Town: **JHB** Postal Code: **JHB**
 Contact: **KISHA**
 Phone: **011 461 1111**

Consignee's Details: Full Street Address Please

Company Name: **ATM SOL Portshepstone**
 Street Address: **HOLD FOR COLLECTION**
 Suburb: **PORT SHEPSTONE**
 City/Town: **Portshepstone** Postal Code: **9400**
 Contact: **KISHA**
 Phone: **011 461 1111**

Mark Service Required

Same Day

Express

With Sunrise Option

With Saturday Service

Public Holiday Service

Economy

After Hours

Destination Country: South Africa Botswana Lesotho Namibia Swaziland Other (Please Specify)


Sender's Reference: Analysis Code:

SPECIAL INSTRUCTIONS

Tariff Code: **027766** 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).

SENDER'S AUTHORIZED SIGNATURE:  DATE: **19/7/19**

BLNS Customs Tariff


1. ONLINE

3. EFT

Total Mass (Kg)

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				

Goods received in full without damage (unless endorsed)
 Name Of Receiver (PLEASE PRINT CLEARLY): **BRI J**
 Date Received: **25 07 19** Time Received: **11 00**
 Signature: 

Received By DSV
 Name Of Receiver (PLEASE PRINT CLEARLY): **[Signature]**
 Date Received: **19 07 19** Time Received: **14 00**
 Signature: 