

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



SUBBD29981160

2 2 2 E E E 2 2 2

TAKE A LOT  
 TRANSFERENTIAL  
 TRACKING  
 NUMBERS

Sender's Details		Consignee's Details. Full Street Address Please	
Company Name <i>Le Creuset Walmer</i>	Company Name <i>Le Creuset Take Atoke</i>	Company Name <i>Le Creuset Take Atoke</i>	Company Name <i>Le Creuset Take Atoke</i>
Street Address <i>Shop 103</i>	Street Address <i>Unit 5, Heron Park</i>	Street Address <i>Unit 5, Heron Park</i>	Street Address <i>Unit 5, Heron Park</i>
Suburb <i>Walmer Part</i>	Suburb <i>Olive Grove, Industrial Estate, Old Paardevlei Rd</i>	Suburb <i>Walmer Part</i>	Suburb <i>Olive Grove, Industrial Estate, Old Paardevlei Rd</i>
City/Town <i>Walmer</i>	City/Town <i>Somerset West</i>	City/Town <i>Somerset West</i>	City/Town <i>Somerset West</i>
Postal Code <i>6001</i>	Postal Code <i>7100</i>	Postal Code <i>7100</i>	Postal Code <i>7100</i>
Contact <i>Pere</i>	Contact <i>Volanda / Alhadia</i>	Contact <i>Volanda / Alhadia</i>	Contact <i>Volanda / Alhadia</i>
Phone <i>021 3672318</i>	Phone <i>021 8511178</i>	Phone <i>021 8511178</i>	Phone <i>021 8511178</i>

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: *UT116570275* Analysis Code: \_\_\_\_\_

**SPECIAL INSTRUCTIONS**

Tariff Code: \_\_\_\_\_ 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)

13/02/2019

SENDER'S AUTHORISED SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

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)
<i>1</i>				

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

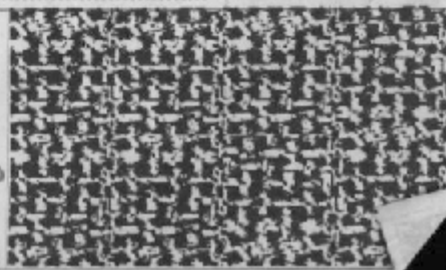
Date Received: *180219* Time Received: *11:20*

Signature: \_\_\_\_\_

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

Date Received: *180219* Time Received: *14:50*

Signature: \_\_\_\_\_



POD COPY

Version Control (01/2018)