

CONTRACT FOR CARRIAGE / DISPATCH NOTE

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DSV Road (Pty) Ltd  
 U/a DSV Distribution  
 PO Box 63, The Reeds 0061  
 Tel (012) 673-2000  
 Reg. No. 2000/016342/07  
 VAT. No. 4880189685



SUBBD30138214


LE43605 #GRISO

<b>Sender's Details</b> Company Name: <u>Priortex</u> Street Address: <u>33 Lester rd</u> Suburb: <u>Wynberg</u> City/Town: <u>CPT</u> Postal Code: <u>Shamiel</u> Contact: <u>021 7971879</u> Phone: <u>021 7971879</u>		<b>Consignee's Details. Full Street Address Please</b> Company Name: <u>MEDIGLOW LESOTHO</u> Street Address: <u>10 LIOLI ROAD</u> <u>HER MASERU 100.</u> <u>LESOTHO</u> Suburb: <u> </u> City/Town: <u> </u> Postal Code: <u> </u> Contact: <u> </u> Phone: <u> </u>		Mark Service Required <input type="checkbox"/> Same Day <input type="checkbox"/> Express <input type="checkbox"/> With Sunrise Option <input type="checkbox"/> With Saturday Service <input type="checkbox"/> Public Holiday Service <input checked="" type="checkbox"/> Economy <input type="checkbox"/> After Hours
Destination Country: <input 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)	Sender's Reference: <u> </u> Analysis Code: <u> </u>			

**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: [Signature] DATE: 24/7/19

BLNS Customs Tariff

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)
<u>1</u>	<u> </u>	<u>47</u>	<u>47</u>	<u>28</u>

Total Mass (Kg): 15kg

Goods received in full without damage (unless endorsed) Name Of Receiver (PLEASE PRINT CLEARLY): <u>MOLIEHI</u> Date Received: <u>060819</u> Time Received: <u>0838</u> Signature: <u>[Signature]</u>	Received By DSV Name Of Courier (PLEASE PRINT CLEARLY): <u>Fahreeq</u> Date Received: <u>240719</u> Time Received: <u>1550</u> Signature: <u>[Signature]</u>	
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