

CONTRACT FOR CARRIAGE / DISPATCH NOTE



UTI South Africa (Pty) Ltd
 Via UTI Sun Couriers
 PO Box 63, The Reeds 0081
 Tel: (012) 673-2000
 Reg. No. 2904/015747/07
 VAT Reg. No. 4260213873



SUBCD25283343

Sender's Details Company Name: LE CREUSET HYDE PARK Street Address: C/O 6TH RD & JAN SMUTS SHOP 71 UPPER MALL LEVEL 6 HYDEPARK SANDTON Suburb: SANDTON City / Town: JNB Postal Code: 2196 Contact: SIMONE PRINCEE PAT Phone: 011 325 5606		Consignee's Details. Full Street Address Please Company Name: LE CREUSET Street Address: UNIT 5 HERON PARK OLIVE GROVE Suburb: OLD PAARDEVLEI ROAD SOMERSET WEST City / Town: SOMERSET WEST (SSW) Postal Code: Contact: VICKY Phone: 021 851 7178		Mark Service Required <input type="checkbox"/> Same Day <input checked="" type="checkbox"/> Express <input type="checkbox"/> With Sunrise Option <input type="checkbox"/> With Saturday Service <input type="checkbox"/> Public Holiday Service <input type="checkbox"/> Economy <input type="checkbox"/> After Hours
Destination Country: South Africa		Analysis Code: 		BLNS Customs Tariff Lines
Sender's Reference: 		SPECIAL INSTRUCTIONS: 		Depot Hand In
Bill Charges To Account No.: 027766		Bill To: <input checked="" type="checkbox"/> Sender <input type="checkbox"/> Consignee <input type="checkbox"/> Other (Name Please)		DATE: 02/01/18
IF THIS SHIPMENT CONTAINS ANY DANGEROUS GOODS ALL REGULATIONS MUST BE COMPLIED WITH. THIS IS YOUR RESPONSIBILITY AS SHIPPER. (SEE CLAUSE 12.14 OVERLEAF) GOODS ARE SHIPPED AT OWNER'S RISK. SUBJECT TO CONTRACT FOR CARRIAGE OVERLEAF. UTI SUN COURIERS LIMITS ITS LIABILITY TO R250.00 PER SHIPMENT. (SEE CLAUSE 12.5 OVERLEAF). IF YOU WISH UTI SUN COURIERS TO ACCEPT A HIGHER LIABILITY, THE VALUE OF THIS SHIPMENT MUST BE DECLARED IN THE SPACE PROVIDED. (SEE CLAUSES 12.5, 12.6 AND 12.7 OVERLEAF).				
e-mail / Fax / Proof of delivery: <input type="checkbox"/>		e-mail Address / Fax Number: 		Original POD Required P.O. Box:
Total Parcels: 		Dimensions In Centimetres: 		Mass (kg):
Goods received in full without damage (unless endorsed) Name Of Receiver (PLEASE PRINT CLEARLY): Madina Date Received: 03 01 18		Name Of Courier (PLEASE PRINT CLEARLY): JAMIS AD Date Received: 02 01 18		Time Received: 1200
Time Received: 1050		Signature: [Signature]		Signature: [Signature]

POD COPY

Protech S.J. (011) 474 1828 Version Control (10/2012) 3440014 1/12