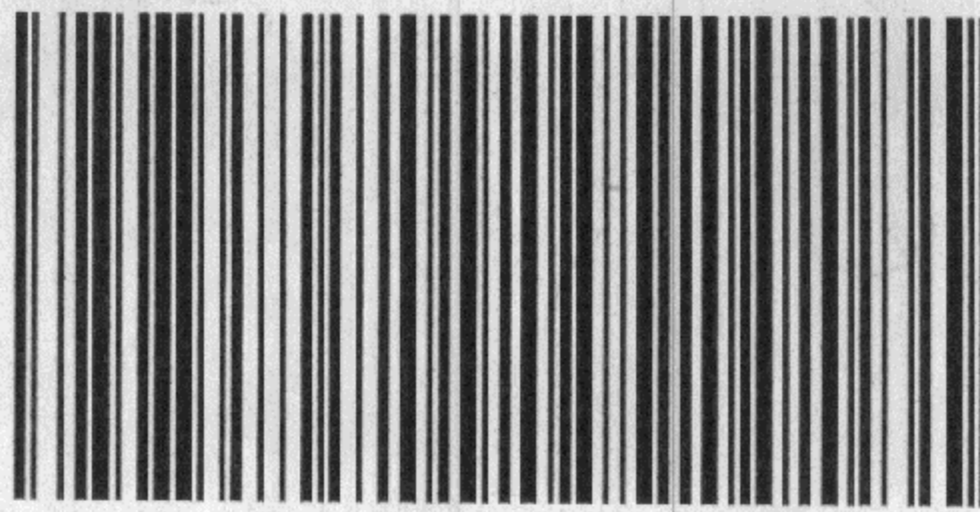


CONTRACT FOR CARRIAGE / DISPATCH NOTE



UTI South Africa (Pty) Ltd
 t/a UTI Sun Couriers
 PO Box 63, The Reeds 0061
 Tel (012) 673-2000
 Reg. No. 2004/015747/07
 VAT Reg. No. 4260213873



SUBCD26250252

Sender's Details		Consignee's Details. Full Street Address Please					Mark Service Required	
Company Name LE CREUSET		Company Name LE CREUSET CPT					<input type="checkbox"/> Same Day	
Street Address SHOP UL 262, PAVILION SHOPPING CENTRE JACK MAARTIENS DRIVE		Street Address UNIT 5, HERON PARK OLIVE GROVE IND ESTATE SOMERSET WEST					<input type="checkbox"/> Express	
Suburb WESTVILLE		Suburb					<input type="checkbox"/> With Sunrise Option	
City / Town DUR Postal Code 4000		City / Town SOMERSET WEST (SSW) Postal Code 8000					<input type="checkbox"/> With Saturday Service	
Contact RASHREE / TRISINA		Contact FRANCI / JASMIN					<input type="checkbox"/> Public Holiday Service	
Phone 031 265 8455		Phone 021 851 7178					<input checked="" type="checkbox"/> Economy	
Destination Country		Other (Please Specify)					<input type="checkbox"/> After Hours	
South Africa <input checked="" type="checkbox"/>							<input type="checkbox"/> BLNS Customs Tariff Lines	
Botswana							<input type="checkbox"/> Depot Hand In	
Lesotho							<input type="checkbox"/> Original POD Required P.O. Box	
Namibia								
Swaziland								
Other								
Sender's Reference		Analysis Code						
SPECIAL INSTRUCTIONS								
Bill Charges To Account No. 027756		Bill To <input checked="" type="checkbox"/> Sender <input type="checkbox"/> Consignee <input type="checkbox"/> Other (Name Please) <input type="checkbox"/>						
If Consignee Or 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 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			
Total Parcels		Dimensions In Centimetres		HEIGHT		Mass (kg)		
NO. OF PARCELS		LENGTH		WIDTH		MASS (kg)		
1								
Goods received in full without damage (unless endorsed)				Received by UTI				
Name Of Receiver (PLEASE PRINT CLEARLY)				Name Of Courier (PLEASE PRINT CLEARLY)				
EI VINO				AARON				
Date Received:		Time Received:		Date Received:		Time Received:		
25 04 18		09 11 2		23 04 18		15 15		
Signature				Signature				

POD COPY

Lithotech SJ (011) 474-1828 Version Control (10/2012) SUNCD0014 10/12