

CONTRACT FOR CARRIAGE / DISPATCH NOTE



UTi South Africa (Pty) Ltd
 1/4 UTi Sun Couriers
 PO Box 63, The Reeds 0061
 Tel (012) 873-2000
 Reg. No. 2004/015747/07
 VAT Reg. No. 4260219873



SUBCD29086783

POD COPY

Sender's Details		Consignee's Details. Full Street Address Please		Mark Service Required	
Company Name LE CREUSET PAVILLION		Company Name LE CREUSET GATEWAY		<input type="checkbox"/> Same Day	
Street Address JACK HARTENS DRIVE WESTVILLE DURBAN		Street Address SHOP G066 1 PALM BOULEVARDS GATEWAY THEATRE OF SHOPPING		<input type="checkbox"/> Express	
Suburb		Suburb UMHLANGA		<input type="checkbox"/> With Sunrise Option	
City / Town DUR Postal Code 4000		City / Town DURBAN Postal Code		<input type="checkbox"/> With Saturday Service	
Contact TRISINA RACHREE		Contact GASHA CASSENDA		<input type="checkbox"/> Public Holiday Service	
Phone 031 265 8455		Phone 031-100139		<input type="checkbox"/> Economy	

Destination Country	South Africa	Botswana	Lesotho	Namibia	Swaziland	Other (Please Specify)
Sender's Reference	4T11903647			Analysis Code		

SPECIAL INSTRUCTIONS

Bill Charges To Account No. **027766** Bill To Sender Consignee Other (Name Please)

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).

SENDER'S AUTHORISED SIGNATURE *[Signature]* **DATE** **11/04/18**

e-mail / Fax / Proof of delivery e-mail Address / Fax Number

Total Parcels	Dimensions In Centimetres			Mass (kg)
	NO. OF PARCELS	LENGTH	WIDTH	
1	1	X	FLYER	

<p>Goods received in full without damage (unless endorsed)</p> <p>Name Of Receiver (PLEASE PRINT CLEARLY)</p> <p>RENEE</p> <p>Date Received: P 20 4 18</p> <p>Time Received: 1324</p> <p>Signature <i>[Signature]</i></p>	<p>Received by UTI</p> <p>Name Of Courier (PLEASE PRINT CLEARLY)</p> <p>AARON</p> <p>Date Received: 09 04 18</p> <p>Time Received: 1600</p> <p>Signature <i>[Signature]</i></p>
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BLNS Customs Tariff Lines

Depot Hand In

Original POD Required P.O. Box