CONTRACT FOR CARRIAGE / DISPATCH NOTE

UTi Sun Couriers

UTi South Africa (Pty) Ltd
t/a UTi Sun Couriers
PO Box 63, The Reads 0061
Tel (012) 673-2000
Reg. No. 2004/015747/07
VAT Reg. No. 4200213873

SUBCD24197619

ADDITIONAL TRACKING NUMBERS

POD COPY

Sender's Details	Consignee's Details. Full Street Address Please	Mark Service Required
Company Name: ANNE QUINKELMAN	Company Name: Le Creuset	Same Day
Street Address: c/o Pilot fish 592 Umgeni Road DURBAN	Street Address: Unit 5, Heron Park Olive Grove Industrial Somerset West	Express With Sunrise Option With Saturday Service Public Holiday Service
Suburb: MORNINGSIDE	Suburb:	Economy
City / Town: DURBAN Postal Code: 4001	City / Town: CAPE TOWN Postal Code: 7130	After Hours
Contact: Anne	Contact: MARY de Coito	
Phone: 0837991475	Phone: 021-851 7176	

Destination Country	South Africa X	Botswana	Lesotho	Namibia	Swaziland	Other (Please Specify)

Sender's Reference: | Analysis Code:

BLNS Customs Tariff Lines

SPECIAL INSTRUCTIONS

Depot Hand In

Bill Charges To Account No: 0 2 7 3 7 7 | 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: A Quinkelman DATE: 7/10/2016

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

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

MARCHALL

Original POD Required
P.O. Box

Goods received in full without damage (unless endorsed)

Name Of Receiver (PLEASE PRINT CLEARLY): MARCHALL

Date Received: 1 0 / 1 0 / 1 6

Time Received: 0 9 : 3 0

Signature:

Received by UTi

Name Of Courier (PLEASE PRINT CLEARLY):

Date Received: 0 9 / M D / Y Y

Time Received: H H : M M

Signature: