

CONTRACT FOR CARRIAGE / DISPATCH NOTE



UTI South Africa (Pty) Ltd
t/a UTI Sun Couriers
PO Box 63, The Roods 0061
Tel (012) 573-2000
Reg. No. 2004/015747/07
VAT Reg. No. 4280213873



SUBCD29086763

POD COPY

Sender's Details

Company Name: **LE CREUSET PAVILLION**

Street Address: **JACK MARTENS DRIVE**

WESTVILLE

DURBAN

Suburb: **DUR**

City / Town: **DUR** Postal Code: **4000**

Contact: **Yeferson**

Phone: **031 265 8455**

Consignee's Details. Full Street Address Please

Company Name: **Le Creuset Nicolway**

Street Address: **Shop 101, Nicolway**

Shopping Center, William

Nicol drive

Suburb: **Bryanston**

City / Town: **Johannesburg** Postal Code: **2013**

Contact: **Stephanie**

Phone: **011 706 2198**

Mark Service Required

☐ Same Day

☐ Express

☐ With Sunrise Option

☐ With Saturday Service

☐ Public Holiday Service

☒ Economy

☐ After Hours

☐ BLNS Customs Tariff Lines

☐ Depot Hand In

Destination Country: ☒ South Africa ☐ Botswana ☐ Lesotho ☐ Namibia ☐ Swaziland ☐ Other (Please Specify)

Sender's Reference: **027766** Analysis Code: **027766**

SPECIAL INSTRUCTIONS **Fragile**

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: **20/10/2016**

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** **1** **1** **1** **1**

Goods received in full without damage (unless endorsed)

Name Of Receiver (PLEASE PRINT CLEARLY): **Portia**

Date Received: **21/10/16** Time Received: **12h35**

Signature: *[Signature]*

Received by UTI

Name Of Courier (PLEASE PRINT CLEARLY): **Aaron**

Date Received: **20/10/16** Time Received: **1600**

Signature: *[Signature]*

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