

# CONTRACT FOR CARRIAGE / DISPATCH NOTE

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DSV Road (Pty) Ltd  
t/a DSV Distribution  
PO Box 63, The Reeds 0061  
Tel (012) 673-2000  
Reg. No. 2000/016342/07  
VAT. No. 4880189685



SUBBD29833880

ADDITIONAL TRACKING NUMBERS									

*IN-House*  
Sender's Details

Company Name *Le Cruset*  
Street Address *Shop G 48 Fountains Mall S. Francis Dr*  
Suburb  
City / Town *Johannesburg* Postal Code *2001*  
Contact *Dyn*  
Phone *012-2930007*  
Destination Country ☐ South Africa ☐ Botswana ☐ Lesotho ☐ Namibia ☐ Swaziland ☒ Other (Please Specify)  
Sender's Reference

Consignee's Details. Full Street Address Please

Company Name *Le Cruset*  
Street Address  
Suburb  
City / Town *Somerwest - West* Postal Code  
Contact  
Phone  
Destination Country ☐ South Africa ☐ Botswana ☐ Lesotho ☐ Namibia ☐ Swaziland ☒ Other (Please Specify)  
Analysis Code

Mark Service Required

☐ Same Day

☐ Express

☐ With Sunrise Option

☐ With Saturday Service

☐ Public Holiday Service

☐ Economy

After Hours

BLNS Customs Tariff

1. ONLINE ☐

3. EFT ☐

Total Mass (Kg)

## SPECIAL INSTRUCTIONS

Tariff Code *027766* Bill To ☐ Sender Consignee ☐ Other (Name Please) ☐

If Consignee Or Other (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 14.14 OVERLEAF). GOODS ARE SHIPPED AT OWNERS RISK SUBJECT TO CONTRACT FOR CARRIAGE OVERLEAF. DSV DISTRIBUTION LIMITS ITS LIABILITY TO R 1000.00 PER SHIPMENT. (SEE CLAUSE 14.5 OVERLEAF). IF YOU WISH DSV DISTRIBUTION TO ACCEPT A HIGHER LIABILITY, THE VALUE OF THIS SHIPMENT MUST BE DECLARED IN THE SPACE PROVIDED (SEE CLAUSE 14.5 14.6 AND 14.7 OVERLEAF)

e-mail / Fax / Proof of Delivery ☐ e-mail Address / Fax Number

SENDER'S AUTHORISED SIGNATURE

DATE

*11/01/2019*

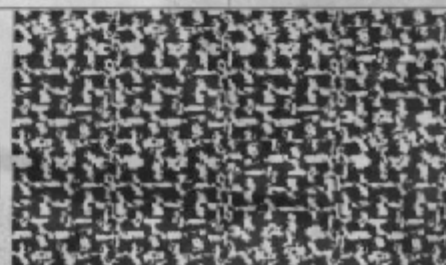
Total Parcels	NO. OF PARCELS PER DIMENSIONS	LENGTH (CM)	WIDTH (CM)	HEIGHT (CM)

Goods received in full without damage (unless endorsed)  
Name Of Receiver (PLEASE PRINT CLEARLY)

*MITCHELL*  
Date Received: *14/01/19* Time Received: *17:22:00*  
Signature: *[Signature]*

Received By DSV  
Name Of Courier (PLEASE PRINT CLEARLY)

*Ace*  
Date Received: *14/01/19* Time Received: *14:58*  
Signature: *[Signature]*



POD COPY