



Image Viewing



ReferenceId: SUBBD23511228 Image Date/Time: Wed Feb 22 14:26:28 GMT 2017

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of 2

CONTRACT FOR CARRIAGE / DISPATCH NOTE


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


SUBBD23511228

Sender's Details		Consignee's Details, Full Street Address Please		Mark Service Required	
Company Name	Le Creuset Baywest Mall	Company Name	le Creuset Warehouse	Same Day	<input type="checkbox"/>
Street Address	LQ43 Baywest Mall	Street Address	Unit 5 Iron Port, Olive grove industrial estate, do pordenes road	Express	<input checked="" type="checkbox"/>
Suburb	Port Elizabeth	Suburb	Somerset West	With Sunrise Option	<input type="checkbox"/>
City/Town	PLZ 6001	City/Town	Gqe Toon	With Saturday Service	<input type="checkbox"/>
Contact	Rene Newfeldt	Contact	Cherie	Public Holiday Service	<input type="checkbox"/>
Phone	041-004-0011	Phone	021 167 7178	Economy	<input type="checkbox"/>
Destination Country	South Africa	Postal Code	7100	After Hours	<input type="checkbox"/>
Sender's Reference	UTIS082972	Analysis Code		BLKS Custom's Tariff	<input type="checkbox"/>
SPECIAL INSTRUCTIONS Btl Charges To Account No. 027766 If this shipment contains any dangerous goods all regulations must be complied with. This is your responsibility as shipper. (SEE CLAUSE 12.11 OVERLEAF). GOODS ARE SHIPPED AT OWNERS RISK, SUBJECT TO CONTRACT FOR CARRIAGE OVERLEAF. UTI DISTRIBUTION LIMITS ITS LIABILITY TO R 250.00 PER SHIPMENT. (SEE CLAUSE 12.5 OVERLEAF). IF YOU WISH UTI DISTRIBUTION TO ACCEPT A HIGHER LIABILITY, THE VALUE OF THIS SHIPMENT MUST BE DECLARED IN THE SPACE PROVIDED. (SEE CLAUSE 12.5, 12.6 AND 12.7 OVERLEAF).				Liability: Value For Loss or Damage R <input type="text"/>	
Sender's Authorised Signature: <i>Kulpa</i> DATE: 01/02/17				Liability: (Costs Incidental To Loss, Damage Or Delay) R <input type="text"/>	
Total Parcels: 1 NO. OF PARCELS PER DIMENSIONS: 1 x 42 x 36 x 7 LENGTH (CM): 42 WIDTH (CM): 36 HEIGHT (CM): 7				Total Mass (Kg) 2	
Goods received in full without damage (unless endorsed) Name Of Receiver (PLEASE PRINT CLEARLY) Date Received: 01/02/17 Time Received: 16:18				Received By UTI Name Of Courier (PLEASE PRINT CLEARLY) Date Received: 01/02/17 Time Received: 16:18 Signature: <i>M. S. K.</i>	

A COUNTS COPY

Version Control (02/2012)



Image Viewing

ReferenceId: SUBBD23511228 Image Date/Time: Thu Feb 09 16:05:11 GMT 2017

Navigation icons: Back, Forward, Home, Search, etc.

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CONTRACT FOR CARRIAGE / DISPATCH NOTE

UTI South Africa (Pty) Ltd
1/4 UTI Distribution
PO Box 83, The Raeds 0091
Tel (012) 673-2000
Reg. No. 2004/015747/67
VAT Reg. No. 4260213873

SUBBD23511228

Sender's Details Company Name <u>Le Creuset Baywest Mail</u> Street Address <u>Baywest Mail</u> Suburb <u>Port Elizabeth</u> City/Town <u>Port Elizabeth</u> Postal Code <u>6001</u> Contact <u>Rene Newfeldt</u> Phone <u>041-004-0011</u>				Consignee's Details. Full Street Address Please Company Name <u>Le Creuset Warehouse</u> Street Address <u>Unit 5, Kronk Port, Olive Grove Industrial Estate, 40 Macdonald Road</u> Suburb <u>Somerset West</u> City/Town <u>Groenewald</u> Postal Code <u>7100</u> Contact <u>021-157-7178</u> Phone <u>021-157-7178</u>				Main Service Required <input type="checkbox"/> Standard <input type="checkbox"/> Express <input type="checkbox"/> Insured <input type="checkbox"/> Signature <input type="checkbox"/> Other (Specify)	
Destination Country <u>South Africa</u> <u>Botswana</u> <u>Lesotho</u> <u>Namibia</u> <u>Swaziland</u> <u>Other (Specify)</u>				Sender's Reference <u>UTIE0082972</u>				After Hours <input type="checkbox"/> BLN Customs (Toll)	
SPECIAL INSTRUCTIONS Bill Changes <input type="checkbox"/> To Account No. <u>027766</u> Bill To <input type="checkbox"/> Sender <input type="checkbox"/> Consignee <input type="checkbox"/> Other (Name Please) <input type="checkbox"/> If Consignee Or Other (Third Party) Is Billed, Sender Remains Liable For Unpaid Charges.								Import Place Of	
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 OWNERS RISK. SUBJECT TO CONTRACT FOR CARRIAGE OVERLEAF. UTI DISTRIBUTION LIMITS ITS LIABILITY TO R250.00 PER SHIPMENT. (SEE CLAUSE 12.5 OVERLEAF). IF YOU WISH UTI DISTRIBUTION TO ACCEPT A HIGHER LIABILITY, THE VALUE OF THIS SHIPMENT MUST BE DECLARED IN THE GRADE PROVIDED. (SEE CLAUSE 12.5, 12.8 AND 12.7 OVERLEAF).								Total Mass (Kg) <u>2</u>	
Goods / Parcel / Proof of Delivery <input type="checkbox"/> e-mail Address / Fax Number								Received By UTI Name Of Country (PLEASE PRINT CLEARLY) <u>N S I K R I E I O</u> Date Received <u>06 APR 17</u> Signature <u>[Signature]</u>	
Total Parcels <u>1</u>		NO. OF PARCELS PER DIMENSIONS <u>1 x 42 x 26 x 7</u>		LENGTH (CM)		WIDTH (CM)		HEIGHT (CM)	
Goods received in full without damage (unless endorsed) Name of Receiver (PLEASE PRINT CLEARLY) <u>Delema</u> Date Received <u>06 APR 17</u> Signature <u>[Signature]</u>								Received By UTI Name Of Country (PLEASE PRINT CLEARLY) <u>N S I K R I E I O</u> Date Received <u>06 APR 17</u> Signature <u>[Signature]</u>	

UTI Distribution (Pty) Ltd