

# CONTRACT FOR CARRIAGE / DISPATCH NOTE



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



SUBBD29245140

2 2 2 E E E 2 2 2


## Sender's Details

Company Name le Creuset Watercrest  
Street Address shop UG 04  
Watercrest mall  
WATERFALL  
Suburb DURBAN  
City / Town DURBAN Postal Code    
Contact Supersande  
Phone 031 763 1525

## Consignee's Details. Full Street Address Please

Company Name le Creuset Warehouse  
Street Address Unit S Heron Park  
Olive Grove Industrial Estate  
Old Paarduij, Road  
Suburb Somerset West  
City / Town CAPE TOWN Postal Code 8001  
Contact TERRA FRANCHI  
Phone 021 851-7178

Mark Service Required

Same Day

Express

With Sunrise Option

With Saturday Service

Public Holiday Service

☒ Economy

After Hours

BLNS  
Customs  
Tariff

Destination Country

South Africa

Botswana

Lesotho

Namibia

Swaziland

Other

(Please Specify)

Sender's Reference 00 magest REPLACEMENTS

Analysis Code

## SPECIAL INSTRUCTIONS

Tariff Code

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)

SENDER'S AUTHORISED SIGNATURE

DATE

1. ONLINE

3. EFT

Total Mass (Kg)

e-mail / Fax / Proof of Delivery

e-mail Address / Fax Number

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)

Received By DSV

Name Of Courier (PLEASE PRINT CLEARLY)

SIVABONGA

Date Received:

Time Received:

01 02 19

15 00

Signature:

Signature:

