

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



SUBBD26899374

2 2 2 E E E 2 2

Sender's Details				Consignee's Details. Full Street Address Please				Mark Service Required	
Company Name <u>AVALON TECH GROUP</u>				Company Name <u>LE CREUSET GATEWAY</u>				<input type="checkbox"/> Same Day	
Street Address <u>UNIT 13 4TH FLOOR</u>				Street Address <u>SHOP G158 GATEWAY THEATRE OF</u>				<input type="checkbox"/> Express	
<u>TYGER CHAMBERS 2</u>				<u>SHOPPING 1 PALM BOULEVARD</u>				<input type="checkbox"/> With Sunrise Option	
<u>27 WILLIE VAN SCHOOER AVE</u>				<u>NEW TOWN CENTER</u>				<input type="checkbox"/> With Saturday Service	
Suburb <u>TYGERVALLEY</u>				Suburb <u>UMHLANGA RIDGE</u>				<input type="checkbox"/> Public Holiday Service	
City / Town <u>CPT</u>		Postal Code <u>7530</u>		City / Town <u>DURBAN</u>		Postal Code <u>4321</u>		<input checked="" type="checkbox"/> Economy	
Contact <u>PIETER</u>				Contact <u>MITCHELL</u>				<input type="checkbox"/> After Hours	
Phone <u>021 300 1777</u>				Phone <u>021 300 1779</u>				<input type="checkbox"/> BLNS Customs Tariff	
Destination Country		South Africa		Lesotho		Namibia		Swaziland	
		Botswana						Other (Please Specify)	
Sender's Reference				Analysis Code					
SPECIAL INSTRUCTIONS									
Bill Charges To Account No.		<u>027766</u>		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 250.00 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 <input type="checkbox"/>				e-mail Address / Fax Number					
Total Parcels		NO. OF PARCELS PER DIMENSIONS		LENGTH (CM)		WIDTH (CM)		HEIGHT (CM)	
<u>1</u>									
Goods received in full without damage (unless endorsed) Name Of Receiver (PLEASE PRINT CLEARLY)				Received By DSV Name Of Courier (PLEASE PRINT CLEARLY)					
<u>SASHA</u>				<u>MDND</u>					
Date Received: <u>08 03 18</u>				Date Received: <u>06 03 18</u>					
Time Received: <u>1238</u>				Time Received: <u>1600</u>					
Signature:				Signature:					

POD COPY

1. ONLINE

3. EFT

Total Mass (K)