

CONTRACT FOR CARRIAGE / DISPATCH NOTE



DSV Road (Pty) Ltd
t/a DSV Distribution
PO Box 63, The Reeds 0051
Tel (012) 673 2000
Reg. No. 2000/015342/07
VAT No. 4880189685



SUBBD27449541

2 2 2 E E E 2 2 2

Sender's Details		Consignee's Details. Full Street Address Please	
Company Name	LE CREUSSET PAVILION	Company Name	LE CREUSSET WATERREST
Street Address	SHOP UL 262 PAVILION SHOPPING CENTER JACK MAARTENS DRIVE	Street Address	SHOP 1104 WATERREST MAU INANDA ROAD
Suburb	WESTVILLE	Suburb	
City / Town	DURBAN	City / Town	DURBAN
Postal Code	4013	Postal Code	3650
Contact	PRISINA / RASHREE	Contact	NOMA / SIRENDE
Phone	031 - 265 8455	Phone	031 - 763 1625

Destination Country	South Africa	Botswana	Lesotho	Namibia	Swaziland	Other	(Please Specify)
Sender's Reference							Analysis Code

SPECIAL INSTRUCTIONS

Bill Charges To Account No. 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 14.1 & 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).

[Signature]
SENDER'S AUTHORISED SIGNATURE
16/05/2018
DATE

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)

Total Parcels	NO. OF PARCELS PER DIMENSIONS	LENGTH (CM)	WIDTH (CM)	HEIGHT (CM)
1	1 X BOX			

Goods received in full without damage (unless endorsed)

Name Of Receiver (PLEASE PRINT CLEARLY)

ZANELE

Date Received: 170518

Time Received: 1118

Signature: *[Signature]*

Received By DSV

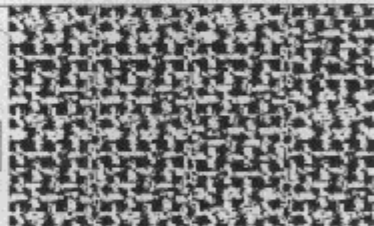
Name Of Courier (PLEASE PRINT CLEARLY)

AKRON

Date Received: 160518

Time Received: 1450

Signature: *[Signature]*



POD COPY

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