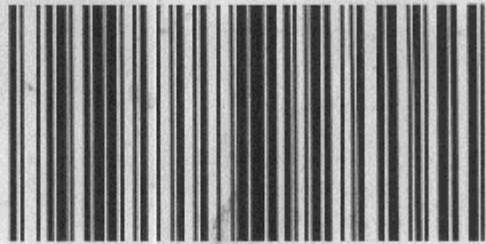


CONTRACT FOR CARRIAGE / DISPATCH NOTE

2 2 2 E E E 2 2 2



DSV Road (Pty) Ltd
t/a DSV Distribution
PO Box 53, The Reeds 0061
Tel (012) 673-2000
Reg. No. 2000/016342/07
VAT No. 4860189685



SUBBD28456552

Sender's Details		Consignee's Details. Full Street Address Please	
Company Name	AVALON TECH GROUP	Company Name	LE CREUSET CLEARWATER
Street Address	UNIT 13 4TH FLOOR TIGER CHAMBERS 2 87 WILLIE VAN SCHOR AVE.	Street Address	SHOP UM 030 A CLEARWATER MALL CHRISTIAAN DE WET ROAD CLEARWATER
Suburb	BELLVILLE	Suburb	
City / Town	CPT	City / Town	JHB
Postal Code	7530	Postal Code	2001
Contact	ANIL	Contact	LISA
Phone	021 300 1777	Phone	011 475 1202
Destination Country	<input checked="" type="checkbox"/> South Africa	<input type="checkbox"/> Botswana	<input type="checkbox"/> Lesotho
	<input type="checkbox"/> Namibia	<input type="checkbox"/> Swaziland	<input type="checkbox"/> Other (Please Specify)
Sender's Reference	Analysis Code		

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)

[Signature]
SENDER'S AUTHORIZED SIGNATURE
14/5/2018
DATE

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

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

Goods received in full without damage (unless endorsed)

Name Of Receiver (PLEASE PRINT CLEARLY)
P. W. K. F.

Date Received: 16 05 18 Time Received: 1220

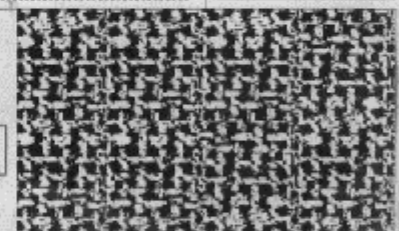
Signature: *[Signature]*

Received By DSV

Name Of Courier (PLEASE PRINT CLEARLY)
TOUR CO

Date Received: 16 05 18 Time Received: 1400

Signature: *[Signature]*



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)

POD COPY

Version Control: 01/2008