

CONTRACT FOR CARRIAGE / DISPATCH NOTE

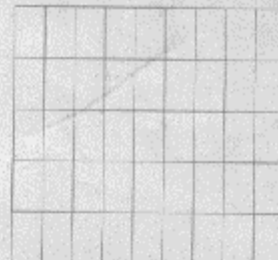


DSV Road (Pty) Ltd  
t/a DSV Distribution  
PO Box 63, The Reeds 0061  
Tel (012) 673-2000  
Reg. No. 2000/016342/07  
VAT No. 4880189685



SUBBD27219370

2 2 2 E E E 2 2 2



Sender's Details

Company Name: **LE CREUSET WATERFALL**  
Street Address: **SHOP 101**  
**1 AUGARBE AVENUE**  
**CASHAN EXT 12**  
Suburb: **WATERFALL MAN**  
City / Town: **JOHANNESBURG** Postal Code: **0299**  
Contact: **MANAGER: LERATO**  
Phone: **011 537-2279**

Consignee's Details. Full Street Address Please

Company Name: **LE CREUSET MALL OF THE SOUTH**  
Street Address: **SHOP 9062 MALL OF THE SOUTH**  
**C/O KLIPPRIMER DRIVE AND**  
**SWARTKOPPIES RD**  
Suburb: **ASPEN HILLS**  
City / Town: **JOHANNESBURG** Postal Code: **2001**  
Contact: **ATT: PATRICIA**  
Phone: **011 0223**

Mark Service Required

☐ Same Day

☐ Express

☐ With Sunrise Option

☐ With Saturday Service

☐ Public Holiday Service

☐ Economy

☐ After Hours

Destination Country: **South Africa**

Sender's Reference: **LE CREUSET**

CO. REG.: 1997/021366/07

VAT: 4160178069

TEL: 010 500 0223

EMAIL: mello@thesouth.store.za@lecreuset.com

SPECIAL INSTRUCTIONS

Bill Charges To Account No: **027766**

Bill To: **Sender**

If Consignee Or Other Party Is Billed, Sender Is 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).

SENDER'S AUTHORISED SIGNATURE

24/05/18  
DATE

BLNS Customs Tariff

1. ONLINE ☐

3. EFT ☐

Total Mass (Kg)

Total Parcels

NO. OF PARCELS PER DIMENSIONS

LENGTH (CM)

WIDTH (CM)

HEIGHT (CM)



51

50

25

6

Goods received in full without damage (unless endorsed)

Name Of Receiver (PLEASE PRINT CLEARLY)

**charlean**

Date Received:

**250518**

Time Received:

**1418**

Signature:

*[Signature]*

Received By DSV

Name Of Courier (PLEASE PRINT CLEARLY)

**LES E40**

Date Received:

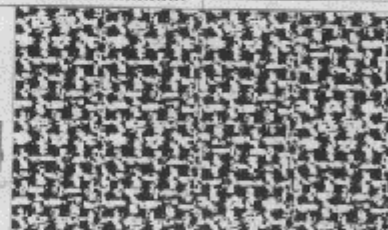
**240518**

Time Received:

**1350**

Signature:

*[Signature]*



Version Control (30/06/17)

POD COPY