

CONTRACT FOR CARRIAGE / DISPATCH NOTE



UTI South Africa (Pty) Ltd
 Via UTI Sun Couriers
 PO Box 63, The Roads 6051
 Tel (012) 673-2000
 Reg. No. 2004/015747/07
 VAT Reg. No. 4280213873



SUBCD29158912

ADDITIONAL
TRACKING
NUMBERS

Sender's Details		Consignee's Details. Full Street Address Please				Mark Service Required	
Company Name <u>Metelerkamps</u>		Company Name <u>De Creuset SA</u>				<input type="checkbox"/> Same Day	
Street Address <u>3 Union Street</u>		Street Address <u>Unit 5 Heron Park</u>				<input type="checkbox"/> Express	
<u>Off Waterfront Drive</u>		<u>Olive Grove Industrial</u>				<input type="checkbox"/> With Sunrise Option	
<u>Knyana</u>		<u>Estate, The Interchange</u>				<input type="checkbox"/> With Saturday Service	
Suburb		Suburb <u>Somerset west</u>				<input type="checkbox"/> Public Holiday Service	
City / Town		City / Town				<input checked="" type="checkbox"/> Economy	
Postal Code <u>6570</u>		Postal Code				<input type="checkbox"/> After Hours	
Contact <u>Linda Haubser</u>		Contact <u>Helena Davids</u>				<input type="checkbox"/> BLNS Customs Tariff Lines	
Phone <u>044 382 0274</u>		Phone <u>021 851 7178</u>				<input type="checkbox"/> Depot Hand In	
Destination Country		South Africa		Botswana		Lesotho	
		Namibia		Swaziland		Other (Please Specify)	
Sender's Reference		Analysis Code					
SPECIAL INSTRUCTIONS							
Bill Charges To Account No. <u>027766</u>		Bill To <input type="checkbox"/> Sender		Consignee <input type="checkbox"/>		Other (Name Please) <input type="checkbox"/>	
If Consignee Or 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 12.14 OVERLEAF) GOODS ARE SHIPPED AT OWNER'S RISK. SUBJECT TO CONTRACT FOR CARRIAGE OVERLEAF. UTI SUN COURIERS LIMITS ITS LIABILITY TO R250,00 PER SHIPMENT. (SEE CLAUSE 12.5 OVERLEAF). IF YOU WISH UTI SUN COURIERS TO ACCEPT A HIGHER LIABILITY, THE VALUE OF THIS SHIPMENT MUST BE DECLARED IN THE SPACE PROVIDED. (SEE CLAUSES 12.5, 12.6 AND 12.7 OVERLEAF).							
e-mail / Fax / Proof of delivery <input type="checkbox"/>				e-mail Address / Fax Number			
Total Parcels		NO. OF PARCELS		Dimensions In Centimetres		Mass (kg)	
				LENGTH		WIDTH	
				HEIGHT			
<u>1</u>		<u>Fragile</u>		<u>RTS 1863</u>		<u>(Kettle)</u>	
Goods received in full without damage (unless endorsed)				Received by UTI			
Name Of Receiver (PLEASE PRINT CLEARLY)				Name Of Courier (PLEASE PRINT CLEARLY)			
<u>MAKCHALI</u>				<u>K. L...</u>			
Date Received:				Date Received:			
<u>19/08/16</u>				<u>19/08/16</u>			
Time Received:				Time Received:			
<u>08:40</u>				<u>14:20</u>			
Signature <u>[Signature]</u>				Signature <u>[Signature]</u>			

POD COPY

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