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EMIT 350188



SENDER (Your Name)		TEL		ACCOUNT NUMBER		CLIENT REFERENCE		OFFICE REFERENCE		DATE	
LE GEUSET HQ SA				MOV001		001 opening		001 opening		012 004 0052	
COMPANY (Name)		RECEIVER (Name)		COMPANY (Name)		STREET ADDRESS (Dept./Floor)		CITY		SUBURB	
UNIT 5		TONI		LE CREUSET MEALYN		SHOF 12 MEALYN MAINE		JANUARY MASILELA		POSTAL CODE	
HERON PARK						AMARAND AVE					
OLIVE GROVE ESTATE											
OLD PAARDEVLEI RD											
SUBURB		7130		CITY		WATERKLOOF EXT 2					
NO OF PACKAGES		DESCRIPTION OF PACKAGE		LENGTH CM		WIDTH CM		HEIGHT CM		VOLUME WEIGHT KG	
1		Pallet (84 boxes)		120		105		200		279	
1		Pallet (29 boxes)		120		100		197		281	
1		Pallet (41 boxes)		120		105		211		348	
1		Pallet (50 boxes)		120		105		192		474	
1		Pallet (84 boxes)		120		105		187		510	
1		Pallet (49 boxes)		120		105		188		434	
1		Pallet (64 boxes)		120		105		203		472	
1		Pallet (17 boxes)		120		105		166		390	
TEST WEIGHT (OFFICE USE)		8 Pallets									
DOOR TO DOOR ECONOMY		DIRECT LOAD		AIR		SAME DAY		HAZARDOUS CARGO			
OFFICE USE ONLY		NAME		DATE		SIGN		OUR SIGNATURE ACKNOWLEDGES WE HAVE SEEN AND UNDERSTOOD AND AGREE TO BE BOUND BY TERMS AND CONDITIONS OF CARRIAGE (SEE REVERSE)			
CHECKED IN		W. K. G. - 1		07-09-16		W. K. G.		SENDER'S SIGNATURE: W. K. G.		DATE: 7-9-16	
CHECKED OUT								PRINT NAME: W. K. G.		TIME	
CHECKED IN								PROOF OF DELIVERY RECEIVED IN GOOD ORDER & CONDITION			
CHECKED OUT								RECEIVER'S SIGNATURE:		DATE	
								PRINT NAME:		TIME	

COLLECTED BY:
SIGNATURE:
DATE: 7/9/16 TIME:

SERVICES PLEASE SELECT SERVICE / IN BOX

WHEN NO SERVICE IS INDICATED WE RESERVE THE RIGHT TO DESPATCH AND CHARGE AT THE PUBLISHED STANDARD RATES.
WE DRAW YOUR ATTENTION TO THE SUMMARISED VERSION OF OUR TERMS & CONDITIONS AS ACCEPTED BY YOU ON THE REVERSE OF OUR WAYBILL.
YOU ACKNOWLEDGE THAT YOU HAVE THE AUTHORITY TO ACCEPT THESE TERMS & CONDITIONS FOR AND ON BEHALF OF THE CUSTOMER.

POD COPY

Unprint-F 031 560 2300 07/2013