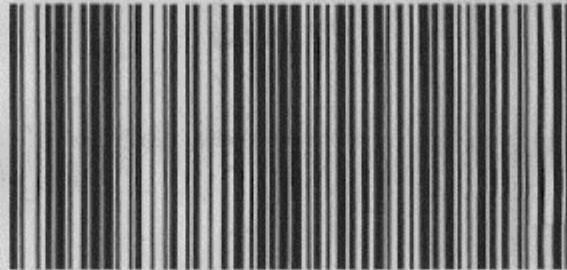


CONTRACT FOR CARRIAGE / DISPATCH NOTE



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



SUBBD27906460

2 2 2 E E E 2 2 2

Sender's Details				Consignee's Details. Full Street Address Please				Mark Service Required	
Company Name <u>Lyndell Kotze</u>				Company Name <u>Mary</u>				<input type="checkbox"/> Same Day	
Street Address <u>Arcadia Place</u>				Street Address <u>Unit 3</u>				<input type="checkbox"/> Express	
<u>Heidelberg</u>				<u>Olive Grove Industrial Estate</u>				<input type="checkbox"/> With Sunrise Option	
				<u>Old Paardevlei Road</u>				<input type="checkbox"/> With Saturday Service	
				<u>Somerset West</u>				<input type="checkbox"/> Public Holiday Service	
Suburb				Suburb				<input checked="" type="checkbox"/> Economy	
City / Town <u>Heidelberg</u>		Postal Code <u>6665</u>		City / Town <u>Somerset West</u>		Postal Code <u>7200</u>		<input type="checkbox"/> After Hours	
Contact <u>L Kotze</u>				Contact <u>Mary</u>				<input type="checkbox"/> BLNS Customs Tariff	
Phone <u>082 414 7698</u>				Phone <u>021 851 7178</u>					
Destination Country		South Africa		Botswana		Lesotho		Namibia	
								Swaziland	
								Other (Please Specify)	
Sender's Reference				Analysis Code					
SPECIAL INSTRUCTIONS									
Bill Charges To Account No. <u>027 877</u>		Bill To Sender <input type="checkbox"/>		Consignee <input type="checkbox"/>		Other (Name Please) <input type="checkbox"/>		0937	
If Consignee Or Other (Third Party) Is Billed, Sender Remains Liable For Unpaid Charges									
<p>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).</p>									
e-mail / Fax / Proof of Delivery <input type="checkbox"/>				e-mail Address / Fax Number					
Total Parcels		NO. OF PARCELS PER DIMENSIONS		LENGTH (CM)		WIDTH (CM)		HEIGHT (CM)	
<u>1</u>									
<div style="display: flex; justify-content: space-between;"> <div> <p>Goods received in full without damage (unless endorsed)</p> <p>Name Of Receiver (PLEASE PRINT CLEARLY)</p> <p><u>Yolanda</u></p> <p>Date Received: <u>240518</u></p> <p>Time Received: <u>0937</u></p> <p>Signature: <u>[Signature]</u></p> </div> <div> <p>Received By DSV</p> <p>Name Of Courier (PLEASE PRINT CLEARLY)</p> <p><u>RICARDO</u></p> <p>Date Received: <u>220518</u></p> <p>Time Received: <u>1230</u></p> <p>Signature: <u>[Signature]</u></p> </div> <div> </div> </div>									
Total Mass (Kg)									

POD COPY