## 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



SUBHT12286537

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## SUBBD27945216

		· c processing
Sender's Details	Consignee's Details. Full Street Address Please	Mark Service Required
	Company Name Make Analystics	Same Day
Company Name Or PTY(LTD)	Company None.	Express
Company Name. (J.r.  Street Address GANIC INGREDIENTS S.A. PTY(LTD)  NAT: 4740263894	Street Address Suite 66	With Sunrise Option
VIII	Shop 3 C 1	With Saturday Service
TEL: 021 905 1373	Phoil Mooil	Public Holiday Service
FAX: 021 900 HEATH, 7579		Pablic Floriday Service
TEL: 021 905 1372 FAX: 021 905 9722 P.O. BOX 272, BLACKHEATH, 7579	Suburb	Ecolomy
City / Town Postal Code	City / Town Postal Code	After Hours
Contact	Contact Marion /Alex	
Contact	Phone 082 885 0611	BLNS
Phone	(Please Specify)	Customs Tariff
Destination Country South Africa Botswana	Lesotho Namibia Swaziland Other	
	Analysis Code	
Sender's Reference U 7 1 1 3 7 9	7 8 Analysis Code	1. ONLINE
SPECIAL INSTRUCTIONS		1. UNLINE
Bill Charges Bill To Sender	Consignee Other (Name Please)	
If Consigned	Other (Third Party) is Billed, Sender Remains Liable For Unpaid Charges.	
IF THIS SHIPMENT CONTAINS ANY DANGEROUS GOODS ALL REGULATIONS N BE COMPLIED WITH, THIS IS YOUR RESPONSIBILITY AS SHIPPER (SEE CLAU	JST E	3. EFT
44 44 OVER EAST GOODS ARE SHIPPED AT OWNERS RISK SUBJECT TO COM	TRACT	.
FOR CARRIAGE OVERLEAF. DSV DISTRIBUTION LIMITS ITS LIABILITY TO R 25 PER SHIPMENT. (SEE CLAUSE 14.5 OVERLEAF). IF YOU WISH DSV DISTRIBU	SENDER'S AUTHORISED SIGNATURE DATE	Total Mass (Kg
TO ACCEPT A HIGHER LIABILITY, THE VALUE OF THIS SHIPMENT MUST BE DECLARED IN THE SPACE PROVIDED. (SEE CLAUSE 14.5, 14.5 AND 14.7 OVER		10(01 111000 (115
e-mail / Fax / Proof of Delivery e-mail Address / Fax Numl		_
Total Parcels No. of PARCELS	LENGTH (CM) WIDTH (CM) HEIGHT(CM)	
PER DIMENSIONS		.
3.		- il
J,		CHERES TANK
Goods received in full without damage (unless end Name of Receiver (PLEASE PRINT CLEARLY)	orsed) Received By DSV Name Of Courier (PLEASE PRINT CLEARLY)	
	1/1/2/15/	or reserve
ROXANNE Time Receive	f: Date Received: Time Received:	
Date neceived.		355.11
130318	30 09031811/12	12 CONTRACT
Mortones	Signature:	
E Cionatura: /14 W/ Ft //// L/ //	organization in the control of the c	化 医斯格里氏管直接 医红