

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



SUBBD29418180

2 2 2 E E E 2 2 2

Sender's Details		Consignee's Details. Full Street Address Please						Mark Service Required			
Company Name LE CREUSET THB		Company Name LE CREUSET CPT						☐ Same Day			
Street Address UNIT 04, EASTGATE BUSINESS PARK, CNR MARLBORO DRIVE & SOUTH RD,		Street Address UNIT 5 HERON PARK, OLIVE GROVE BUSINESS PARK, OLD PARADISE ROAD						☐ Express			
Suburb SANDTON		Suburb SOMERSET WEST						☐ With Sunrise Option			
City / Town THB Postal Code 		City / Town CPT Postal Code 7130						☐ With Saturday Service			
Contact DUANE		Contact FRANCI						☐ Public Holiday Service			
Phone 073 505 2470		Phone 021 851 7178						☒ Economy			
Destination Country		☒ South Africa ☐ Botswana ☐ Lesotho ☐ Namibia ☐ Swaziland ☐ Other (Please Specify)						☐ After Hours			
Sender's Reference DATA BASE CARD		Analysis Code 						BLNS Customs Tariff			
SPECIAL INSTRUCTIONS Tariff Code Bill To ☐ Sender ☐ Consignee ☐ Other (Name Please) ☐ If Consignee Or Other (Third Party) Is Billed, Sender Remains Liable For Unpaid Charges.										1. ONLINE ☐ 3. EFT ☐	
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 1000.00 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 AUTHORIZED SIGNATURE David DATE 05/11/2018	
e-mail / Fax / Proof of Delivery ☐ e-mail Address / Fax Number 										Total Mass (Kg)	
Total Parcels	NO. OF PARCELS PER DIMENSIONS	LENGTH (CM)	WIDTH (CM)	HEIGHT (CM)	1 Box 36 29 28 8Kg						
Goods received in full without damage (unless endorsed)					Received By DSV						
Name Of Receiver (PLEASE PRINT CLEARLY)					Name Of Courier (PLEASE PRINT CLEARLY)						
BASIL					HERBERT						
Date Received: 07/11/18 Time Received: 1010					Date Received: 05/11/18 Time Received: 0130						
Signature: [Signature]					Signature: [Signature]						

POD COPY

Control (01/2018)