

Goods - In - Transit Claim Form

Reference

(the issue of this form is not an admission of liability on the part of the company)  
Please complete this form and return with the following documents to the company

1. Original suppliers invoice
2. Original road and/or rail waybill (as applicable)
3. Original delivery receipts
4. Copies of correspondence with carriers and/or bailees in connection with their liability for the loss and/or damage
5. If damaged goods sold for salvage, copy of the accounts sales evidencing the salvage sale.

1. Name of insured  policy no.   
address  telephone no.

2. Details of consignment upon which claim is being made.

- i. Full description of consignment
- ii. Total invoice/insured value
- iii. Method of transport i.e road or rail (if road please state registration no. of carrying vehicle).

3. Full description of goods lost or damaged

4. Nature of loss or damage i.e breakage/theft/non-delivery etc

5. Extent of loss or damage and value claimed

6. If loss due to theft or an accident to the carrying vehicle, please advise.

(a)when and how were the police informed?

(b)which police station has the case in hand?

(c)name of officer

## Goods - In - Transit Claim Form

7. Full name and address of the owners of the carrying

I/We declared the foregoing particulars to be true in every respect to the best of my/our knowledge and belief and that I/We have not withheld any information bearing on this claim.

Date:

Signature of Insured:

LOA/402/

Trade or Occupation