

Consignee's Goods-in-Transit Loss Declaration Form

Consignee Information

Full Name / Company Name

Address

Contact Number

Email Address

Shipment Details

Shipment Reference Number

Carrier / Courier Name

Departure Date

Expected Arrival Date

Loss / Damage Details

Date Loss/Damage Discovered

Description of Goods Lost/Damaged

Nature of Loss/Damage (e.g. pilferage, damage in transit)

Estimated Value of Goods Lost/Damaged

Detailed Description of Incident

Supporting Documentation

Attach copies of the following (if available):

- Commercial Invoice
- Packing List
- Transport Document (e.g., Bill of Lading, Airway Bill)
- Police Report (if applicable)
- Photos of damaged goods/packages

Declaration

I hereby declare that the information provided above is true and correct to the best of my knowledge.

Consignee's Signature

Date

Important Notes

- This form should be completed as soon as a loss or damage to goods in transit is discovered.
- Accurate and complete information, along with supporting documents, will help facilitate the claims process.
- Submission of this declaration does not constitute automatic approval of any insurance or compensation claim.
- Failure to provide correct details may result in delays or rejection of claim processing.
- Keep a copy of this form and all correspondence for your records.