

Consignment Details Format

Marine Cargo Loss Notification

Date of Notification: _____ Reference No: _____

Name of Insured / Notifier: _____ Contact Number: _____

Email Address: _____ Address: _____

Consignment Details

Consignee Name: _____ Consignor Name: _____

Policy Number: _____ Invoice Number: _____

Date of Dispatch: _____ Mode of Transit: _____

Vessel/Flight/Truck No: _____ Port of Loading: _____

Port of Discharge: _____ Final Destination: _____

Description of Goods: _____

Quantity & Packaging: _____

Value of Goods (INR/USD): _____ Currency: _____

Loss / Damage Details

Date & Time of Loss: _____ Place of Loss: _____

Nature of Loss / Damage: _____

Estimated Loss Amount: _____ Surveyor Appointed (If any): _____

Remarks: _____

Declaration

I/We hereby declare that the details furnished above are true and correct to the best of my/our knowledge and belief.

Authorized Signatory: _____ Date: _____

Important Notes

- This format should be completed immediately upon discovery of loss or damage to the consignment.
- All relevant supporting documents (Invoice, BL/AWB, Survey Report, Photographs) should be attached.
- Incomplete information may delay the claim process.
- Ensure notification to insurers within the required period as per policy terms.
- Preserve all evidences and damaged goods for survey and inspection.