

# Verlingue Freight Liability Claim Form

Please complete this form and send on to your Claim Handler or the Claims Team.

The Claims Team details are as follows: Email: [newclaims@verlingue.com](mailto:newclaims@verlingue.com), or by telephone: 0333 010 0013

## Section A

### General

Policyholders name and address	
Name of customer	
Your reference	
Contractual & Financial Liability (E.g. RHA £1,300 per tonne)	
Consignee / shipper	
Mode of transport (Air / Sea / Road)	
Final destination	
Value of the whole consignment	
Value of goods damaged / lost	

## Section B

### Circumstances of the loss and general description of goods lost & damaged

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## Section C

### Please provide the following documentation

#### INLAND TRANSIT SENDINGS

- ☐ Commercial Sales Invoice and Packing List if applicable
- ☐ Carriers Collection Note.
- ☐ Final Delivery Receipt, which we trust, has been claused noting the damages/loss.
- ☐ A copy of the correspondence holding the relevant carriers responsible for the damages/loss and any response if received.

#### ADDITIONAL INFORMATION IN RESPECT OF DAMAGE CLAIMS

- ☐ Photographs of damage
- ☐ Repair estimate(s) – if in house repair please forward worksheets and payroll slips to evidence Labour charge
- ☐ If beyond economic repair – is there any salvage or parts value – if so, please advise

#### IMPORTS/EXPORTS SENDINGS

- ☐ Commercial Sales Invoice, including the applicable terms of sale (in order to establish which party has the insurable interest at the time of loss)
- ☐ Packing List, if applicable.
- ☐ The relevant transit documentation, i.e. Bill of Lading, Master Airway Bill, CMR Consignment Note
- ☐ Freight Invoice, if applicable.
- ☐ Final Delivery Receipt, which we trust, has been claused noting the damages/loss.
- ☐ A copy of the correspondence holding the relevant carriers responsible for the damages/loss and any response if received.

#### THEFT FROM OWN VEHICLES

- ☐ Commercial Sales Invoice/Evidence of value
- ☐ Full details as to where the vehicle was left unattended
- ☐ What security measures on the vehicle were in operation at the time
- ☐ Copy of repair estimate for damages caused to the vehicle
- ☐ Details as to which police station the theft was reported to (full address, and crime reference number)

## Section D

### Please provide any further information which maybe of use in deciding liability, i.e. security devices in operation / security tags

## Section E

### Declaration

I/we declare that the above statements are true and correct to the best of my/our knowledge and belief.

I/we agree to provide insurers with any further information as they may reasonably request.

I/we understand that Verlingue Limited do not admit liability by the issue of this claim.

Name

Position

Signature

Date