



Global Freight Solutions AB

Claims Demand – Customer

To be completed by the 'receiver'.

Send to:

G-Solutions AB

Odinsgatan 6

411 03 Göteborg

Org nr. 556711-464

Tel.nr. +463110736

Joachim.walter@gsolutions.se

Address and telephone number for damage survey

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.....

Packing List / Booking Reference/s

Place of Departure/Date

Place of Receipt/Date

.....

Is there a separate cargo insurance covered by the good's owner?

YES:

NO:

Goods description: Number of packages/units, Commodity, Marks & Numbers, Total weight, Net weight.

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Damage description:

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.....

Compensation demand, specified

Please note that this must be written and is mandatory

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The following items are attached:

1. Packing list - Signed as seen
2. Copy of transaction/invoice
3. Photo of damage/s
4. Invoice for repairs
5. Other – Please specify

I declare that the information provided here is to the best of my knowledge correct and substantiated.

Signed by officer

Company

@post

Telephone

Date, Signed

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NOTE: Store goods in safe place/facility to avoid further loss or further damage. The survey may be requested by the insurance company.

Verified demands not received by us within 12 months after the damage occurred will be deemed void and disregarded.

Further information may be requested by the officer/surveyor.

All assignments are conducted in accordance with NSAB 2015, which, for example, limits our liability and empowers us the right to a lien on property in our control, to cover all our debts due for both new and all previous shipments. NSAB 2015 applies with the exception of time guarantee as referred to in § 7, subs. 2 and § 19 B as well as the exemption from the insurance obligation as stipulated in § 25 A subs. 2. We do not insure shipments unless receipt of written instructions to do so.