



TRI-MARINE ACCEPTANCES (PTY) LTD

Company Registration No: 2012/089555/07

Marine Insurance Specialists

W: www.trimarine.co.za | FSP No: 44286

A: Unit UF02, Pedal Power House, Greenford Office Estate, Punters Way, Kenilworth, 7700.

PA: P.O Box 347, Plumstead, 7801, Cape Town, South Africa.

T: +27 21 701 8023 | 701 7948 | 701 7943 | F: +27 21 701 7912

CARGO – CLAIM FORM

IMPORTANT PROCEDURE IN THE EVENT OF LOSS OR DAMAGE FOR WHICH INSURERS MAY BE LIABLE, LIABILITY OF CARRIERS, BAILEES OR OTHER THIRD PARTIES

It is the duty of the Insured and their Agents, in the event of loss or damage for which underwriters may be liable, to take such measures as may be reasonable for the purpose of averting or minimizing a loss and to ensure that all rights against Carriers, Bailees or other third parties are properly preserved and exercised, in particular, the Insured or their Agents are required:

- To claim immediately on the Carriers, Port Authorities or other Bailees for any missing packages.
- In no circumstances, except under written protest, to give clean receipts where goods are in doubtful condition.
- When delivery is made by container, to ensure that the Container and its seals are examined immediately by their responsible official.
- If the Container is delivered damaged or with seals broken or missing or with seals other than as stated in the shipping documents, to clause the delivery receipt accordingly and retain all defective or irregular seals for subsequent identification.
- To apply immediately for survey by Carriers' or other Bailees' Representatives if any loss or damage be apparent and claim on the Carriers or other Bailees for any actual loss or damage found at such survey.
- To give notice in writing to the Carriers or other Bailees within 3 days of delivery if the loss or damage was not apparent at the time of taking delivery.

NOTE - The Consignees or their Agents are recommended to make themselves familiar with the Regulations of the Port Authorities at the port of discharge.

DOCUMENTATION REQUIRED

To enable claims to be dealt with promptly, the Insured or their Agents are advised to submit all available supporting documents without delay, including when applicable:

- Original policy or certificate of insurance or marine declaration as applicable.
- Original or copy shipping invoices, together with shipping specification and/or weight notes. Original Bill of Lading or Airwaybill or Consignment Note and/or other contracts of carriage. Survey report or other documentary evidence to show the extent of the loss or damage.
- Landing account and weight notes at destination.
- Correspondence exchanged with the Carriers and other Parties regarding their liability for the loss or damage.
- Packing list (when applicable).
- Insured's formal priced claim on official company letterhead.



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INSURED'S DETAILS:		
NAME OF INSURED:		
CONTACT NAME:		
TELEPHONE NUMBER:		
PHYSICAL ADDRESS:		
VAT REFERENCE NO:		
BROKER'S DETAILS:		
NAME OF BROKER:		
CONTACT NAME:		
TELEPHONE NUMBER:		
BROKER'S REFERENCE:		
POLICY DETAILS:		
POLICY NUMBER:		
DEDUCTIBLE:		
POLICY PERIOD:	FROM:	TO:
CLAIM INFORMATION:		
DATE OF LOSS / DAMAGE:		
NAME OF VESSEL / AIRLINE / TRANSPORTER:		
VOYAGE / FLIGHT NUMBER:		
DATE OF DESPATCH:		
PORT OR PLACE OF SHIPMENT:		
PORT OF PLACE OF DISCHARGE:		
DATE OF ARRIVAL:		
CONSIGNOR NAME AND ADDRESS:		
CONSIGNEE NAME AND ADDRESS:		
DATE OF FINAL DELIVERY:		
WERE THE GOODS CHECKED AND DAMAGE/LOSS NOTED ON THE DELIVERY NOTE?		
TERMS OF SALE:		



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COMMODITY:	
TYPE OF PACKAGING:	
WHERE DID LOSS OR DAMAGE OCCUR?	
NATURE OF LOSS: (E.G. WETTING, BREAKAGE, SHORTAGE ETC.)	
EXTENT OF LOSS:	
ESTIMATE OF LOSS:	
If goods are damaged or packages pilfered, please provide address where the goods and original packing can be inspected:	
DECLARATION AND CONSENT:	
DECLARATION I/We solemnly declare that I/We have suffered loss or damage to the property as described above and that the said loss/damage occurred in the circumstances described.	
GENERAL POPI CONSENT CLAUSE By providing the information on your claim form, you agree that we may use this information to provide you with insurance service and for administrative purposes. You also agree that we may disclose this information to persons that it is necessary to disclose this information to, to provide you with insurance services.	
Should a settlement be accepted following the completion of this claim form,	
The Parties acknowledge that for the purposes of performing this contract, it will be necessary to process the insured's private information including making that information available to other associated parties, insurers or reinsurers. In addition, the insured consents to the transfer of that information to the reinsurers even if those reinsurers are situated outside the Republic of South Africa, for use in connection with the performance of this contract and any related reinsurance contract.	
NAME OF SIGNATORY:	
SIGNATURE:	DATE:



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CARGO CLAIMS CHECKLIST

Full Container Load (FCL)	Less Than Full Container Load	Breakbulk	Airfreight	Bulk shipments	Road and/or Rail Sendings
Bill of Entry (Custom stamped)	Bill of Entry (Custom stamped)	Bill of Entry (Custom stamped)	Bill of Entry (Custom stamped)	Bill of Entry (Custom stamped)	Carriers Waybill/Proof of Delivery (POD)
Claims against Third Parties and their responses	Claims against Third Parties and their responses	Claims against Third Parties and their responses	Claims against Third Parties and their responses	Certificate of Cleanliness	Client's Priced Claim
Clearing Agent's Statement of Account	Clearing Agent's Statement of Account	Clearing Agent's Statement of Account	Clearing Agent's Statement of Account	Clearing Agent's Statement of Account	Driver's Statement (if accident or Hi-jack)
Insured's formal priced claim on official company letterhead	Insured's formal priced claim on official company letterhead	Insured's formal priced claim on official company letterhead	Insured's formal priced claim on official company letterhead	Chemical Analysis (If applicable)	Police Reference and Report
Container Inspection Report	Cargo Release Advice (CRA)	Port Indemnity From (T896)	Carriers Receipt	Discharge Survey	Suppliers Invoice/Stock Values (Interbranch transfers)
Container Terminal Order (Delivery Note)	Damaged, Ullaged & Broached Package Report (DUBPR)	Landing, Delivery and Forwarding Order	Endorsed Delivery Note	Loading Survey	Consignment Note
Original Negotiable Bill of Lading	Endorsed Delivery Note	Sue and Labour Invoice (Damages ex T896)	Original Airwaybill	Claims against Third Parties and their responses	Original Insurance Certificate and/or Declaration or policy
Packing List	Original Negotiable Bill of Lading	Endorsed Delivery Note	Packing List	Clearing Agent's Account	
Supplier Invoice	Packing List	Original Negotiable Bill of Lading	Supplier Invoice	Client's Priced Claim	
Wharfage Clearance Order	Supplier Invoice	Packing List	Original Insurance Certificate and/or Declaration or policy	Supplier Invoice	
Original Insurance Certificate and/or Declaration or policy	Wharfage Clearance Order	Supplier Invoice	Declaration of Origin	Original Insurance Certificate and/or Declaration or policy	
Declaration of Origin	Original Insurance Certificate and/or Declaration or policy	Original Insurance Certificate and/or Declaration or policy	Customs Clearance Notification	Declaration of Origin	
Customs Clearance Notification	Declaration of Origin	Declaration of Origin		Customs Clearance Notification	

TRI-MARINE ACCEPTANCES (PTY) LTD

Email Address: ians@trimarine.co.za Authorised Financial Service Provider FSP 44286

Directors: I D Smith (CEO), T Smith (Managing), C McConnachie, S Smith