



# Phoenix

Of Swaziland Assurance Company Ltd.

## CLAIM REPORT

### MARINE CARGO AND HAULIERS LIABILITY INSURANCE

<b>1/ FROM:</b>	<b>2/ DATE:</b>	
<b>2/ TO:</b>		
<b>3/ Your reference:</b>		
<b>4 / Contact data:</b> (Indicate the name of the person handling the claim)		
<b>5/ Date / time of incident:</b>		
<b>6 / Activity involved :</b>	<b>At time of the incident you were acting as</b>	
	Inland transit operator Aircraft charterer Forwarder Stevedore Clearing agent Cargo handling contractor Other Which capacity:	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
<b>7/ Conveyance:</b>  Flight number: Vessel: Shipping line / trucking co.: B/L or AWB date:	<input type="checkbox"/> Air <input type="checkbox"/> Sea <input type="checkbox"/> Land	
<b>8/ Nature of loss or damaged cargo / equipment:</b>  Evaluation of damage (approximate) Total number of packages Total weight carried Quantity damaged (number of packages and/or weight)		
<b>9/ Other damage :</b>	Bodily Consequential Customs	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>



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<b>10/ Name of third party responsible:</b> (Attach copy of documents evidencing limitations of liability of such parties)	
<b>11/ Name and address of his insurers:</b>	
<b>12/ Description of claim occurrence:</b> (Provide a detailed description of the incident)  Are you responsible for the damage :	<input type="checkbox"/> yes <input type="checkbox"/> no Why?
<b>13/ Parties involved:</b>  Customer: Claimant: Shipper: Consignee:	
<b>14) Place where the goods can be seen</b>	Contact : Tel:
<b>15/ Appointed surveyor:</b>  By Claimant: <b>By Phoenix insurance:</b>	
<b>16/ INCOTERM:</b> (EXW, FOB, CFR, CIF, CIP, DAT, DAP, other)	
<b>17/legal or contractual limits of liability:</b> (Attach copy of the corresponding documents evidencing such mentioned limitations)	
<b>18/ Supporting claim documents:</b>	<ul style="list-style-type: none"><li>✓ Commercial invoices</li><li>✓ Invoices on Customer (evidencing scope of work performed by)</li><li>✓ OB/L – HB/L, MAWB - HAWB, Waybill, CMR (as applicable or other relevant transport document, together with backside when evidencing conditions of liability of carrier)</li><li>✓ Packing list</li><li>✓ Delivery receipts</li><li>✓ Surveyor's report</li><li>✓ Police report</li><li>✓ Notice of exceptions and all other relevant correspondence exchanged with the Carriers and other third parties regarding their liability</li><li>✓ Letter or notice of claim by the Claimant</li><li>✓ Letter(s) or notice(s) of claim to responsible third parties</li><li>✓ Written Customer's instructions (if any)</li><li>✓ Other (please specify)</li></ul>