



Claim Form - Original

This form acts as an official claimant's letter. Complete all sections and return promptly.

CLAIM NO:
NC

To: New Zealand Couriers Ltd

Address:

From:

Company Name: Company Address:

.....

Contact(s):

Phone Number(s): Email:

I/We hereby lodge a claim for: Loss / Damage (Delete non-applicable). Goods Sent.

Receiver / Consignee

Company Name: Company Address:

.....

Sender / Consignor

From: / Company Name: Company Address:

.....

Particulars of Claim

Local / Intercity (Delete non-applicable) Ticket / Product Code: No. Pieces:

Date of Pickup: Time:

Date of Delivery: Date NZC First Notified:

Description of Goods

Goods:

.....

Packaging Details: No. of Packages:

Details of Damage / Loss (Delete non-applicable)

Details:

.....

Your Action to Date:

.....

Damage Claims Only: Repairable / Non Repairable If Non Repairable - Salvage Value \$.....

Value of Claim (Cost): (Please Attach Office Invoice)

I/We hereby declare that the information detailed on this form is true and correct, and that I/We have not withheld any information likely to effect the acceptance of this claim.

Customer Signature: Date:

Note: A copy of this claim can be retained for your records. The completion of this form and its acceptance by New Zealand Couriers Ltd does not constitute any acceptance of liability of New Zealand Couriers Ltd.

For Branch Use Only: / /
Sent to Head Office