**Kuehne + Nagel sp. z o.o., ul. Spedycyjna 1, 62-035 Gądki, tel. +48-61-81-99-100**

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | |  | | |  | | | **FILING DATE** | | | **2022-01-12** | |
| **Claimant**  **(full name of company and address)** | | Click here to enter the text | | | | | | | | | | |
| **Full name of the person who is sending the claim** | | Click here to enter the text | | | | | | | | | | |
| **Contact data**  **(e-mail, phone)** | | Click here to enter the text. | | | | | | | | | | |
| **Date of loading** | | Click here to enter the text | | | | | | | | | | |
| **Date of unloading** | | Click here to enter the text | | | | | | | | | | |
| **Number of Kuehne + Nagel order** | | Click here to enter the text | | | | | | | | | | |
| **Number of Kuehne+ Nagel invoice (if it has already been issued)** | | Click here to enter the text | | | | | | | | | | |
| **Name of the contact person in Kuehne + Nagel** | | Click here to enter the text. | | | | | | | | | | |
| **Causes of claim** | | | | | | | | | | | | |
| **Damage**  Crush  Rip  Wet  Dirty  Dent  Perforation  Breakage  Others | **Delay**\*  Delay  delivery to an improper address  Others  \* not applicable to sea transport | | | **Lost**  Cargo totally lost  Cargo partially lost  Others | | | **Status of packaging**  Packaging undamaged  Packaging damaged  Unboxed  Others | | | **Others**  Lack of customs clearance  Others | | |
| **The net value of the cargo** |  | | **Total weight of cargo** | | |  | | | **Weight of damaged part** | | |  |
| **Value of damage** | Click here to enter the text. | | | | | | | | | | | |
| **Date when damage accured** | Click here to enter the text. | | | | | | | | | | | |
| **Cargo**  **insurance** | Cargo with extra pay cargo insurance | | | | | | | | | | | |

**Necessary documents to be join depending on the type of damage:**

|  |  |  |
| --- | --- | --- |
| **Damage** | **Delay** | **Loose** |
| This claim form | This claim form | This claim form |
| Confirmation of an agreement  Forwarding order  Contract  Offer | Confirmation of an agreement  Forwarding order  Contract  Offer | Confirmation of an agreement  Forwarding order  Contract  Offer |
| Damaged report |  | Damaged report |
| Waybill | Waybill | Waybill |
| E-mails conected with case | E-mails conected with case | E-mails conected with case |
| Commercial invoice |  | Commercial invoice |
| Confirmation of losses - documents | Confirmation of losses - documents | Confirmation of losses - documents |
| Photos, (if available)  Number (please fill in) |  |  |
| Estimated repair protocol |  |  |
| Evidence of utilization |  |  |

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| --- | --- | --- | --- |
| Date and signature of the person making the complaint: | | |  |
| 2022-01-12 | ...................................................... | | |
| Date | | Signature | |

**For proper claim registration please:**

1. **Save on your hard disk completed claim form – file name: claimKN\_nameOfYourCompany**

**Note: The name of the saved file should not contain “space”. Breaks between the words should be filed with "\_" (underscore).**

1. **Please send saved claim form with supporting documents via e –mail to** [**knpl.nf.claim-rt@kuehne-nagel.com**](mailto:knpl.nf.claim-rt@kuehne-nagel.com)**.**

**Note: The total size of e-mail cant not exceed 5MB.**

1. **After sending a message to the above address, you will receive an automated system response.**
2. **After receiving the complaint form with supporting documents we will contact you by e-mail. You will receive a letter informing about the number under which the complaint was registered.**
3. **If you do not receive confirmation of the registration of the claim and number given to this certain claim please contact us by phone or e-mail:** [**paulina.dziubak@kuehne-nagel.com**](mailto:paulina.dziubak@kuehne-nagel.com)**, tel., +48 532 512 201, or** [**external.sylwia.kicinska@kuehne-nagel.com**](mailto:external.sylwia.kicinska@kuehne-nagel.com)**, tel., +48 694 411 681.**