## **Cargo Damage Claim Report**

Claimant Name	
Company Name	
Contact Information	
Date of Report	
Shipment Reference / BL Number	
Carrier	
Vessel/Flight/Vehicle Name	
Port of Origin	
Destination	
Date of Arrival	
Date of Inspection	
Description of Cargo	

**Nature and Extent of Damage** 

Circumstances of Damage		
Photos/Documents Attached		
Claim Amount		
Other Remarks		