

# Over-Dimensional Cargo Damage Assessment Sheet

## General Information

Date

Time

Location

Inspected By

Contact Number

Project/Job Name

Cargo Description

Transport Vehicle No.

Cargo Owner

## Damage Assessment

No.	Damage Location	Description of Damage	Severity	Estimated Area/Size	Action Taken/Remarks
1			<input type="text"/>		
2			<input type="text"/>		
3			<input type="text"/>		

## Photographic Evidence

Photo Reference(s)

Additional Notes

## Signatures

Inspector Signature

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Cargo Owner/Representative  
Signature

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