

Uninsured Declaration

Shipment:
Shipping date:
Recipient:
Reference No.:
Claim No.:

Herewith we confirm that aforementioned shipment has not been insured with any other transport or unit insurance. Also, we confirm that otherwise we do not receive any compensation of this damage on that shipment.

Should there be a partial or complete loss of the goods, you are obligated to inform us immediately after the retrieval of the goods.

Date

Stamp/Signature