

**CARGO INSURANCE CLAIM FORM**  
**FORMULIR KLAIM ASURANSI ANGKUTAN**

Ref. No :

Date :

The insurance of this form does not represent any admission of liability by the insurance company.  
*Pengajuan formulir ini bukanlah pengakuan akan adanya ganti rugi dari pihak perusahaan asuransi.*

**General / Umum :**

1. Policy Number  
*Nomor Polis Asuransi* : \_\_\_\_\_
2. Name of Insured  
*Nama Tertanggung* : \_\_\_\_\_
3. Address  
*Alamat* : \_\_\_\_\_
4. Phone Number  
*Nomor Telpn* : \_\_\_\_\_ Fax  
*Fax* : \_\_\_\_\_
5. Period of Insurance  
*Jangka Waktu Asuransi* : \_\_\_\_\_

**Details of the goods insured / Barang-barang yang dipertanggungkan :**

1. Description of goods & Quantity  
*Jenis Barang & Jumlahnya* : \_\_\_\_\_
2. Sum Insured  
*Nilai Pertanggungan* : \_\_\_\_\_

**Loss Details / Detail Kerugian :**

1. Name of Vessel / Carrier  
*Nama Kapal / Pengangkut* : \_\_\_\_\_
2. Voyage From  
*Berangkat dari* : \_\_\_\_\_ Date  
*Tanggal* : \_\_\_\_\_
3. Transhipment at  
*Ganti Kapal di* : \_\_\_\_\_ Date  
*Tanggal* : \_\_\_\_\_
4. Arrived at / Final Destination  
*Tiba di / Tujuan Akhir* : \_\_\_\_\_ Date  
*Tanggal* : \_\_\_\_\_
5. Date of Unloading from Vessel  
*Tanggal di Bongkar dari Kapal* : \_\_\_\_\_
6. Date received by Consignee  
*Tanggal diterima digudang* : \_\_\_\_\_
7. Quantity of Damaged Goods  
*Jumlah Barang yang Rusak* : \_\_\_\_\_
8. Amount of Loss ( US\$ / Rp. )  
*Jumlah Kerugian ( US\$ / Rp. )* : \_\_\_\_\_
9. Cause of Loss  
*Sebab Kerugian* : \_\_\_\_\_
10. When and Where the loss been stated  
*Kapan dan Dimanakah pertama kali kerugian diketahui* : \_\_\_\_\_

11. Has a claim been lodged against Carrier, Shipping Co. or other responsible third party (If "Yes", When & what is the result / If "No", please give reason) :

*Apakah tuntutan kerugian diajukan ke Pengangkut, Persh. Pelayaran atau pihak lain yang bertanggung jawab ( Jika "Ya" Kapan & apa hasilnya / Jika "Tidak" harap berikan alasan*

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.....  
.....

12. What remnant value have the damaged goods :  
*Berapakah nilai/harga sisa dari barang yang rusak* :

**Documents attached / Dokumen Terlampir :**

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_
6. \_\_\_\_\_
7. \_\_\_\_\_
8. \_\_\_\_\_
9. \_\_\_\_\_
10. \_\_\_\_\_

**Declaration / Pernyataan :**

I / We warrant that the foregoing statements and particulars are true to the best of my / our knowledge and belief.

*Saya / Kami menyatakan bahwa pernyataan di atas adalah benar dan di buat dengan sejujur-jujurnya.*

Jakarta,

2022

Signature / Stamp :

Tanda Tangan / Stempel :

Name :

Nama :