

Marine Cargo Claim Form



www.AIG.com.sg

PLEASE COMPLETE ALL SECTIONS TO FACILITATE THE PROCESSING OF YOUR APPLICATION

The form must be completed truthfully and accurately.

The list of documents required is not exhaustive and we reserve our right to request from you any additional information/documentation, as necessary. The submission of an incomplete form or insufficient information or supporting documents may delay the processing or result in the denial of your claim.

The completed form should be returned together with all supporting documents as soon as possible to the following address:

AIG Asia Pacific Insurance Pte. Ltd.
AIG Building 78 Shenton Way #07-16 Singapore 079120

The acceptance of this Form is NOT an admission of liability on the part of AIG Asia Pacific Insurance Pte. Ltd. ("the Company"). Any documentary proof or report required by the Company shall be furnished at the expense of the Policyholder or Claimant.

Please note that information you provide in this claim form will be used for the purposes of claims administration as outlined in this form and will not be used to update any of your existing records that our organization holds. If you wish for us to update any of your information in our records, please contact our Customer Care Consultants at 6419 3000, between Mondays to Fridays, 9am to 5pm. Alternatively, you may send us an email via www.aig.com/sg/contactus.

IMPORTANT: Upon knowledge of a loss:

1. Please issue a Claim Letter (this can be downloaded from our website <http://www.AIG.com.sg>) to the Carrier to hold them responsible for your loss not later than:
 - a. Sea Freight/Overland Transit – 3 working days after the date of delivery
 - b. Air Freight – 7 days after the date of delivery

Particulars Of Insured/Claimant

Claimant Name	Claimant's Ref No.
Policy No./Certificate No.	Policy Issuing Office
Correspondence Address	Postal Code
E-mail	Contact Person
Contact No.	Facsimile No.
Name of Insured (if different from above)	Contact Person
Correspondence Address or Contact No.	

Transportation Information

Interest Insured	B/L or Waybill No.	Sum Insured
Original Place	Destination	Vessel/Vehicle No.
Sailing Date	Arrival Date	Delivery Date

Details Of Occurrence

Date of Loss/Discovered	Time a.m./p.m.	Place of Loss/Discovered
Cause and manner of occurrence		
Quantity / Physical Condition of Damage/Loss		Estimated Loss/Amount Claimed
Please advise the whereabouts and status of the cargo		
If the carrier/bailee or any other concerned party was responsible for the loss, please provide details:		

Carrier/Forwarder/Bailee Information

Name of Carrier/Forwarder/Bailee			
Correspondence Address			Postal Code
E-mail	Contact Person	Contact No.	Facsimile No.

Claim Documents

These are the documentation usually required in supporting your claim. Please submit as soon as they are available. If these documents are attached to this claim form, please tick against the check box. Further documents and information may be requested depending on the nature and extent of the claim.

- 1. Original Policy / Certificate / Shipment Declaration Form
- 2. Commercial Invoice / Packing List / Weight Note
- 3. Original Bill of Lading / Air Waybill / Transportation Agreement
- 4. Sales Contract / Purchase Order
- 5. Exception List / Delivery Receipt noting the exception
- 6. Claim letter to the carrier / bailee
- 7. Statement of Claim with detailed calculation
- 8. Photographs of damaged cargo
- 9. Original Survey Report (if survey has been applied)
- 10. Police or Traffic Accident Report (in case of theft, pilferage, robbery or traffic accident)

Bank Details

Claim settlement, if any, will be credited to your account by bank transfer. Please provide the following details:

Account Name:	Bank:	Account Number:
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Declaration, Authorisation & Signature

I/We hereby declare that to the best of my/our knowledge and belief, the above statement and particulars are true and complete in every respect and are made without reservation of any kind. I/We understand that the furnishing of this notification form to me/us, or its preparation by any representative of AIG Asia Pacific Insurance Pte. Ltd. ("AIG") or the acceptance or retention of the proof thereafter by the insurer shall not constitute its waiver of any of the conditions of the policy.

I/We further authorise any individual or entity holding any records (including any statements taken) or knowledge of me/us which is/are relevant to the settling of this claim and/or the insurer's right of recovery there under to furnish such records or knowledge to AIG or its authorised representatives. A photocopy of this authorisation shall be considered as effective and valid as the original. I/We agree to the conditions set out at the beginning of this claim form.

In relation to the personal information collected in this claim form, I agree and consent, and if I am submitting information relating to another individual, I represent and warrant that I have the authority to provide that information to AIG, I have informed the individual about the purposes for which his/her personal information is collected, used and disclosed as well as the parties to whom such personal information may be disclosed by AIG, as set out in the contents of the consent clause contained below and the individual agrees and consents, that AIG may collect, use and process my/his/her personal information as follows:

- (a) the personal information collected in this form (or otherwise provided during the course of the claim process, including by way of call recordings) may be collected, used and disclosed by AIG to:
 - (i) process and administer this insurance claim;
 - (ii) assess, investigate, adjust and make a decision on this claim;
 - (iii) administer my insurance policy (including pursuing recovery from reinsurers or other parties);
 - (iv) deal with disputes and complaints;
 - (v) respond to requests for information from public and governmental/ regulatory authorities, statutory boards and for audit, compliance, investigation and inspection purposes;
 - (vi) respond to requests from the policyholder;
 - (vii) carry out due diligence or other screening activities (including background check(s)) in accordance with legal or regulatory obligations or risk management procedures that may be required by law or that may have been put in place by AIG;
 - (viii) compliance with legal or regulatory obligations, risk management procedures and AIG internal policies;
 - (ix) manage AIG's infrastructure and business operations; and
 - (x) for other purposes stated in AIG's Data Privacy Policy.
- (b) AIG may transfer the personal information to the following classes of persons (whether located in Singapore or elsewhere) for the purposes identified in (a) above:
 - (i) third parties providing services related to the administration of my policy (including reinsurers) and processing of my claim;
 - (ii) AIG's agents;
 - (iii) brokers, my authorised agents or representatives or next-of-kin;
 - (iv) the policyholder;
 - (v) legal process participants and their advisors;
 - (vi) governmental/regulatory authorities, industry associations, courts, other alternative dispute resolution forums;
 - (vii) other financial institutions for the purpose of administering this claim, obtaining policy payments;
 - (viii) loss adjusters, assessors, third party administrators, emergency providers, legal services providers, retailers, medical providers and travel carriers, external auditors;
 - (ix) another member of the AIG group (for all of the purposes stated in (a)) in any country; or
 - (x) other parties referred to in AIG's Data Privacy Policy for the purposes stated therein.

Note: The full version of AIG's Data Privacy Policy can be found at http://www.aig.com.sg/sg-privacy_1030_237853.html.

Authorised Signature of Insured/Claimant* with Company Stamp:

Date:

AIG Asia Pacific Insurance Pte. Ltd.
AIG Building 78 Shenton Way #07-16 Singapore 079120
Co. Reg. No. 201009404M

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