



Ambro Express sp. z o.o. sp.k.
ul. Przemysłowa 18
62-731 Przykona

DAMAGE REPORT

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Place and date

(WRITTEN DOWN ON DELIVERY / AFTER DELIVERY*)

Consignment note number	
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Packaging description

<input type="checkbox"/> Branded packaging	<input type="checkbox"/> Film
<input type="checkbox"/> Carton	<input type="checkbox"/> Container /(type)
<input type="checkbox"/> Tape	<input type="checkbox"/> Paper
<input type="checkbox"/> Box	<input type="checkbox"/> Other (type)

Is the outer packaging of the consignment damaged? NO

Yes (describe)

Protection of the goods INSIDE the packaging NONE YES (what kind)

<input type="checkbox"/> Polystyrene profiles	<input type="checkbox"/> Film
<input type="checkbox"/> Cardboard dividers	<input type="checkbox"/> Filler
<input type="checkbox"/> Other (type)	

Protection inside damaged YES NO

Type of damage

<input type="checkbox"/> Shortages	<input type="checkbox"/> Breakage	<input type="checkbox"/> Dent
<input type="checkbox"/> Wetting	<input type="checkbox"/> Glass breakage	<input type="checkbox"/> Punctuation
<input type="checkbox"/> Scratching	<input type="checkbox"/> Soiling	<input type="checkbox"/> Tear
<input type="checkbox"/> Other (describe)		

Extent of damage (physical inventory)

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Notes

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Days have passed since the delivery of the consignment.

Drawing up of the above report is not equal to the initiation of the complaint procedure.

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Legible signature of the driver

.....
Legible signature of the recipient

*delete as appropriate