



Declaration for insurance claims and legal disputes

TO BE FILLED IN BY THE CONSIGNEE

INTERNATIONAL GLS PARCEL NUMBER: _____

SENDER: _____

REFERENCE NO. ORDER (optional) _____

NAME CONSIGNEE: _____

ADDRESS CONSIGNEE: _____

TELEPHONE NUMBER CONSIGNEE: _____

Binding declaration

- 1.) I am aware that providing false or misleading information may amount to fraud.
- 2.) I am the consignee of this parcel or have been authorized by the consignee to make this statement on their behalf.
- 3.) I did not receive the parcel from GLS, nor from a third party.
- 4.) I do not recognize the signature provided, it is neither my own, nor that of another party known to me.
- 5.) If the parcel is delivered to me after signing this declaration, I am obligated to notify GLS of the delivery of the parcel.

Please fill out completely:

Place

Date

Signature

Name

General Logistics Systems Netherlands B.V.
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