

Official Customer Claim Document

Underwritten by Leadway Assurance Company Limited

Version 1.0 · Controlled Document

This form is used to report incidents relating to IMATA Limited Goods Protection.
Completion of this form does not automatically approve compensation.
All claims are subject to investigation, verification and the applicable IMATA Limited Goods Protection Policy.
Maximum Compensation payable is UP TO 5% of the Declared Value subject to policy terms.

CUSTOMER INFORMATION

Full Name

Phone Number

Email Address

Residential Address

Preferred Contact Method

National ID (optional)

Customer Signature

BOOKING DETAILS

Booking Reference

Tracking Number

Booking Date

Collection Date

Declared Value

Protection Reference

Goods Description

Pickup Address

Delivery Address

Parcel Category

Customer ID (optional)

INCIDENT DETAILS

Incident Date	Incident Time
Incident Location	
Incident Type	
Incident Description (min. 8 lines)	

GOODS INFORMATION

Description	
Declared Value	Estimated Damage
Packaging Condition	Quantity
Weight	Delivery Class
Condition Before Collection	

EVIDENCE CHECKLIST

Photographs	Videos
Police Report	Booking Receipt
Tracking History	Driver Statement
Witness Statement	Repair Quotation
Medical Report	Other Evidence
Other Evidence / Notes	

DECLARATION

I declare that all information provided in this claim is true and accurate.
I understand that providing false information, misrepresentation or fraudulent documentation may result in claim rejection, cancellation of protection, civil recovery, criminal prosecution, and permanent restriction from IMATA services.

I agree.

Customer Signature

Printed Name

Date

OFFICE USE ONLY

Grey band - authorised IMATA staff only. Read-only for customers.

Claim Reference (format IMA-CLAIM-YYYYMMDD-XXX) - stub IMA-CLAIM-20260912-XXX

Received Date

Received By

Department

Verification Status

Evidence Review

Finance Reference

Forwarded to Finance Date

Finance Officer

Finance Decision

Approved Compensation

Payment Date

Settlement Reference

Audit Reference

Claim Certification ID

Policy Version

INTERNAL CLAIM TIMELINE

1. Received

V

Date

Officer

Signature

2. Verification

V

Date

Officer

Signature

3. Evidence Review

V

Date

Officer

Signature

4. Finance Review

V

Date Officer

Signature

5. Compensation Decision

V

Date Officer

Signature

6. Customer Notification

V

Date Officer

Signature

7. Closed

Date Officer

Signature

IMPORTANT NOTES

- Submit claims promptly with complete evidence for faster verification.
- Maximum compensation is UP TO 5% of Declared Value under the accepted policy version.
- IMATA may request additional evidence before finance assessment.
- This form does not approve compensation - Claims, Finance, and Protection authorities decide outcomes.

FREQUENTLY ASKED QUESTIONS**Q: Does submitting this form approve my claim?**

A: No. All claims are investigated and verified before any compensation decision.

Q: What is the maximum compensation?

A: Up to 5% of the Declared Value recorded when Limited Goods Protection was accepted.

Q: Who underwrites Limited Goods Protection?

A: Leadway Assurance Company Limited

CUSTOMER RESPONSIBILITIES

- Provide accurate booking and incident details.
- Upload or attach supporting evidence listed in Section 5.
- Respond to verification requests from Customer Trust / Operations.
- Keep your Protection Reference and Booking Reference for audit.

PROTECTION SUMMARY & MAXIMUM COMPENSATION REMINDER**IMATA Limited Goods Protection****Maximum Compensation: UP TO 5% of Declared Value (subject to policy terms).****CUSTOMER SUPPORT**

Telephone: 0913 958 3796

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Office Address: IMATA Logistics, Enugu, Nigeria

QR Code placeholder: Scan to verify claim authenticity / track claim (system link).

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