



CLAIM FORM

- Smartpac
 ePAC / Registered Service
 Tracked Package
 Speedpost Express
 Speedpost Priority
 Speedpost Standard
 Speedpost Economy (Domestic)
 Speedpost Economy (International)
 vPost [fill in Section II only]
 Others

Please indicate service type and attach the following documents with this claim form*:

- Legible copy of Posting Docket/Consignment Note/ Posting Receipt/ ezy2ship label
- Original Invoice / receipt for goods and/or repairs listed below
- Packing List/Receipts

Article No.* _____ **Case Reference*:** _____

(*all mandatory fields must be completed for processing of claim)

SECTION I: ALL OTHERS	Origin	Destination	Date of Posting*	Declared Weight (kg)
	Sender's Name	Telephone No/Mobile	Addressee's Name	Telephone No/Mobile
SECTION II: VPOST ONLY	Shipping Services*: <input type="checkbox"/> USA <input type="checkbox"/> Europe <input type="checkbox"/> Japan <input type="checkbox"/> China Name*: _____ vPost ID*: _____ Package ID*: _____ Date of receipt from vPost (dd/mm/yyyy): _____ Telephone No.: _____ vCare purchased: <input type="checkbox"/> Yes <input type="checkbox"/> No Note: please indicate same currency across used all fields Declared delivery value (When tendered to SingPost): _____ Declared value for customs (For international shipments): _____ Merchandise value (Original purchase value and/or cost to repair): _____ Other amounts (Please specify value and provide comments): _____			
	SECTION III Claim made by* <input type="checkbox"/> Name of Claimant (Sender ¹) _____ <input type="checkbox"/> Account Holder - Account no.: _____ Description of Goods Lost or Damaged* _____ Claim being made due to: <input type="checkbox"/> Loss <input type="checkbox"/> Damage Actual Weight (kg) _____ Insurance Purchased: <input type="checkbox"/> Yes <input type="checkbox"/> No Itemized Description of amounts claimed (Attach additional information as necessary) _____ Amount of Claim * _____			
	DETAILS REQUIRED Payee name as per bank records*: _____ Name of Bank*: _____ Bank Account Number*: _____ Bank Code*: _____ Branch Code* _____ Email Address*: _____ (Email address is required to trigger notification once GIRO transfer has been processed)			
	DECLARATION 1. I/We hereby declare that the information given on this form is to the best of my/our knowledge and belief, true, correct and complete. 2. I/We understand that my/our claim may be rejected, if I/we have made any false or fraudulent statement or deliberately left out any relevant information, relating to my/our claim on this form or in any document provided. 3. In connection with the claim(s) submitted in this form, I/we give consent for SingPost and their respective representatives or agents to collect, use, store my/our personal data and other information on this form and in any document provided by me/us for purposes which include SingPost evaluating, processing, administering and/or managing my/our claim(s).			
	IMPORTANT NOTE: 1. Please ensure retention of all supporting documents, including this claim form. 2. SingPost is not liable for any indirect or consequential loss or damage which may be suffered in relation to this claim. 3. If SingPost accept this form, it does not mean that SingPost is taking legal responsibility for your claim. 4. For more information on SingPost data protection policy, please refer to our website at www.singpost.com/privacy-policy			
	Name of Claimant		Signature of Claimant	

¹ Universal Postal Union Parcel Post Regulations: The designated operator of origin (sender) shall be authorized to indemnify the rightful claimant on behalf of the designated operator of destination.

HOW TO FILE A CLAIM:

- All claims must be filed in writing by the contracting party to SingPost within:
 - 6 months from the Date of Posting (ePAC & Registered Article)
 - 14 calendar days (Speedpost Express/Speedpost Priority)
 - 30 calendar days (Speedpost Standard)
 - 90 calendar days (Speedpost Economy)
 - 14 working days (Tracked Package)
- Complete the attached Claim Form in full. Please type or write legibly.
- Attach all copies of relevant receipts or supporting documents to substantiate the amount being claimed. e.g.: Original purchase receipt, receipts, itemised repair quotation from an independent source, electronic payment confirmation, proforma / commercial invoice, etc.
- Mail, email or fax the claim form and your supporting documents to:

**To: Customer Care Manager
Group Customer Service
Singapore Post Limited 10
Eunos Road 8 #06-30
Singapore Post Centre 408600
Fax: 68425114
Email: claims@singpost.com**

- SingPost's liability for any loss of or damage to any article or its contents shall be limited to:
 - **ePAC Article Service:** a maximum amount of S\$68 per article or the declared value of the article, whichever is lower;
 - **Registered Service:** a maximum amount of S\$68 per article or the declared value of the article, whichever is lower;
 - **Tracked Package Service:** a maximum amount of S\$10 per article or the declared value of the article, whichever is lower;
 - **Speedpost Economy (Domestic):** a maximum amount of S\$50 per article or the declared value of the article, whichever is lower;
 - **Speedpost International Service:** a maximum amount of S\$150 per article or the declared value of the article, whichever is lower;
 - **vPost (with vCare):** full declared value and shipping charges
 - **vPost (without vCare):** 50% of the declared value and full shipping charges.
- For more information on SingPost Terms and conditions, please refer to our website at:
 - [SpeedPost Domestic](#)
 - [SpeedPost International](#)
 - [vPost](#)
 - [Singapore Post General](#)
 - [Tracked Package](#)
 - [Registered Services](#)
- For ePAC Article Service Terms and Conditions, please refer to contract signed with SingPost

Article Number: _____

Date of Shipment: _____

Date Submitted _____