

## Petition for Compensation

Branch Name :		Region Name:		Date of Arrival to HQ	
Branch File No :		Date of Arrival to the Region:		HQ File No.:	
		Region File No.:			

Compensation Tracking Number:	
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To Aras Kargo A.Ş \_\_\_\_\_ Branch/Agent/Commercial Representative Directorate,

I hereby kindly request the payment of my compensation claim of TRY \_\_\_\_\_ for my parcel for which I have requested compensation under the subject of (Damaged / Loss), the content and details of which are specified below with \_\_\_\_\_ date and \_\_\_\_\_ Shipment number.

### Information on Parcel Content and Customer Statement of Claim: \_\_\_\_\_

PRODUCT NAME	QUANTITY	BRAND	MODEL

### Claimant's

Name Surname

Address

ID No.

Bank Name

Account No

IBAN number

Telephone Number

E-mail

Stamp-Signature-Date

Branch Representative / Manager	Operations Regional Assistant Manager / Manager	Regional Manager	Compensation Assistant Manager	Compensation Manager	Deputy General Manager of Financial Affairs

Your personal data you provide hereby shall be processed and stored by Aras Kargo Yurt İçi Yurt Dışı Taşımacılık A.Ş. in accordance with Aras Kargo Personal Data Processing Policy.

For further information, you may review the Aras Kargo Clarification Text available at [www.araskargo.com.tr](http://www.araskargo.com.tr).