|  |  |
| --- | --- |
|  | **DECLARATION** **TRANSPORT INSURANCE** |

|  |  |
| --- | --- |
| Company:  | Policy number: 04056-0104517  |
|  |  |
| Email to: | Fabienne van de Giessen |
| Email address: | f.vandegiessen@nwo.nl |
| Date outward journey: |  |
| Date arrival: |  |
| Description of goods: |  |
| Location sent from: |  |
| Country sent from: |  |
| Mode of transport: |  |
| Destination location: |  |
| Destination country: |  |
| Insure stay there: |  |
| Amount: |  |
| Work order: |  |
| Signature workgroup leader: |  |
| Date returned: |  |
| Declared by: |  |