

TO : **SCUA MCO Japan**

Tel :078 272 1701, Fax : 078 272 1702 e-mai: [office@scua-mco.co.jp](mailto:office@scua-mco.co.jp)

## **Application for Cargo Damage Survey**

Evaluating the loss sustained this time, the undersigned would like to make an application for the damage survey.

The undersigned agrees to pay your survey fee in exchange for your survey report.

**Date of survey applied** :

**Name of the company** :

**Title** :

**Name of applicant** :

**Address of applicant** :

**Telephone** :

**Facsimile** :

**E Mail address** :

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**Signature of the Applicant**