## PAGE 1 OF 4 Notice of Loss or Damage



#### Important

- This Notice of Loss or Damage needs to be lodged with Toll Transitions as soon as possible after discovery of loss or damage,
- Lodgement can be made online at www.tolltransitions.com.au/defence
- in the event of essential items malfunctioning, please contact Toll Transitions for assistance on **1800 819 167** (Warranty Management Centre),
- do not proceed with any repairs or destroy or replace any items until authorised by Toll Transitions,
- use a separate Notice of Loss or Damage Form for each separate inventory.

| Removal Details (please complete in black in | nk) Move Number | (if known):         |                      |           |  |  |  |  |  |  |
|--|-----------------|---------------------|----------------------|-----------|--|--|--|--|--|--|
| Client Name:                                 |                 |                     | Employee ID/AGS No.: |           |  |  |  |  |  |  |
| Client Address (new delivery address)        |                 |                     |                      |           |  |  |  |  |  |  |
| Organisation/Department:                     |                 |                     |                      | Postcode: |  |  |  |  |  |  |
| Mobile:                                      | Work Phone:     |                     | Home Phone:          |           |  |  |  |  |  |  |
| Email Address:                               |                 |                     |                      |           |  |  |  |  |  |  |
| Agent contact (if applicable):               |                 |                     |                      |           |  |  |  |  |  |  |
| Removal from (e.g. Canberra):                |                 | Removal to (e.g. Sy | rdney):              |           |  |  |  |  |  |  |
| Inventory:                                   |                 |                     |                      |           |  |  |  |  |  |  |
| Provider (Removalist):                       |                 |                     |                      |           |  |  |  |  |  |  |
| Uplift date:                                 |                 | Delivery date:      |                      |           |  |  |  |  |  |  |

#### Declaration by the member

The information I have provided in this Form is true and accurate. I am aware that the giving of false or misleading information, documents or statements to Toll Transitions is a serious offence under the Commonwealth's Criminal Code 1995 and the Defence Force Discipline Act 1982 and that this legislation imposes substantial penalties, including imprisonment, for committing these offences. Any entitlement provided to me as a result of such conduct may be recovered.

| Ι,     |         |            |
|--------|---------|------------|
| Signed | Witness | Dated: / / |

#### Note: Further particulars may be required by Toll Transitions

### PAGE 2 OF 4 Notice of Loss/Damage Details



You should complete Sections 1 to 4

(Please refer to the last page for advice on how to complete this form).

|    | 1. Detail | s of items f | from your ir | nventory | 2. Full Description of Items | 3. Full Details of Loss/Damage |
|----|-----------|--------------|--------------|----------|------------------------------|--------------------------------|
|    | Page No.  | Item No.     | Age          | Value    | 2. Full Description of items | 5. Full Details of Loss/Damage |
| 1  |           |              |              |          |                              |                                |
| 2  |           |              |              |          |                              |                                |
| 3  |           |              |              |          |                              |                                |
| 4  |           |              |              |          |                              |                                |
| 5  |           |              |              |          |                              |                                |
| 6  |           |              |              |          |                              |                                |
| 7  |           |              |              |          |                              |                                |
| 8  |           |              |              |          |                              |                                |
| 9  |           |              |              |          |                              |                                |
| 10 |           |              |              |          |                              |                                |
| 11 |           |              |              |          |                              |                                |
| 12 |           |              |              |          |                              |                                |
| 13 |           |              |              |          |                              |                                |
| 14 |           |              |              |          |                              |                                |
| 15 |           |              |              |          |                              |                                |
| 16 |           |              |              |          |                              |                                |
| 17 |           |              |              |          |                              |                                |
| 18 |           |              |              |          |                              |                                |
| 19 |           |              |              |          |                              |                                |
| 20 |           |              |              |          |                              |                                |

If insufficient space, please complete an additional notice of loss/damage form.

## PAGE 3 OF 4 Notice of Loss/Damage Details



You should complete Sections 1 to 4

(Please refer to the last page for advice on how to complete this form).

| 4. Details of make good action required<br>or amount of compensation sought | 5. Warranty Case consultant's Report (include uplift ICR notation if relevant) | 6. Cash | 7. Repair | Est \$ |
|---|--|---------|-----------|--------|
|   | PL/NPL   |         |           |        |
|   | PL/NPL   |         |           |        |
|   |  |         |           |        |
|   | PL/NPL   |         |           |        |
|   |  |         |           |        |
|   | PL/NPL   |         |           |        |
|   |  |         |           |        |
|   | PL/NPL   |         |           |        |
|   | PL/NPL   |         |           |        |
|   | PL/NPL   |         |           |        |
|   | Sub Totals   |         |           |        |
|   | Totals   |         |           |        |

### When Lodging a Notice of Loss or Damage

Provide as detailed a description as possible of the item that is lost or damaged. Describe the damage to any item and tell us the exact location of the damage on that item.

Toll Transitions, subject to the terms of the Warranty outlined in Toll's **"Your Defence Relocation Guide**", will make good removal related loss or damage to your personal effects. Where practicable, damaged items will be repaired and returned to the condition they were in at your uplift, or compensation will be paid for minor damage. For items lost or unable to be repaired, we will offer to replace them with a like-for-like item (similar type, age and condition) or a new item, or compensate you based on those replacement costs. New replacement cover will apply only to those items which fall within predefined categories and age limits (as outlined in the table in Chapter 4 of the Toll Defence Relocation Guide).

Any item which is replaced by the supply of a like item or a new item (as per the table in the Toll Relocation Guide), or for which equivalent compensation is paid then becomes the property of Toll Transitions and we will make arrangements with you to collect the affected item.

We will review your Notice of Loss or Damage and give you the option of either having us arrange repair or replacement or you doing this yourself. If we make the arrangements, a Toll Transitions employee or one of our repairers will contact you to make the necessary arrangements with you.

Read Toll's **Your Defence Relocation Guide** - Version 9 for full details of the Warranty Scheme.

### **Disallowed Items**

Where an item has not been accepted due to lack of physical damage or other evidence indicating the item may have been damaged during the removal (e.g. crushed or wet carton) you may choose to arrange and pay for your own assessment of the item. If the assessment and its supporting evidence indicate that the damage was removals related then Toll Transitions will reconsider the item. If we then accept the item the assessment costs will be refunded to you.

You are encouraged to complete this form online at **www.tolltransitions.com.au/defence** 

Should you complete this form in hard-copy please post or fax to:

Toll Transitions – Warranty Management Centre PO Box 15294 City East QLD 4002 Email: wmc@tollgroup.com Phone: 1800 819 167 Fax: 07 3149 2704



| OFFICE USE ONLY |  |  |  |  |  |  |  |  |  |
|-----------------|--|--|--|--|--|--|--|--|--|
| NOTICE #        |  |  |  |  |  |  |  |  |  |
| PROCESSED       |  |  |  |  |  |  |  |  |  |
| VALIDATED       |  |  |  |  |  |  |  |  |  |

# **DIRECT PAYMENT AUTHORITY FORM**

| Company Name:  |  |      |      |      |       |   |   |   |   |   |      |     |     |     |   |   |   |   |   |  |  |  |
|--|--|------|------|------|-------|---|---|---|---|---|------|-----|-----|-----|---|---|---|---|---|--|--|--|
| N/A  |  |      |      |      |       |   |   |   |   |   |      |     |     |     |   |   |   |   |   |  |  |  |
|  |  |      |      |      |       |   |   |   |   |   |      |     |     |     |   |   |   |   |   |  |  |  |
| Company ABN:   |  |      |      |      |       |   |   |   |   |   |      |     |     |     |   |   |   |   |   |  |  |  |
| N/A  |  |      |      |      |       |   |   |   |   |   |      |     |     |     |   |   |   |   |   |  |  |  |
| Toll Account Code: N   |  |      |      |      |       |   |   |   |   |   | ce N | umb | er: |     |   |   |   |   |   |  |  |  |
| 4  | 4  |      |      |      |       |   |   |   |   | Ν |      |     |     |     |   |   |   | - |   |  |  |  |
| BANK DETAILS   |  |      |      |      |       |   |   |   |   |   |      |     |     |     |   |   |   |   |   |  |  |  |
| Ban  | k Na   | me:  | -    |      | •     | - | • | - | • | • | -    | -   | -   | -   | - |   | • | - | - |  |  |  |
|  |  |      |      |      |       |   |   |   |   |   |      |     |     |     |   |   |   |   |   |  |  |  |
| Bank Address:  |  |      |      |      |       |   |   |   |   |   |      |     |     |     |   |   |   |   |   |  |  |  |
|  |  |      |      |      |       |   |   |   |   |   |      |     |     |     |   |   |   |   |   |  |  |  |
|  |  |      |      |      |       |   |   |   |   |   |      |     |     |     |   |   |   |   |   |  |  |  |
| BSE  | 8 Nur  | nber | 1    |      | -     | 1 | T |   |   |   |      |     |     |     |   |   |   |   |   |  |  |  |
|  |  |      | -    |      |       |   | ļ |   |   |   |      |     |     |     |   |   |   |   |   |  |  |  |
| Nan  | ne of  | Acc  | ount | Hold | er/s: |   |   |   |   |   |      |     |     |     |   | • |   |   |   |  |  |  |
|  |  |      |      |      |       |   |   |   |   |   |      |     |     |     |   |   |   |   |   |  |  |  |
|  |  |      |      |      |       |   |   |   |   |   |      |     |     |     |   |   |   |   |   |  |  |  |
| Ban  | k Ac   | coun | t Nu | mber |       |   |   |   | - |   |      |     |     |     |   |   |   |   |   |  |  |  |
|  |  |      |      |      |       |   |   |   |   |   |      |     |     |     |   |   |   |   |   |  |  |  |
| We acknowledge that Toll Transitions will not accept responsibility if the bank details are incorrect or are subsequently changed without adequate written notice. |  |      |      |      |       |   |   |   |   |   |      |     |     |     |   |   |   |   |   |  |  |  |
| Signature: Print name:   |  |      |      |      |       |   |   |   |   |   |      |     |     |     |   |   |   |   |   |  |  |  |
| Contact Telephone No.: Date:   |  |      |      |      |       |   |   |   |   |   |      |     |     |     |   |   |   |   |   |  |  |  |
| Email address:   |  |      |      |      |       |   |   |   |   |   |      |     | Fax | No: |   |   |   |   |   |  |  |  |
|  | PLEASE NOTE: SIGNATURE MUST BE FROM THE SERVING MEMBER. DIGITAL OR AUTO<br>SIGNATURES ARE NOT ACCEPTED |      |      |      |       |   |   |   |   |   |      |     |     |     |   |   |   |   |   |  |  |  |