

# FORM FOR PRESENTATION OF LOSS AND DAMAGE CLAIM

(Read instructions on back before Filling in This Form)

To: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

(Name of Carrier)  
 (Street Address)  
 (City, State)

\_\_\_\_\_

(Date)

\_\_\_\_\_

(Claimant's Number)

\_\_\_\_\_

(Carrier's Number)

This claim for \$ \_\_\_\_\_ is made against your company for shipment:

Damage in connection with the following described  
 Loss

_____ (Shipper's Name)	_____ (Consignee's Name)
_____ (Point Shipped From)	_____ (Final Destination)
_____ (Name of Carrier Issuing Bill of Lading)	_____ (Name of Delivering Carrier)
_____ (Date of Bill of Lading)	_____ (Date of Delivery)
_____ (Routing of Shipment)	_____ (Delivering Carrier's Freight Bill No.)

If shipment reconsigned en route, state particulars: \_\_\_\_\_

## DETAILED STATEMENT SHOWING HOW AMOUNT CLAIMED IS DETERMINED

(Number and description of articles, nature and extent of loss or damage, invoice price of articles, amount of claim, etc.  
 (ALL DISCOUNTS and ALLOWANCES MUST BE SHOWN))

Total Amount Claimed	

The following documents are submitted in support of this claim:

- |   |   |
|---|---|
| <input type="checkbox"/> Original Bill of Lading<br><input type="checkbox"/> Carrier's Inspection Report Form<br><input type="checkbox"/> Original paid freight bill or other carrier document bearing notation of loss or damage if not shown on freight bill. | <input type="checkbox"/> Original invoice or certified copy<br><input type="checkbox"/> Other particulars obtained in proof of loss or damage claimed<br><input type="checkbox"/> Other _____ |
|---|---|

(Note: The absence of any document called for in connection with this claim must be explained. When impossible for claimants to produce original bill of lading or paid freight bill, a bond of indemnity must be given to protect carrier against duplicate claim supported by original documents.)

### INDEMNITY AGREEMENT

In the absence of the Original Freight Bill and/or Original Bill of Lading, we agree to hold the above named carrier to whom this claim is presented and any other participating carrier harmless and indemnified against any and all lawful claims which may be made against it or them arising out of the same shipment and will pay to the said carrier and any participating carrier(s) any losses, damages, costs, counsel fees or any other expenses which they or any of them may suffer or pay by reason of payment of our claim, herein described, without the surrender of the Original Freight Bill or Bill of Lading, as such was not provided and/or cannot be located.

The foregoing statement of facts is hereby certified as correct.

\_\_\_\_\_  
 (Signature)

\_\_\_\_\_  
 (Date)

\_\_\_\_\_  
 (Claimant's Name)

\_\_\_\_\_  
 (Company, Address, Title)

# STANDARD FORM FOR LOSS AND DAMAGE

## NOTICE TO CLAIMANTS

Claimants are requested to make use of this form for filing claims with carriers. Claims may be filed with the carrier's agent either at the point of origin or destination of shipments, or direct with the Claim Department of the carrier, and will be considered properly presented only when the information and documents called for on the other side of this form have, as far as possible, been supplied.

Before presenting a claim on account of loss and damage, the following important information respecting claims should be given careful consideration:

1. The terms under which property is accepted and transported by a carrier are stated on the bill of lading issued by the carrier; also in schedules, tariffs and classifications issued or subscribed to by the carrier. Persons intending to file claims should, before doing so, examine the terms and conditions under which the property was accepted and transported.
2. Carriers and their agents are bound by the provisions of law, and any deviation therefrom, by the payment of claims before the facts and measure of legal liability are established will render them as well as the claimant, liable to fines and penalties by law.
3. In order that carrier may have an opportunity to inspect goods and thereby properly verify claims, any loss or damage discovered after delivery should be reported to the agent of the delivering line, as far as possible, immediately upon delivery, or within 15 days after receipt of goods by consignee. Concealed damage claims should be supported by an "Inspection Report Form" covering the joint inspection of the loss or damage by consignee and carrier's representative.
4. It is a common practice for manufacturers and others to ship large quantities to key points for warehousing and later distribution to surrounding areas. In many instances, the original container is not opened and the contents examined before re-shipment to final destination. When this practice is followed, it is impossible to determine after delivery to final destination whether loss or damage of a concealed nature occurred before or after re-shipping. Consignees can usually expedite settlement by securing initial shipper's and warehouse's cooperation in supplying necessary billing reference so that shipment can be identified with carriers rendering transportation to the distribution point.