



STANDARD FORM FOR PRESENTATION OF LOSS & DAMAGE CLAIMS

Date: <small>(yyyy/mm/dd)</small>		Bill of Lading (PRO#):	
Customer Reference Number:			
Amount of Claim <small>(amount of claim)</small>		Name of Claimant: <small>(name of company submitting the claim)</small>	
Complete Mailing Address: <small>(street)</small>	<small>(city)</small>	<small>(PO Box)</small>	<small>(province)</small> <small>(postal code)</small>
Contact Name:		Telephone:	Extension:
Email Address:			
Claim Is For:	Damage		Shortage
Description of Shipment:			
Name of Shipper:		Tel:	Ext.
Name of Consignee:		Telephone:	Ext.
If claiming for damage, can the item(s) be repaired, used or sold at a discount?	Yes	No	
<small>If not, please explain:</small>			
Has quality control/quality assurance testing been completed?	Yes	No	
<small>If not possible, please explain:</small>			
DETAILED STATEMENT SHOWING HOW CLAIM AMOUNT IS DETERMINED			
<small>(number and description of articles, nature, and extent of loss or damage, invoice price of articles, amount of claim, etc.)</small>			
DESCRIPTION	AMOUNT		
Freight Charges Being Claimed			
Currency	Total Amount Claimed		
IN ADDITION TO THE INFORMATION ABOVE, PLEASE PROVIDE THE FOLLOWING DOCUMENTS IN SUPPORT OF THIS CLAIM			
Bill of Lading		Copy of Claimant's Cost Invoice	
Paid Freight Bill (if applicable)		Copy of Repair Bill (if applicable)	
Proof of Delivery		Other relevant supporting documentation	
<small>Maximum liability of \$2.00/LB or \$4.41/KG for shipments originating in Canada.; or USD \$25.00/lb per piece up to USD \$100,000 per occurrence for shipments originating from the US. As per section 5 (1)[c] of Terms & Conditions, excess valuation coverage (declared value) Not Applicable on shipments to or from the US. Please see Terms and Conditions. The customer must retain damaged goods until such time as claim is settled. Please note that all claims will be acknowledged within 30 days of receipt.</small>			