



**Loss and Damage Claims Procedure
LOSS & DAMAGE CLAIM**

Presentation Date: _____ Claim ID: _____

Location: _____ Freight Bill (Pro) Number: _____

Claim is hereby filed with the below carrier for: _____ In connection with the shipment described below: _____

Carrier Name: _____ Shipper Name: _____

BOL Number: _____ Origin: _____

Ship Date: _____ Customer Name: _____

Freight Bill Date: _____ Destination: _____

Product ID	Product Description	Quantity	Cost Per Unit	Weight	PO No.	Cost/Total
Discount (-)						
Freight Charges (+)						
Misc. Charges (+)						
Total Claim Amount:						

Inbound Claim Packet

- Completed Claim Form
- Copy of Freight Bill with exception(s) noted
- Copy of Inspection Report, if applicable
- Copy of signed BOL
- Supplier Invoice
- Disposition Instructions
- Color Photos
- Repair Invoice, if applicable
- Salvage Allowance, if applicable
- Any correspondence with carrier, facility or customer to support claim

Outbound Claim Packet

- Completed Claim Form
- Copy of Freight Bill with exception(s) noted
- Copy of Inspection Report, if applicable
- Copy of signed BOL
- Credit memo if issued to consignee
- Customer Invoice
- Disposition Instructions
- Color Photos
- Repair Invoice, if applicable
- Salvage Allowance, if applicable

Submit claim form to claims@shipsims.com