



Efreightsolutions Presentation of Loss and/or Damage

Date: _____

Claimant Company: _____

Claimant Address: _____

Phone: _____ Fax: _____

Amount of Claim: _____

Efreightsolutions Bill of Lading #: _____

Ship Date: _____

(IMPORTANT: UNABLE TO PROCESS WITHOUT THIS INFORMATION COMPLETED.)

- Claim filed for:
- Visual Damage (Noted on Freight Bill)
 - Shortage (Noted on Freight Bill)
 - Concealed Damage (Discovered after Delivery)
 - Concealed Loss (Discovered after Delivery)

Detailed statement substantiating amount of claim:

Pieces	Description	Weight	Amount Claimed

Send this claim form, along with the following to the e-mail below:

- Photos of damaged merchandise (if possible)
- Copy of original bill of sale
- Copy of repair invoice or replacement invoice for damaged item
- Signed delivery receipt indicating damages/loss (if possible)
- Inspection report, if applicable

Damaged goods, along with packaging, must be retained until the claim is resolved, or until the claimant is given disposition by the carrier. Early filing enhances our ability to process quickly. The majority of claims are concluded within ninety (90) calendar days. All claims will be acknowledged within thirty (30) days of receipt of the claim form. All freight charges must be paid before a claim will be concluded. Please forward payment of freight charges to be credited to your account.

I, the undersigned, hereby authorize EFSWW to act on our behalf in all matters relating to filing a claim against any carrier used in the transport of our products. Any and all acts carried out by EFSWW on our behalf shall have the same effect as acts of my own.

Signature: _____ Date: _____

Print Name: _____ Phone # _____

E-Mail Address: _____