

# FILING FREIGHT CARGO CLAIMS



The following summary and form will assist you with your claim.

Claims should be presented/filed promptly to allow investigations to take place while facts are reasonably “fresh”. Under statutory conditions of carriage, written notice of pending claims or formal claim packages must be presented within **60 days of delivery** with full payment of freight charges in order to prevent time bar declinations. Filing a claim against the carrier WILL protect any rights you have under the Bill of Lading. Claims must be submitted by the party responsible for the freight charges and must be a minimum of \$50.00. Packaging must comply with NMFC commercial packaging standards for normal LTL handling.

1. Freight should be accepted. Please refrain from refusing freight and take all the necessary steps to minimize the loss.
2. Document any visible discrepancies directly on the bill of lading or delivery receipt. Indicate a count and be specific, such as “3 boxes on top row crushed” and ensure the **driver initials the exceptions**. Any discrepancies discovered upon unpacking or un-crating are considered **concealed and not covered** under carrier liability (please contact your shipper/supplier for compensation)
3. The following terms are not acceptable and will not substantiate a claim as they are too vague and unclear:
  - ⊗ Subject to inspection
  - ⊗ Subject to count
  - ⊗ Damages
4. If you are responsible for the freight charges, submit a **notice of intent** in writing to CSA Claims Department via email at [claims@shipcsa.com](mailto:claims@shipcsa.com); otherwise, advise your shipper/supplier of your discrepancies. This statement should be on your own letterhead and must indicate details of the shipment including:
  - CSA Load/tracing #
  - Date of the shipment
  - Pick-up (Origin) address
  - Delivery (Destination) address
  - Nature of the claim (shortages / damages / repairs etc)
5. All salvage must be retained until investigations are completed. If disposition is required, you must advise CSA and obtain written authorization from the CSA Claims Department.
6. Submit a claim package with supporting documentation. Claims submitted inadequately can cause delays in investigations and settlement. The following documentation must accompany the claim package (you may wish to use this as a checklist):
  - (a) Statement of Claim that outlines in detail the amount and nature of the claim (see page 2 & 3 of this document). This document is also available for download from [www.csatransportation.com](http://www.csatransportation.com) by clicking on the FORMS or RESOURCES tab on the home page.
  - (b) Copy of the Supplier Invoice for the entire shipment outlining the **replacement/landed cost** of the goods. This supplier invoice MUST NOT include any unearned profit. If the claim is for **repair costs**, enclose a repair quote including labour charges along with a copy of the **replacement parts invoice**.
  - (c) Copy of the original signed Bill of Lading
  - (d) Pictures of the freight upon arrival; they should depict the nature of the claim and must include the packaging.
  - (e) Copy of the Delivery Receipt with the exceptions indicated and acknowledged by the driver.
  - (f) Proof of payment of the freight bill for the shipment in question.

We hope this summary has been of help to you. Please allow 30-90 days for investigations. A reminder that charges must be paid in full and any settlement will be reflected on your statement of account. Please do not hesitate to freight contact the CSA Claims Department [claims@shipcsa.com](mailto:claims@shipcsa.com) if you have any questions.

# CLAIM FORM LOSS AND DAMAGE

<b>CSA TRANSPORTATION</b> <b>Attn: Claims Department</b> <b>355 Horner Avenue</b> <b>Toronto, Ontario</b> <b>M8W 1Z7</b>  <b>Phone: 416.754.0999</b> <b>claims@shipcsa.com</b>	Date:
	Ship Date:
	CSA Load/Invoice #:
	Your reference #:

This claim is for \$ <input type="checkbox"/> USD <input type="checkbox"/> CAD in connection with the described shipment for: <input type="checkbox"/> <b>Damage</b> <input type="checkbox"/> <b>Shortage</b> <input type="checkbox"/> <b>Other</b> (Please specify):	
Shippers Name:	Consignee's Name:
Point Shipped From:	Final Destination:

DESCRIPTION OF ITEMS CLAIMED			
Please indicate the quantity, description, landed or invoice cost, etc. as reflected on the supporting documentation. Include all discounts and allowances. If goods can be repaired please include a repair quote, or if goods can be used/sold as-is, please provide credit or allowance amount.			
Quantity	Weight	Description / Item #	Invoice Cost
	← Total Qty		Total Invoice Cost →

DETAILED STATEMENT OF WHAT THE CLAIM REPRESENTS AND HOW THE CLAIM AMOUNT IS DETERMINED

**THE FOLLOWING DOCUMENTS ARE SUBMITTED IN SUPPORT OF THIS CLAIM:**

- |  |   |
|--|---|
| <input type="checkbox"/> Original/copy of supplier invoice     | <input type="checkbox"/> Bill of Lading   |
| <input type="checkbox"/> Inspection Report (if applicable)     | <input type="checkbox"/> Delivery Receipt |
| <input type="checkbox"/> Repair Quote/Estimate (if applicable) | <input type="checkbox"/> Images (product  |
| <input type="checkbox"/> Other particulars (please specify):   | packaging)                                |

**THE FOREGOING STATEMENT OF FACTS IS HEREBY CERTIFIED AS CORRECT**

Claimant Company Name:		Contact:	
Mailing Address:		Phone:	
City:	State/Province:	Zip/Postal Code:	Email Address:

Thank you for choosing CSA Transportation as your carrier. We appreciate your business and will make every effort to review and resolve your claim fairly, timely, and in accordance with our legal obligations.