

# STANDARD FORM FOR PRESENTATION OF LOSS AND DAMAGE CLAIM

Mail To: 2 DAY TRANSPORTATION, INC.  
PO Box 266110  
Weston, FL 33326  
Fax To: 305-675-6476  
Email To: CLAIMS@2DAYTRANSP.COM

Date of Claim: \_\_\_\_\_

Claimants Reference No. \_\_\_\_\_

**THIS CLAIM FOR \$ \_\_\_\_\_, IS MADE AGAINST YOUR COMPANY FOR  
\_\_\_\_\_ DAMAGE AND/OR \_\_\_\_\_ LOSS IN CONNECTION WITH THE FOLLOWING DESCRIBED SHIPMENT.**

\_\_\_\_\_  
(shippers name)

\_\_\_\_\_  
(consignee's name)

\_\_\_\_\_  
(point shipped from)

\_\_\_\_\_  
(final destination)

\_\_\_\_\_  
(date of Bill of Lading)

\_\_\_\_\_  
(date of delivery)

\_\_\_\_\_  
(carriers freight bill no.)

\_\_\_\_\_  
(exception no.)

## DETAILED STATEMENT SHOWING HOW CLAIM AMOUNT IS DETERMINED

Itemize the number and description of articles, the extent of loss or damage, invoice prices of articles, amount of claim, etc. ALL DISCOUNTS AND ALLOWANCES MUST BE SHOWN.

Description

Totals

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

### The following documents are submitted in support of this claim:

\_\_\_\_ Original Bill of Lading

\_\_\_\_ Carrier's Inspection Report Form

\_\_\_\_ Original Invoice or Certified Copy

\_\_\_\_ Other Documents

\_\_\_\_ Original paid freight bill or other carrier document bearing notation of loss or damage.

\_\_\_\_\_  
(claimants name)

\_\_\_\_\_  
(company name)

\_\_\_\_\_  
(signature and title)

\_\_\_\_\_  
(address)

A Bill of Lading or Freight Bill is a contract for the transportation of goods which consist of two parts:

- 1 Performance of the Contract by the contracted carrier.
- 2 Payment for the service rendered by the contractor.

In the event of loss or damage and upon completion of the contract, a claim may be filed.

The information below is meant to provide guidance with regard to the procedures and rules for filing a claim. However, in the event of conflict between this document and the published Tariff TWDW-100 of 2 DAY TRANSPORTATION, the published tariff shall and will take precedence.

### 1. WHAT IS A FREIGHT CLAIM?

A claim is a demand in writing for a specific or determinable amount of money which contains sufficient information to identify the shipment received by the carrier within time limits specified in the Bill of Lading contract.

### 2. WHEN AND WHERE TO FILE A FREIGHT CLAIM

Claims should be filed promptly once loss or damage is discovered. The time limit for filing a lost or damage claim is nine (9) months from date of delivery, or in the event of non-delivery within nine (9) months after a reasonable time for delivery has elapsed. Send your claim to:

2 DAY Transportation, Inc  
PO Box 266110  
Weston, FL 33326  
Fax to: 305-675-6476.  
Email: claims@2daytranspo.com

### 3. A CLAIMANT MAY BE A:

Shipper, Consignee, Owner of goods. Be sure to clearly indicate on the claim form the name and complete address of the claimant. Include a telephone number and FAX number (if available) to assist in prompt conclusion of the claim.

### 4. DOCUMENTS REQUIRED

#### A. BILL OF LADING AND/OR DELIVERY RECEIPT

Depending on which party is filing, the Bill of Lading and/or Delivery Receipt should be submitted to provide proof of shipment and /or proof of loss or damage

#### B. PAID FREIGHT BILL

Include the original paid freight bill or a signed statement verifying freight charges have been paid in full of the shipment against which the claim is filed. For a claim to be concluded, all freight charges must be paid.

#### C. ORIGINAL INVOICE

A complete original invoice verifies the claimed amount does not exceed the terms of sale (value of goods at destination) and excludes any prospective profit, in most cases. The original must disclose all discounts and allowances, if any. A clear photocopy of the complete original invoice is acceptable.

#### D. REPAIR INVOICE

(If applicable) When submitting a repair invoice, include a breakdown of hours, labor rate and materials.

### 5. CONCEALED LOSS OR DAMAGE

Loss or damage to contents of a shipping container, which could not have been noted at time of delivery, must be reported to 2 DAY TRANSPORTATION within **Five (5)** calendar days from date of delivery. A request for inspection should be made at that time. All merchandise should be retained in the original shipping container, in the same condition it was in when loss or damage was discovered, until inspected.

### 6. INSPECTION BY AN INDEPENDENT AGENT

Inspection of a damaged shipment may be requested by calling the local service center. Inspection by 2 DAY TRANSPORTATION or an independent agent will be made promptly, normally within 48 hours after receipt of request. Inspection will include examination of the damaged merchandise and the shipping container. If a shortage is involved, inspector will check contents of a package against the invoice, weigh the shipping container and contents, or conduct additional investigation to establish a loss has occurred. In either case inspection will be limited to a factual report. A written record of 2 DAY TRANSPORTATION's findings will be made in duplicate with a copy of the report given to the consignee. The inspection report is NOT a claim. It is the responsibility of the claimant to file a cargo claim within prescribed time limits and to respond to any requests from Gold Coast Freightways for supporting documentation. The claim will be concluded based on facts determined during the investigation.

## 7. BURDENS OF PROOF

The claimant must establish three things:

- A. The carrier received the freight in good condition at origin.
- B. The freight was short or damaged when received at destination.
- C. The dollar amount of loss or damage.

## 8. THE FREIGHT BILL

Payment of freight charges may not be delayed due to alleged loss or damage. Charges should be paid in full and the portion applicable to lost or damaged items included in the freight claim. The following are important points to remember:

- A. Claims and payment of freight charges are two entirely different transactions.
- B. Without payment of the freight charges, the transportation contract has not been completed. A valid claim will not be paid until freight charges are paid.

## 9. DISPOSITION OF DAMAGED FREIGHT

Damaged goods must be retained until the claim is resolved, or until the claimant is given disposition by the carrier.

## 10. STATUS OF CLAIM

The majority of claims are concluded within sixty (60) calendar days. All claims will be acknowledged within thirty (30) days of receipt.

## 11. IF CLAIM IS DECLINED

If the claimant has additional information, a rebuttal letter should be sent to the examiner who declined the claim. The rebuttal letter should clearly indicate why the claimant believes claim payment should be reconsidered and include any evidence or documentation not previously submitted. Always refer to the assigned claim number when corresponding with an examiner. When communicating with Gold Coast Freightways, send all correspondence to the address shown here:

2 DAY Transportation, Inc  
PO Box 266110  
Weston, FL 33326  
Fax to: 305-675-6476.  
Email: claims@2daytranspo.com

## 12. CHECKLIST

Prior to submitting your claim, be sure it includes the following information:

- A. The claim must be in writing and specify a dollar or determinable amount, reason for claim (loss or damage), pro number and date, claimant name, and address. Do not submit more than one claim on each form.
- B. The claim must be filed within nine (9) months from date of delivery. However, early filing enhances our ability to process quickly. In the event of non-delivery, within (9) months after a reasonable time for delivery has elapsed. Limitations differ on shipments originating from Canada.
- C. Documents which should be included with the claim:
  - Bill of Lading (or Bond of Indemnity) and/or Delivery Receipt
  - Verification of paid freight charges
  - Complete Original Invoice showing all discounts
  - Repair Invoice (if applicable) D.

Send claims to:

Mail to: 2 DAY Transportation, Inc  
PO Box 266110  
Weston, FL 33326

or: Fax to: 305-675-6476.  
Email: claims@2daytranspo.com