



\*Click in document to fill out form.

### FAX COVER SHEET

To: Claims Department

From:

Company: Holland

Date:

Fax: 866-510-1294

Total No. of pages (including cover):

Phone: 616-395-5000

Freight Bill / PRO Number:

email: claims@hollandregional.com

Your reference number:

Address: 700 S. Waverly

Address:

City: Holland State: MI Zip: 49423

City: State: Zip:

URGENT

FOR REVIEW

PLEASE COMMENT

PLEASE REPLY

Notes/comments:

**LOSS & DAMAGE CLAIM**

PLEASE USE EITHER MAIL OR FAX - NOT BOTH

\*Click in document to fill out form.

Today's Date: \_\_\_\_\_ Freight Bill/PRO Number \_\_\_\_\_

**SHIPPER**

Company Name \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**CONSIGNEE**

Company Name \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

OUR CLAIM IS FILED FOR (check one):  SHORTAGE  VISIBLE DAMAGE

Claimant's Claim Number \_\_\_\_\_

**CLAIMANT**

Company Name \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**REMIT TO (if different from claimant)**

Company Name \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

 CONCEALED DAMAGE  OTHER (Explain)

PIECES	ITEMIZED DESCRIPTION OF ARTICLES INCLUDING MODEL NUMBERS, SIZE, COLOR, MARKING, ETC.	CONDITION (CIRCLE)		WEIGHT (POUNDS)	\$ AMOUNT CLAIMED
		NEW	USED		
REQUIRED: Total Amount Claimed					

Your claim must be supported by at least one document from each of the categories below (where applicable). Failure to include sufficient documentation will delay settlement of your claim.

**Documentation of Value of Goods and Amount Claimed**

- Copy of the complete original vendor invoice showing all discounts.
- Copy of the original repair invoice detailing hours to repair, labor rate, and material cost.
- Record of discounted sale.

If the Claim involves damaged goods, please check one or more of the following:

- Can be repaired for approximately \$ \_\_\_\_\_
- Can be used "as-is" for an allowance of \$ \_\_\_\_\_
- Are available for carrier pickup.
- Are unavailable (please explain):  
\_\_\_\_\_  
\_\_\_\_\_

**Document of Transportation Contract**

- Copy of the original Bill of Lading
- Copy of paid freight bill

**Documentation that Supports the Occurrence of Shortage or Damage**

- Consignee copy of delivery receipt
- Copy of the inspection report
- A detailed description of the shortage or damage including brochures, drawings, photographs, etc.

**Other Documentation (List)**

- 1)
- 2)

PREPARER'S NAME (PRINT) \_\_\_\_\_

PREPARER'S SIGNATURE \_\_\_\_\_

DATE \_\_\_\_\_

TELEPHONE NUMBER \_\_\_\_\_

FACSIMILE NUMBER \_\_\_\_\_

E-MAIL ADDRESS \_\_\_\_\_

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Holland shipments move subject to the Uniform Straight Bill of Lading as found in the National Motor Freight Classification (NMFC) Tariff, 100 series. Section 2(b) of the bill of lading provides that claims and supporting documentation are required to be filed with the proper carrier within not more than nine (9) months from the date of delivery in the event of a damage claim, and not more than nine (9) months from the date of the bill of lading in the event of loss.

All shipments also move subject to either contracts or tariffs. If you or your company does not have a contract with Holland your shipment is most likely moved subject to the NMFC Classification and Holland's Rules Tariff (different laws and regulations may apply for shipments from or to points outside of the United States).

Holland Rules Tariff provides information about prohibited articles and limits of liability. Please refer to the latest edition of the Rules Tariff found at [www.hollandregional.com](http://www.hollandregional.com) in the Shipping Forms section under Accessorial Rates and Services.

#### ■ Claims Must Contain:

- The freight bill number
- Reason for claim: shortage, damage, repair, allowance, & pilferage
- What is claimed: number of cartons, units per carton, description of merchandise including; part, stock item, model, and / or serial number(s)
- Specific dollar amount of the claim
- Any supporting information or documentation explaining the claim

#### ■ Documents Required:

- Copy of the original invoice for merchandise lost or damaged on the shipment for which the claim represents
- Copy of the delivery receipt or paid freight bill
- Copy of the inspection report and additional pictures, if available
- Detailed explanation of repair costs, if applicable, showing the breakdown for parts, labor rate per hour, and materials used, plus a copy of the invoice for the purchase cost of parts

■ During the investigation of the claim, Holland may require additional documentation or explanation that establishes the measure of damages, or evidence of carrier liability

#### ■ Acknowledgement and Disposition of Claims:

- Holland will acknowledge claim within thirty (30) days after receipt, and assign a separate claim number
- Holland will pay, decline payment, or make a firm offer of compromise within 120 days after receipt of claim

#### ■ Claim Mitigation:

- When damaged goods are not completely destroyed and rendered worthless, the claimant is required by common law to take all necessary steps to minimize the loss to the fullest possible extent.
- If the goods can be repaired for a reasonable amount, or sold at a discount in their present condition, or retained for an allowance, the claimant would arrange for such repairs or sell them at the best price obtainable; provided such action is reasonable in the relationship to their actual market value. The method that best serves to minimize the loss must be employed before filing formal claim with the carrier.
- If the goods cannot be repaired economically, sold at a reasonable discount, or retained for an allowance, and a claim is therefore filed with the carrier for their full actual value, the claimant must retain the damaged goods and preserve its remaining value until the carrier has completed its investigation of the claim.

IF THE DAMAGE RESULTED FROM SUCH NON CARRIER CAUSES AS INADEQUATE PACKING, MANUFACTURING DEFECTS, ETC., CLAIM SHOULD BE FILED DIRECTLY WITH VENDOR / SUPPLIER.

#### ■ Salvage Retention:

- It is the duty of the consignee, or party in the possession, to retain damaged merchandise and shipping container without disposing thereof, until the investigation of the claim has been concluded. In the event the carrier accepts full liability and the claim is to be paid, the carrier is entitled to take possession of the damaged merchandise within a reasonable time period following acceptance of liability, the consignee or party in possession of the goods must contact the carrier and request removal of goods from premises.

#### ■ General Information Regarding Freight Claims:

- When damage or loss of contents is found, during or after delivery, the consignee, or party in possession must notify the carrier and request an inspection within five (5) business days from the date of delivery. In cases of concealed damage, the burden of proving carrier liability rests with the claimant by showing evidence that the damage had not occurred prior to, or after carrier's handling.
- If, after investigation, it is found that the responsibility for loss, or damage is with another carrier with whom the shipment was interchanged, the claim will be transmitted to the responsible carrier on behalf of the claimant. A claim will not be voluntarily paid in advance until receiving notice of payment from the responsible carrier. These claims sometimes take longer to settle than claims involving one carrier.