

# PRESENTATION OF SHORTAGE OR DAMAGE CLAIM

06555-30 (1/84)

FOR CARRIER USE ONLY

This claim for  CONCEALED DAMAGE  
 DAMAGE is presented to  SHORTAGE

DATE FILED

CARRIER CLAIM NUMBER

CARRIER NAME  
A. DUIE PYLE

TERMINAL ADDRESS  
650 WESTTOWN RD, P.O. BOX 564

CITY & STATE ZIP  
WEST CHESTER, PA 19381

RCVG TERM SIC/DATE

CLAIMANT (Company Name)

ADDRESS

CITY & STATE ZIP

PHONE NUMBER  
AREA CODE

CLAIMANT'S REFERENCE NUMBER

PLEASE REFER TO THIS NUMBER IN ALL CORRESPONDENCE

CARRIER FREIGHT BILL/INVOICE #: B/L DATE

WT. OF SHPT.

SHIPPER

ADDRESS

CITY & STATE ZIP

CONSIGNEE

ADDRESS

CITY & STATE ZIP

BE SURE TO ATTACH LETTER OF EXPLANATION IF THERE ARE SPECIAL CIRCUMSTANCES WE SHOULD KNOW ABOUT.

\$ AMOUNT CLAIMED

CHECK ONE

FULL VALUE

REPAIR ALLOWANCE

## STATEMENT OF SHORTAGE OR DAMAGE

NO. OF PCS.	DESCRIPTION OF ARTICLES, INCLUDING MODEL NO., ETC.	

IMPORTANT NOTE TO OUR CUSTOMERS:

TOTAL AMOUNT CLAIMED-

\$

THE FOLLOWING DOCUMENTS MUST BE PRESENT TO PROCESS YOUR CLAIM

### SHORTAGE CLAIMS/ITEM 1 THRU 3 • DAMAGE CLAIMS/ITEM 1 THRU 6

- Original vender's invoice (proof of purchase cost or a photostatic copy showing all the discounts. (Please include entire invoice)
- Legible copy of freight bill or original paid freight bill if available.
- Original bill of lading or bond in indemnity in lieu thereof.
- Carrier's inspection report, where copy has been provided.
- Invoice of repair or reconditioning, showing breakdown of labor by hour and rate of pay, if applicable.
- Invoice of materials purchased to complete repair or reconditioning, if applicable.

**NOTE:** in case of nondelivery or shortage it will speed conclusion if claim includes a signed statement from the consignee certifying the goods claimed short have never been received from any source and further, notification will be given to the carrier to whom this claim was presented in the event that said goods are ever received in the future.

The claimant certifies the foregoing to be correct, and agrees to indemnify the carrier against loss in the event the original Bill of Lading and/or original freight bill are not submitted.

ABOVE MUST BE COMPLETED!

SIGNATURE OF CLAIMANT