

Claim Form for Lost or Damaged Parcels

Personal Information

First Name	Last Name	Email	
<input type="text"/>	<input type="text"/>	<input type="text"/>	
Address		Phone	
<input type="text"/>		<input type="text"/>	
City	State	Zip	
<input type="text"/>	<input type="text"/>	<input type="text"/>	

Shipment Information

Item Name	Carrier	Claim Type:	<input type="radio"/> Loss
<input type="text"/>	<input type="text"/>		<input type="radio"/> Damage
Ship Date	Delivery Date	Tracking (if applicable)	<input type="radio"/> Pilferage
<input type="text"/>	<input type="text"/>	<input type="text"/>	
Describe Item	Describe Box		
<input type="text"/>	<input type="text"/>		
Describe Loss/Damage			
<input type="text"/>			

Claim Information

Order ID	Damage/Lost Value	Claim Amount
<input type="text"/>	<input type="text"/>	<input type="text"/>

Please allow 7-10 business days for claim settlement upon receipt of all required documents (**Invoice, Buyer Affidavit or Copy of Carrier Check**). If Claim is for Damage, hold on to items until claim has been finalized.

Signature

Date

Warning: Any fraudulent claims will make the shipper and/or consignee liable for any prosecution for mail fraud under Federal Criminal

