

Freight Guard

CLAIM PROCEDURES

To ensure that your claim is evaluated and adjusted as quickly as possible it is critical that you follow the claim procedures outlined below. Failure to follow the procedures may jeopardize your rights under the FreightGuard Cargo program insured by RLI Insurance Company.

STEP 1- Immediate inspection of cargo received and put the carrier on notice immediately:

In order to preserve your legal rights against any carrier, and as required by this insurance, upon receipt of every consignment;

- a. Make immediate inspection of the each package before signing the delivery receipt.
- b. Write all exceptions on the delivery receipt for any loss or damage existing at the time of delivery and during the transit. Be as clear and exact as possible when noting these exceptions of delivery receipt AND keep a copy for your claim file.
- c. Keep the packing material for examination by the surveyor that may be assigned.
- d. Immediately issue claim against carrier letter(s) to the actual carrier(s) responsible for the loss or known damage. If this is unclear, issue this notice to every third party and carrier who handled the cargo during the entire voyage. (Sample letters enclosed)

Note: Claim against Carrier letter #1 should be used whenever there is damaged cargo that is available for inspection. **Claim against Carrier letter #2** should be used when there is no cargo to be inspected (i.e. non-deliveries)

STEP 2-Immediately notify our claims department

You should immediately:

Complete the **First Notice of Claim** form (this provides critical contact information we will need) and e-mail or fax to:

Subrogateway (USA), Inc.
2512 Artesia Blvd., Suite 250
Redondo Beach, CA 90278
USA

Telephone: 310-379-9660
Fax: 310-374-2431
Email : claims@subrogatewayusa.com

**(NOTE IN CASE OF HYJACKING OR MAJOR THEFTS
IMMEDIATELY CALL (310) 892-4884 AND/OR OUR EAST COAST
OFFICE (416) 346-8562**

STEP 3-Subrogateway will confirm file number and assign survey if required.

Our claims administrator Subrogateway will respond as follows:

1. **Claim File Number or Reference:** Assign and confirm to you. Please make a note of this number and use it in all of your future correspondence to us.
2. **Survey:** Determine if a survey is needed and if so, assign a survey agent.

STEP 4 – Documentation in support of the claim.

All documents **you forward** should reference the following:

1. **Claim** file number
2. **Your own** reference number

Please make sure all documents are clear and concise. Documents should be sent initially via e-mail to Claims@subrogatewayusa.com or faxed to (310) 374-2431 and then originals should be sent via mail or courier service.

Information and Documents required:

1. “First Notice of Claim Form” completed see attachment.
2. Original insurance certificate – Received from Freight Guard site. (Keep copy for your file)
3. **Commercial Invoice** reflecting the total value of the shipment.
4. Copies of all original bills of lading/trucker’s receipts (clean copy front and back) covering the entire shipment insured by FreightGuard Cargo policy.
5. Copies of all Delivery Receipts with proper exceptions in respect of loss or damage noted thereon, as well as any other exceptions or bad order slips and carrier inspection reports that may substantiate the loss or damage.
6. A copy of the Freight Invoice reflecting all charges to the shipper or consignee.
7. A copy of claim against carrier letter(s). (See Step 1 of these procedures)
8. **Itemized Claim Statement**, with values and reflecting all items involved in the claim as well as the financial loss associated with each item. This should include the freight cost if the items. (A Sample format you can use is attached)
9. **Packing List** reflecting every item that was shipped
10. In the case of non-delivery claims, written correspondence by the carriers/trucker involved attesting to their inability to make delivery.
11. Any other documents and or correspondence that will support this claim.

The above documents are generally all that is required to adjust the claim. Please note that there is a possibility that additional information or documents may be required after reviewing the above.

FIRST NOTICE OF CLAIM

TODAY'S DATE: _____

Has a "Claim against Carrier Letter" been issued?	<i>If no, please do so immediately</i>
Contact (your name):	
Branch Location:	
Your Phone Number:	Fax Number:
Date of 1 st Notice from Claimant:	
Was notice was issued verbally or in Writing?	
Date of said Shipment:	
Date of Delivery:	
Was the Shipment damaged, missing or other?	
Was this Shipment Insured?	
If so, for what dollar amount:	
Insurance Certificate number:	
Declared value amount:	
Shipper:	
Contact Name:	
Phone Number:	Fax Number:
Address line 1:	
Address line 2:	
Consignee:	
Contact Name:	
Phone Number:	Fax Number:
Address line 1:	
Address line 2:	
Third Party:	
Contact Name:	
Phone Number:	Fax Number:
Address line 1:	
Address line 2:	
Customs Broker or Freight Forwarder Reference Number:	
House Air Waybill or Ocean Bill of Lading Number:	
Master Air Waybill or Ocean Bill of Lading Number:	
Bill of Lading Date:	
Weight of Shipment:	Weight of lost/damaged cargo:
Estimated Claim Amount: \$	
Commodity description:	
How many pieces in the shipment?	How many pieces lost or damaged?

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Details of the loss or damage:	
Was the shipment Domestic or International?	
Was the shipment Air, Ocean, Truck, Rail or other?	
Carrier:	
Vessel Name:	
Origin:	Destination:
Who is pursuing this claim? (Who suffered financial loss)?	
Please provide location of damaged cargo and complete name of Company	
Contact(s) Name(s)	
Phone Number:	Fax Number:
Address line 1:	
Address line 2:	
Reference Numbers:	
Full Name of Destination Agent	

Please attach copy of a House Air-Waybill or Bill of Lading.

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Subrogateway use only

Subrogateway File number: _____

Subrogateway Adjuster: _____

Please e-mail or fax this form to claims@subrogatewayusa.com Fax number (310) 374-2431

SAMPLE CLAIM AGAINST CARRIER LETTER #1
(TO BE USED WHEN THERE IS CARGO TO INSPECT)

This should be typed on your letterhead

Date

Carriers Name and Address

RE: Airline/Voyage:
B/L# Arr.:
Shipment Value:
Nature of loss/damage:
Reference #:

To whom it may concern:

This is to notify you that the above captioned consignment was delivered in damaged condition.

Although the extent of loss/damage has not yet been determined, we are holding you responsible for the loss sustained by this consignment, as the goods were in your care, custody or control and the time of the loss/damage.

This will also act as a formal invitation for you to perform a survey of the said cargo. The cargo is currently at the location listed below. Please immediately notify the contact stated below if you wish to conduct a survey.

Contact Name:
Address:
Phone/Fax:

Very truly yours,

Your Name
Title or Position

cc: Subrogateway Claims Dept.

SAMPLE CLAIM AGAINST CARRIER LETTER #2
(TO BE USED WHEN THERE IS NO CARGO TO INSPECT)

This should be typed on your letterhead

Date

Carriers Name and Address

RE: Airline/Voyage:
B/L# Arr.:
Shipment Value:
Nature of loss/damage:
Reference #:

To whom it may concern:

This is to notify you that the above captioned consignment was not been delivered.

Although the extent of loss has not yet been determined, we are holding you responsible for the loss sustained by this consignment as the goods were in your care, custody or control at the time of the loss/damage.

Very truly yours,

Your Name
Title or Position

cc: Subrogateway Claims Dept.

CLAIM STATEMENT -

Date of shipment:
Reference number:
Bill of Lading or House Air Waybill Number:
Certificate Number:
C.N.A. Claim Number:

Description of Cargo	Type of Damage	No. of Pieces	Weight of Each Piece	Amount

Total amount of the above: \$
Duty charges: \$
Freight charges: \$
Additional charges: \$
TOTAL CLAIM AMOUNT: \$

Claimant Name:	
Claimant Address line 1:	
Claimant Address line 2:	
Phone:	Fax:

The ongoing statement of facts is hereby certified to as correct:

Signature of claimant or claimant's representative

Printed name of claimant or representative including job title

Date Signed