

UPS SCS Express Critical Customer Cargo Claim Form



Press F1 on any field for help

Claim Amount (specify currency): _____

Is hereby filed for (check one): Non delivery Shortage Damage

Date filed:		Claim Payable to:	
UPS SCS Bill of Lading/Air Waybill No:		Company Name	
UPS SCS Bill of Lading/Air Waybill date:		Address	
UPS SCS Order No.:	Date:	City/Town & State & Country	Zip / Postal Code
Claimant Reference No.:	Confirmation Number :		

Shipper		Consignee	
Address		Address	
City/Town & State & Country	Zip / Postal Code	City/Town & State & Country	Zip / Postal Code

CLAIM MUST BE SUPPORTED BY A DETAILED STATEMENT SHOWING HOW THE AMOUNT WAS DETERMINED. INCLUDE A COMPLETE DESCRIPTION OF LOST ITEMS; SIZE, COLOR, MARKINGS, ETC. (If more room is needed in this section, use an additional claim form to be included with the submission of this claim form.)

Detailed Merchandise Description	Quantity	Merchandise Cost Each Unit	Total Merchandise Cost	Weight per Unit (kg or lb)	Total Weight of Merchandise (kg or lb)
Total of Claimed Merchandise					
Any additional claimed amount				Specify Reason	
TOTAL OF CLAIM	Currency				

Package type: <input type="checkbox"/> Cartons <input type="checkbox"/> Pallets <input type="checkbox"/> Crates Other: _____	Goods packed by: <input type="checkbox"/> Shipper <input type="checkbox"/> UPS SCS
Was the merchandise: New <input type="checkbox"/> Used <input type="checkbox"/>	
Do you have your own Marine/Cargo Insurance Coverage? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, list name of Insurance Carrier: _____	
Did you purchase Marine/Cargo Insurance through UPS SCS? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, give insured value amount: _____	
Did you purchase Declared Value with UPS SCS? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, give declared value amount: _____	

NOTE: Claim should be supported by following documents. Failure to include sufficient documentation may be grounds for denial of your claim and may delay conclusion of the claim. UPS SCS reserves the right to request any additional documents not listed below.

- UPS SCS Bill of Lading/Air Waybill referenced above
- Commercial invoice(s) for entire shipment showing the cost of the goods being sold by Claimant to end Consignee
- Packing list for entire shipment with the weight of each individual item in the claimed shipment
- Signed Proof of Delivery (POD) from Consignee if applicable, or other delivery document
- Survey/Inspection report if survey/inspection held
- Pictures of damaged product if available
- Repair estimate, if available
- Shippers' letter of Instruction (SLI) and correspondence pertaining to the shipment
- Certificate of Insurance, if shipment was insured and a certificate was issued
- Other documents to support claim:**

Remarks: _____

The statements contained in this claim form are hereby certified as true and correct.

Claimant's Company Name:	Tel No.:
Claimant's Contact Name (print):	E-Mail:
Claimant's Signature:	Date: _____ Fax No: _____

Mail Claim to: UPS Cargo Claims Department, 35 Glenlake Parkway, Suite 320, Atlanta, GA 30328
Phone No.: 866-746-2404 / 404-828-3404 Fax No.: 800-379-9084 / 404-828-3084 Email: UPSCargoclaims@UPS.com



TERMS AND CONDITIONS

All services are subject to applicable Terms & Conditions of service, which are available for review on the website at www.ups-scs.com. Said Terms & Conditions include, but are not limited to, liability limitations and claim filing requirements.

CLAIM FILING HELPFUL HINTS

1. At time of Receipt of a shipment, the receiver needs to count and note any outside signs of damage to the cargo.
2. Any irregularities must be clearly noted on the delivery receipt and/or electronic device. The UPS SCS local Operations must be notified immediately as outlined on the UPS SCS terms and conditions.
3. All packaging material must be retained until conclusion of the claim.
4. If possible, take photographs of the noted irregularities.
5. You should protect cargo from any additional loss or damage in order to minimize the loss. It is your responsibility to mitigate your loss to the lowest value.
6. No loss or damage claim will be processed until all transportation charges have been paid. The amount of a claim may not be deducted from transportation charges.

General Limits of Liability *

*For additional information, please refer to the Express Critical Terms & Conditions on the Supply Chain Solutions website.