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| <input type="checkbox"/> Edge Transportation Services Ltd. | <input type="checkbox"/> Kindersley Transport Ltd. | <input type="checkbox"/> STG Fleet Services |
| <input type="checkbox"/> Harv Wilkening Transport Ltd. | <input type="checkbox"/> PMK Logistics Inc. | <input type="checkbox"/> Tiger Courier Inc. |
| <input type="checkbox"/> Hi Tech Express Inc. | <input type="checkbox"/> Quill Transport Ltd. | <input type="checkbox"/> Triangle Freight Services Ltd. |

CLAIM APPLICATION FORM
(Please Print)

To file a shipment loss or damage claim, complete and email the following application and documentation to the Claims Department at claims@siemenstransport.com

APPLICATION INFORMATION

YOUR NAME _____

COMPANY NAME _____

CUSTOMER ACCOUNT NUMBER _____

STREET ADDRESS _____

CITY _____ PROVINCE/STATE _____ ZIP/POSTAL CODE _____

COUNTRY _____

PHONE _____ FAX _____ EMAIL _____

CLAIM INFORMATION

YOUR REFERENCE _____

WAYBILL # _____

DESCRIPTION OF DAMAGED AND/OR MISSING ARTICLE(S):

TOTAL PIECES _____ TOTAL WEIGHT _____

CLAIM INFORMATION

CLAIM AMOUNT _____ \$CAD \$US

IN ORDER TO AVOID DELAY IN SETTLEMENT OF YOUR CLAIM, A COPY OF THE SUPPLIER'S INVOICE FOR THE PRODUCT IN QUESTION AND/OR A REPAIR BILL WHEN APPLICABLE MUST ACCOMPANY YOUR CLAIM APPLICATION.

SIGNATURE: _____ DATE: _____

NOTE:

- * Damaged product must be retained until the claim has been finalized.
- * A claim or the Intent to Claim must be filed in writing to the carrier within sixty (60) days of the date of delivery.
- * The carrier's liability is limited to \$2/lb unless the value of the shipment is stated on the bill of lading.

Siemens Transportation Group Inc. Head Office
P.O. Box 7290 Saskatoon SK S7K 4J2
claims@siemenstransport.com
Phone: (306) 934-1911 Fax: (306) 668-5849