## **Cargo Insurance Claim Filing Instructions**

<u>IMPORTANT NOTICE:</u> Claims should be submitted immediately upon discovery of a loss. Please carefully follow these instructions to ensure prompt processing.

**STEP 1:** Place all transportation carriers involved in the shipment, including steamship lines, airlines and trucking companies on notice, using the attached sample *Letter of Notice to Carrier*. This notification should be faxed in order to submit a time-stamped document with the claim submission.

**STEP 2:** Preserve all packaging, damaged goods and seals; take photos.

**STEP 3:** Gather all documents to support your claim including:

- o Commercial Invoice (With terms of sale)
- Letter of Instruction to your transportation carrier
- o Temperature Records (For Refrigerated Cargo)
- SED Form (Shipper Export Declarations)
- o Photo(s)
- o Police Report (If investigated by police)
- o Itemized Statement of Claim
- o Packing List (If apply)
- o Freight Invoice
- o Doc/Delivery Receipts
- o Loading / Unloading Tallies
- o Notice of Loss to Carrier Dated Document (Fax/E-mail)
- Customs Clearance Forms

**STEP 4:** Complete the attached *Official Request for Claim Form* providing all available information.

**STEP 5:** Prepare a *Statement of Claim* (This document, prepared on company letterhead, explains the specific details of the loss and validates the value of the claim)

**STEP 6:** Fax or email the aforementioned documents to:

Polaris Worldwide Logistics 6675 Amberton Drive Suite 1 Elkridge MD 21075 Fax: 1-410-379-2701

bwics@polaris-logistics.com

#### FREQUENTLY ASKED QUESTIONS

HOW LONG WILL IT TAKE TO SETTLE AN OPEN CLAIM? Most cargo claims are settled within 30 days following the completion of <u>all</u> documentation and surveys (if required).

WHEN IS A SURVEY REQUIRED? The insurance carrier has the right to require a survey, generally for claims in excess of \$5,000. However, depending on the type of loss, a survey may be necessary on any claim amount. The insurance carrier will notify you generally within 24 hours following claim submission, if a survey will be required.

WHO IS RESPONSIBLE TO PAY THE SURVEYOR FEES? The assured is responsible for the surveyor fees. However, these fees can be included in the total amount requested for claim reimbursement.

# WHAT WILL CAUSE MY CLAIM TO BE DELAYED OR RESULT IN NOT GETTING A FULL PAYMENT?

All cargo insurance companies have four basic requirements before they will pay your claim.

- 1. Evidence that you have placed your transportation carrier(s) on notice of the loss and that steps have been taken to reduce further loss of the goods.
- 2. Evidence that there was loss or damage to the goods. **Do not discard damaged goods, packaging and container seals until surveyor has had a chance to investigate the loss.** (Photos are required)
- 3. Evidence to support the value of the claim.
- 4. Evidence to support that the loss occurred during transit.

### **Sample Letter of Notice to Transportation Carrier**

Please use the template below as a guide to submit a <u>Letter of Notice</u> to your transportation carrier(s). This should be written on your company's letterhead and forwarded to your transportation carrier immediately upon the discovery of a loss.

Date:				
Address of Common Carrier or Local Representative				
Regarding:	Vessel or Carrier's Name Bill of Lading or Air Waybill No. and Date Description of Shipment Loss Amount (State Full CIF Value unless actual damages are known) Reference No.			
To Whom It May Concern:				
This letter is to inform you that we hold you fully responsible for the:				
<ol> <li>(Choose Applicable Reason for Loss)</li> <li>Non-Delivery</li> <li>Shortage upon Delivery / Pilferage</li> <li>Damage</li> <li>Contamination</li> </ol>				
that has occurred to our above mentioned shipment and/or shipments.				
Please be advised that our insurance carrier will be in contact with you once this claim is settled.				
If you wish to inspect this shipment, please contact: (If applicable)				
Name: Address: Phone Number:				
Sincerely,				
Name Title Phone Numbe	r			

# **Cargo Insurance Official Request for Claim Form**

All requested information is required. Claims filed without all required information will result in an inability to be processed. In addition to this cover sheet, all applicable shipping information relating to this claim must also be submitted. Please fax this form along with such documentation to 1-410-379-2701.

Shipper Information		Consignee Information		
Company Name:	(	Company Name:		
Contact Name:		Contact Name:		
Phone: (	) - ext.	Phone:		
Fax:	) -	Fax:		
Claim Informati	101			
Polaris file #				
<b>Shipping Date:</b>				
Date of Loss:				
Insured Value:	\$			
Nature of Loss:				
Merchandise Description:				
Comments / Explanation				
Included Applicable Documentation (check-off all that you have included)	□ Commercial Invoice (With to Sale) □ Packing List (If apply) □ Freight Invoice □ Doc/Delivery Receipts □ Loading / Unloading Tallies □ Notice of Loss to Carrier – Confirmation or Email □ Customs Clearance Forms		Temperature Records (For Refrigerated Cargo) SED Form (Shipper Export Declarations) Photo(s) Police Report (If investigated by police)	
Tracking # or B/L #				
Transportation Carrier				
Total Number of Pages included in this Claim		Total Pages including this coversheet.		