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| <input type="checkbox"/> Edge Transportation Services Ltd. | <input type="checkbox"/> Hi-Tech Express Inc. | <input type="checkbox"/> PMK Logistics Inc. | <input type="checkbox"/> STG Fleet Services |
| <input type="checkbox"/> Harv Wilkening Transport Ltd. | <input type="checkbox"/> Kindersley Transport Ltd. | <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 or fax to (888) 657-1543

Application Information

Your Name _____
 Company Name _____
 Customer Account Number _____
 Street Address _____
 City _____ Province/State _____ Zip/Postal Code _____
 Country _____
 Phone _____ Fax _____ Emails _____

Claim Information

Your Reference _____
 Waybill # _____
 Description of Damaged and/or Missing Article(s)

Total Pieces _____ Total Weight _____

Claim Information

Claim Amount _____ \$ CDN \$ 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.



P: 306.934.1911 | F: 306.975.9309
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