



\* Submit this promptly. Late reporting causes poor claims outcomes.  
Please fill out form as completely as possible. Indicate if unsure/unknown.  
All information is important. We recommend pre-filling parts of the form

Report Completed By: \_\_\_\_\_ Accident Date & Time: \_\_\_\_\_

Accident Location (city/state): \_\_\_\_\_

Loss Location is:  On the Delivery Route  Our Warehouse / Dock  Customer Loc.  Other

Our Company Name: \_\_\_\_\_ Our Local Office: \_\_\_\_\_

Our Contact Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Describe the Property Being Transported or Stored: \_\_\_\_\_

Describe What Happened to the Property: (the damage, the cause, etc.) \_\_\_\_\_ Check if stolen:

Estimate the Value of the Loss: \$ \_\_\_\_\_

Name of Our Driver: \_\_\_\_\_ Driver Phone No.: \_\_\_\_\_

Our Driver is an:  Employee  Independent Contractor

**Claimant:**  Customer  Other Describe: \_\_\_\_\_

Name: \_\_\_\_\_ Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

**Other Parties:**  Yes  No If yes, identify and explain the nature of their involvement:

**Police Involved?**  Yes  No

Police Department Making Report: \_\_\_\_\_ Report Number: \_\_\_\_\_

Police Officer Name: \_\_\_\_\_ Badge Number: \_\_\_\_\_

Citation Issued to You?  Yes  No Citation Issued to Other Party?  Yes  No

**Witness 1:** (name / address / phone) \_\_\_\_\_

Witness 2: \_\_\_\_\_

**Additional Comments:**

\_\_\_\_\_  
\_\_\_\_\_



**CARGO CLAIM REPORTING PROCEDURES**

1. Complete the Loss Report promptly while details are fresh.
2. Preserve all packaging, damaged goods, and seals. Take photos.
3. Do **not** admit fault or liability, or promise payment.
4. Report all theft to the police
5. Ask customer / shipper / receiver / carrier / etc. to inspect.
6. Get an estimate of the loss, by the other party if appropriate.
7. Gather and submit the following documents to support your claim. Do not delay reporting for this.
8. Promptly Notify Risk Strategies:
  - Telephone: 1-914-512-9320, or call toll-free 1-888-527-43
  - Email: [claimsservice@risk-strategies.com](mailto:claimsservice@risk-strategies.com)
  - Fax: 1-914-636-0802

<b>SUPPORTING DOCUMENTATION</b>	<b>OK</b>	<b>DATE SUBMITTED</b>
Copies of all Bills of Lading, Paid Freight Bills, Contracts, etc. related to the shipment or any part of it.		
Copies of all delivery receipts or manifests, including any notations about loss or damage, as well as any other exceptions or bad order slips and inspection reports which may substantiate loss or damage.		
Copy of packing list(s). Itemized description of lost or damaged goods.		
Documentation showing evidence of value, cost of replacement or cost of repair such as shipper's commercial invoice(s), replacement invoices, repair bills or estimates, etc.		
Copies of written claims against your contracting carrier or others, with their reply when available.		
Police Report(s) – first try to get Case Number and Station Number		
Your signed statement describing the loss, including the date and time, the location, the claimant and any other persons involved, and the circumstances of the claim in detail, including the cause of loss and nature of any damage.		
Any correspondence or other reports or information relevant to the transit, loss, damage or insurance coverage.		

**Tip:** Document the condition of all goods at time of acceptance on the delivery receipt and/or using photos. And remember – don't delay in reporting a loss or claim. Quick reporting is very important.