

Standard Form for Presentation of Loss and Damage Claims

Claimant Information

Company _____
Address _____
City St Zip _____
Phone _____

Claimant's File Number _____
Contact Person _____
Email _____

Shipping Information

G&W Railroad Carrier _____
Railcar/Unit Initial/Number _____
Shipper _____
Origin (City St) _____
Consignee/Receiver _____
Destination (City St) _____
Billing Date (mm/dd/yyyy) _____
Unloading Date (mm/dd/yyyy) _____

Basis of Claim

Claim in the amount of \$ _____ is made for Loss ____ or Damage ____ (check one)
Carrier previously notified? Yes ____ No ____ Photos taken? Yes ____ No ____

Description of Damages _____

Detailed explanation how amount claimed is determined (enter quantities and description of cargo with applicable prices) _____

Submission of the following documents will expedite review of this claim*:

1. Bill of Lading
2. Verification of loss/damage; source documents; photos
3. Invoice or Manufacturing Cost
4. Disposition of cargo; salvage proceeds / allowance
5. Freight Bill
6. Assignment of Claim Rights

This claim form may be submitted by:
Email to: freightclaims@gwrr.com

Mail to: Genesee & Wyoming
Freight Claims
13901 Sutton Park Dr S, Suite 270
Jacksonville, FL 32224

*Note: Additional information may be requested. These instructions should not be interpreted as inclusive of all the requirements for proper claim filing and disposition nor should they be interpreted as an admission of liability or responsibility on the part of G&W Railroad Carrier.

The undersigned hereby certifies that all statements in this claim are correct, that the prices herein do not exceed the destination value of such property on the due date in the quantity shipped and do not include unearned profit or expenses not incurred; further that such prices are those appearing on original invoice, if issued, less all discounts and allowances, whether or not same actually appear thereon.

The undersigned hereby guarantees to protect the _____ RR, or any connecting carriers, against any and all Loss, Damage, Costs, Expenses and Attorneys' Fees which may result from payment of this claim by reason of our failure to support same with the original Bill of Lading and/or Paid Freight Bill. It is understood carrier reserves the right to request original or copy of any document deemed essential to proper disposition of claim.

Signature of Claimant

Date