



Estes Forwarding Worldwide, LLC
 Freight Loss or Damage Claim Form
 Electronically Fillable

EFW Waybill: _____

Date of Loss/Damage: _____

Date of Claim: _____

Claimant's Reference No.: _____

Claimant's Email: _____

Email Claim Form & Documents to:

EFWClaims@EFWnow.com • Phone: 804-495-4375

Description of Item Lost or Damaged	Weight of Each Item	Quantity of Pieces	Description of Damage or State if Item was Lost/Short	Value of Each Piece Damaged or Short
Total Claim Amount				

Attach Documentation to Substantiate the Claim:

1. Original Invoice for the Cost of Goods; Prior to Mark-Up.
2. Packing List and Signed Shipper's BOL (BOL signed by driver at pick up).
3. Documentation Showing the Weight of the Affected Freight.
4. Original Itemized Repair Estimate &/or Salvage Value.
5. Pictures of: Damages, Inner Packing & Outer Packaging.
6. Copy of First Written Notification of Damages/ Shortage Provided to **EFW**.
7. Current Location of Freight.

Written Notification When the Freight Bill Has Been Paid.

Additional Information May Be Needed.

 COMPANY NAME of Claimant

 Name to Use on Payment Check (If Claim is Paid)

 Mailing Address of Claimant

 City State Zip

 Phone Number

 Printed Name of Claimant Signature

 Job Title of Claimant

All domestic claims must be filed within 9 months of date of delivery. EFW has 120 days in which to conclude the claim from the date all required documentation has been received.

THE ABOVE NAMED CLAIMANT MUST BE AN AUTHORIZED COMPANY REPRESENTATIVE. I CERTIFY THAT THE ABOVE STATEMENT OF FACTS ARE ACCURATE TO THE BEST OF MY KNOWLEDGE.

TERMS & CONDITIONS: WWW.EFWNOW.COM

