



CLAIM FORM

Date: _____

_____ is submitting an invoice to

Company Name

Hi-Way 9 Express Ltd. for _____ on shipment

Damage/Shortage

number _____ dated _____ for the

amount of \$ _____ .

Enclosed Find Required Documentation:

- ❖ Invoice from suppliers verifying cost of claimed product
- ❖ Copy of repair cost (if the product is repairable) invoice or quote
- ❖ Invoice billing Hi-Way 9 for the amount being claimed
- ❖ Location of the salvage
- ❖ Inspection of damaged product
- ❖ Any pictures taken of the damages
- ❖ Contact information of the person submitting this claim

Signature

Print Name

NOTE: Claims are GST exempt. If a Declared Value was not listed on the original shipping document, a claim will be paid out at the lesser of either cost or \$2.00/LBS.

Once complete please email to osd@hi-way9.com or fax to 403-823-7424