

# STANDARD PROOF OF LOSS AND DAMAGE CLAIMS UNDER UNIFORM HOUSEHOLD GOODS BILL OF LADING

(Name of Claimant)	Date of Filing Claim	(Claimant's Number)
(Address of Claimant)		
(Name of Carrier)		(Carrier's Number)
(Address of Carrier)		

for \_\_\_\_\_ in connection with shipments herein described:  
(loss or damage)

Description of shipment \_\_\_\_\_

Name and Address of Shipper \_\_\_\_\_

Date shipment was loaded \_\_\_\_\_ moving from \_\_\_\_\_  
(St. Address - City & State)

To \_\_\_\_\_  
(NAME of party empowered to receive, if other than shippers.) Street, City & State

State where shipment was temporarily detained in storage either at origin; or destination: \_\_\_\_\_

If claim is for breakage or shortage to items packed in containers give following information:

By whom packed \_\_\_\_\_ By whom unpacked \_\_\_\_\_ Date unpacked \_\_\_\_\_

When was damage or shortage discovered \_\_\_\_\_ By whom discovered \_\_\_\_\_

NAME OF YOUR INSURANCE CO. EFFECTING COVERAGE ON PROPERTY TRANSPORTED: \_\_\_\_\_

### DETAILED STATEMENT SHOWING HOW AMOUNT CLAIMED IS DETERMINED

(List number, description of items, nature and extent of loss or damage, etc.)	Weight	Acquired Date	Original Cost	Value at Time of Loss	Amount Now Claimed

### THE FOLLOWING DOCUMENT IS SUBMITTED IN SUPPORT OF CLAIM

1. A repairman's estimate of cost of repair.

\_\_\_\_\_

\_\_\_\_\_

REMARKS

\_\_\_\_\_

\_\_\_\_\_

The undersigned, signer of the foregoing statement, hereby makes a solemn oath to the truth of the statements contained herein, and exhibits attached hereto.

\_\_\_\_\_  
Date

\_\_\_\_\_  
(Signature of Claimant)