

CARSON
21750 Arnold Center Rd.
Carson, CA 90810 (310) 631-6116

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CLAIM INFORMATION

DATE: YOUR REFERENCE: POLAR PRO NUMBER:

CLAIM IS FOR: ☐ Damage ☐ Loss TOTAL AMOUNT CLAIMED:

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CLAIMANT AND SHIPMENT DETAILS

YOUR COMPANY NAME: SHIPPER NAME:

ADDRESS: ORIGIN:

CITY, STATE, ZIP: CONSIGNEE NAME:

YOUR NAME: DESTINATION:

PHONE: DATE OF SHIPMENT:

FAX OR E-MAIL:

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DETAILED STATEMENT SHOWING HOW AMOUNT CLAIMED IS DETERMINED

Number and description of articles, nature and extent of loss or damage, invoice price of articles, amount of claim, etc.

ALL DISCOUNTS AND ALLOWANCES MUST BE SHOWN

ARTICLES / LOSS OR DAMAGE / INVOICE VALUE	AMOUNT CLAIMED

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SUPPORTING DOCUMENTS SUBMITTED

☐ Copy of repair invoice or repair estimate ☐ Document bearing notation of loss or damage (Delivery Receipt)

☐ Carrier's completed inspection report form ☐ Complete invoice showing original cost of goods

☐ Estimate of potential as-is salvage or resale value ☐ Other:

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IMPORTANT CLAIM REQUIREMENTS

WRITTEN APPROVAL BEFORE REPAIRS

Do not begin repairs without prior written approval from the Polar Freight Claims team.

Unauthorized repairs are subject to claim denial or exclusion of repair costs, as permitted by law.

RETAIN DAMAGED GOODS AND PACKAGING

Retain damaged goods and packaging for inspection and salvage until the carrier releases them in writing.

Failure to retain these items may result in claim denial or compromise.

Prevent further loss; document and report emergency action. Approval does not admit liability or guarantee payment.

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ADDITIONAL COMMENTS AND CERTIFICATION

ADDITIONAL COMMENTS:

I hereby certify that the foregoing statement and attachments are correct:

AUTHORIZED SIGNATURE / NAME: DATE:

SUBMIT BY EMAIL: claims@polarfreight.com

Attach the completed form and all required supporting documents. Questions: (310) 631-6116.
Our goal is to conclude claims within 30 days of receipt; claims involving other carriers may take longer.
Other options: fax (310) 639-6973 or mail to Polar Freight Claims at the Carson address above.