



UNION PACIFIC RAILROAD FREIGHT CLAIM PRESENTATION FORM

Claimant's Reference Number _____ Date _____
THE FOLLOWING INFORMATION MUST BE SUPPLIED TO CONSTITUTE A VALID CLAIM

This claim in the total amount of \$ _____ is made by the party named below

for Loss or Damage or Both in connection with the following statement:

Original rail equipment initial and number _____ Date Shipped _____

Rail Origin _____ Rail Destination _____

COMPUTATION OF AMOUNT CLAIMED

QUANTITY	ITEM DESCRIPTION	UNIT PRICE	AMOUNT
TOTAL AMOUNT CLAIMED			

Remarks _____

I certify that the above statement of facts is correct and being unable to furnish original bill of lading and/or original paid freight bill account lost or destroyed hereby guarantees to protect the Union Pacific Railroad and any other interested carrier against all loss, damage, costs and attorney's fees which may result from payment of this claim without surrender of original documents.

Signature _____ Title _____

Claimant's name & company name _____
(Please Print)

Address _____

City _____ State _____

Claimant's area code _____ Phone No. _____ Fax No. _____

Remittance address if different than above _____

Email Address: _____

MINIMUM DOCUMENTATION REQUIRED FOR CLAIM VERIFICATION

1. VERIFICATION OF VALUE (A) Original Invoice (B) Certification of Value	2. EVIDENCE OF DAMAGE (If Applicable) (A) Inspection Report (B) Delivery Receipt (POD) (C) Unloading Report (D) Receiving Document	3. EVIDENCE OF SHORTAGE (If Applicable) (A) Unloading Documents (B) Delivery Receipt (C) Origin & destination seal records	4. DISPOSITION OF DAMAGED MERCHANDISE (Proof of rejection or reasonable salvage allowance)	5. ASSIGNMENT OF CLAIM RIGHTS (If Applicable) (Required if you are not shown on the bill of lading)
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All claims filed against Union Pacific Railroad must be mailed/faxed or emailed to the following:

Shipment Quality
Union Pacific Railroad
111 S. Magnolia Street
Palestine, TX 75801

Phone: 1-800-521-3253
Fax: 1-800-527-3036

UPFREIGHTCLAIMS@UP.COM