



LTL Freight

Visit WWW.SAIA.COM Tools & Resources for Internet claim filing, check claim status, and ACH payment forms.

ACH PAYMENTS ARE NOW AVAILABLE FOR CARGO CLAIM PAYMENTS WITH ITEMIZED DETAIL VIA EMAIL. FORM ATTACHED*

Dear Customer,

Please note claims can be filed either in writing or online. If interested in filing online, please visit Tools & Resources at WWW.SAIA.COM; otherwise, please find the attached copy of the Saia LTL Freight claim form. Additionally, an option for ACH payments for hands free and faster payment options is available for all cargo claims filed.

Please complete as clear and detailed as possible when filing in writing so that all items are legible in order to insure the accuracy of file.

Manual claim forms and/or all supporting documents for existing claims can be emailed to claimimaging@saia.com, or mailed to (Please note separate contact for ACH Payments):

**Saia LTL Freight
Attn: Cargo Claims Department
P.O. Box A, Station 1
Houma, LA 70363**

To ensure a timely investigation, it is recommended to submit the following:

- **ORIGINAL VENDOR'S INVOICE:** Required to show value; if not submitted will result in claim denial.
- **WEIGHT SUPPORT:** Required to support the weight of each line item claimed.
- **REPAIRS:** Required are the repair estimates or invoices showing the cost of replacement parts/labor
- **DAMAGES/MITIGATION: ALL PRODUCT MUST BE HELD UNTIL CLAIM IS FINALIZED, not doing so will affect liability of the claim.** Required when damages are **NOT** repairable are photos of the damages and packaging, a detailed explanation of why mitigation is not an option, and the use of the product.
- **ADDITIONAL DOCUMENTS:** Submit any additional to support for your claim, such as credit memos, inspection reports, replacement freight bill, etc.

Any questions concerning claim filing can be emailed to claims@saia.com. When requesting status please be sure to reference Saia's claim or pro number in the e-mail; however, you may check claim status online by visiting WWW.SAIA.COM.

Best regards,

Claims Department
Saia LTL Freight
Houma, LA
1-800-950-7242 x 2300

STANDARD FORM FOR PRESENTATION FOR LOSS AND DAMAGE CLAIMS

*(Read instructions on cover letter and back before filing this Form. All * are required areas and documentation)*

Saia LTL Freight <small>(Name of Carrier)</small> P.O. Box A, Station 1 <small>(Mailing Address)</small> Houma, LA 70363 Attn: CLAIMS DEPT. <small>(City, State)</small>	1-800-950-7242 ext. 2300 <small>(Carrier Phone#)</small> Claimimaging@saia.com <small>(Carrier Email Address)</small> WWW.SAIA.COM TOOLS & RESOURCES <small>(Carrier internet claim filing & status)</small>
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Did you know you can file online and receive an instant claim number? Visit WWW.SAIA.COM

* <small>(Pick up Carrier's Freight Bill No.)</small>	* <small>(Delivering Carrier's Freight Bill No.)</small>
<small>(Shipper's Name)</small>	<small>(Consignee's Name)</small>
<small>(Name of Carrier Issuing Bill of Lading)</small>	<small>(Name of Delivering Carrier)</small>
* <small>(Date of Bill of Lading)</small>	<small>(Date of Delivery)</small>
* <small>(Point Shipped From)</small>	<small>(Final Destination)</small>

If shipment reconsigned en route, state particulars:

If shipment moved from warehousing/distribution point, indicate name of initial shipper and point of origin, and, if known name of prior carrier or carriers and prior billing :

This claim for *\$ _____ . _____ is made against your company for Damage Short Concealed **
SALVAGE If your claim is filed for damage and mitigation through repair or allowance is not possible, please provide photos of product and packaging, the use of the product, and why mitigation is not an option. Also provide contact information for salvage pick up here. **CLAIMED MERCHANDISE (SALVAGE) MUST BE HELD UNTIL CLAIM IS FINALIZED.**

Reason cannot mitigate: _____

SALVAGE/ INSPECTION CONTACT NAME: _____ **PHONE (____) _____ - _____**

Location of damaged merchandise if different from last delivery location: _____

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 DISCOUNT and ALLOWANCES MUST BE SHOWN.)

Qty: *	Unit price	Description: *	Total Weight LBS	Total Amount: *\$
NMFC Item No. Of Commodity lost or damaged			Total weight/amount for ALL	LBS *\$

The following documents are submitted in support of this claim:

- | | |
|--|--|
| <input type="checkbox"/> Vendor's Invoice* (Original or certified copy or screen print if manufacturer)
<input type="checkbox"/> Documentation to support weight of product* (packing slip or screen print)
<input type="checkbox"/> Bill of Lading
<input type="checkbox"/> Original paid freight bill, other carrier document-bearing notation of loss/damage if not shown on freight bill. | <input type="checkbox"/> Photos of product and original packaging to support damage
<input type="checkbox"/> Shipper's/Consignee's concealed loss or damage form.
<input type="checkbox"/> Replacement freight bill or replacement parts invoice.
<input type="checkbox"/> Other particulars obtainable in proof of loss or damage claimed: |
|--|--|

(Note: The absence of any document called for in connection with this claim must be explained. When impossible for claimant to produce original bill of lading, or paid freight bill, a bond of indemnity must be given to protect carrier against duplicate claim support by original documents.)

The foregoing statement of facts is hereby certified as correct

**** The following will be where correspondence and/or check will be sent. (Please fill out completely and write clearly)**

*
Claim Present by (Company Name)
*
Claimant's Correspondence Address
*
Claimant's City, State, Zip
Claimant's Company File Reference Number

*
Claimant's Contact Name Date Filed
*
Claimant's Email Address
*
Claimant's Phone Number Claimant's Fax Number
(REMIT ADDRESS IF DIFFERENT THAN CLAIMANT)

NOTICE TO CLAIMANT

Claimants are requested to make use of this form (FCS-18) for filing claims with carriers. Claims may be filed with the carrier's agent either at the point of origin or destination of shipment, or direct with the Claim Department of the carrier, and will be considered property presented only when the information and documents called for on the other side of this form have, as far as possible, been supplied.

Before presenting a claim on account of loss and damage, the following important information respecting claims should be given careful consideration:

1. The terms under which property is accepted and transported by a carrier are stated on the bill of lading issued by the carrier; also in tariffs and classification issued or subscribed to by the carrier. Persons intending to file claims should before doing so, examine the terms and conditions under which the property was accepted and transported.
2. Carriers and their agents are bound by the provisions of law, and any deviation therefrom by the payment of claims before the facts and measure of legal liability are established will render them, as well as the claimant, liable to fines and penalties by law.
3. In order that carrier may have an opportunity to inspect goods and thereby properly verify claims, any loss or damage discovered after delivery should be reported to the agent of the delivering line, as far as possible, immediately upon discovery, or within forty-eight hours after receipt of goods by consignee. Concealed loss and damage claim should be supported by and "Inspection Report Form": (FCS-19) covering the joint inspection of the loss or damage by consignee and carrier's representative. Disposition of concealed loss and damage claims will be expedited by including "Consignee's Concealed Loss or Damage Form": (FCS-4) and "Shipper's Concealed Loss or Damage Form": (FCS-5) as supporting documents when claim is filed.
4. It is common practice for manufacturers and others to ship large quantities to key points for warehousing and later distribution to surrounding areas. In many instances, the original container is not opened and the contents examined before re-shipment to final destination. When this practice is followed, it is impossible to determine after delivery to final destination whether loss or damage of a concealed nature occurred before or after re-shipping. Consignee can usually expedite settlement by securing initial shipper's and warehouse's cooperation in supplying necessary billing reference so that shipment can be identified in handling with carriers rendering transportation to the distribution point.
5. Under the provisions of Part II of Interstate Commerce Act, it is unlawful for a carrier to charge or demand or collect or receive, any greater or less or different compensation for the transportation of property than the rates and charges named in tariffs lawfully on file. To refund or remit in any manner or by any device, any portion of the rates and charges so specified through the payment of fraudulent, fictitious or excessive claims for loss or damage to merchandise transported is as much a violation of law as is a direct concession or departure from the published rates and charges.

In this connection, attention is also called to the following important quotation from Section 222(c) of Part II of the Interstate Commerce Act:

"Any person, whether carrier, shipper, consignee, or broker, or any officer, employee, agent, or representative thereof, who shall knowingly offer, grant or give, or solicit, accept, or receive any rebate, concession, or discrimination in violation of any provision of this part, or who by means of any false statement or representation, or by the use of any false or fictitious bill, bill of lading, receipt, voucher, roll, account, claim, certificate, affidavit, deposition, lease, or bill of sale, or by any other means or device, shall knowingly and willfully assist, suffer, or permit any person or persons, natural or artificial, to obtain transportation of passengers or property subject to this part for less than the applicable rate, fare, or charge, or who shall knowingly and willfully by any such means or otherwise fraudulently seek evade or defeat regulation as in this part provided for motor carriers or brokers, shall be deemed guilty of a misdemeanor and upon conviction thereof be fined not more than \$500.00 for the first offense and not more than \$2000.00 for any subsequent offense."



Accounts Payable ACH Authorization Form

I hereby authorize Saia, Inc., or its subsidiaries, ("Company") to initiate credit Automated Clearing House ("ACH") entries and to initiate, if necessary, debit ACH entries and adjustments for any credit entries made in error to my account indicated below and further authorize the depository bank named below ("Depository") to credit and/or debit the same to such account.

Bank Name:

Branch: City: State: Zip:

Bank Routing Number/ABA (9 digits):

Bank Account Name:

Bank Account Number:

This ACH authority is to remain in full force and effect until the Company has received written notification of its termination in such time and manner as to provide the Company and Depository a reasonable opportunity to act upon it.

Payee Name:

TIN/SSN:

Authorized Signature: _____

Printed Name:

Title:

Date:

Saia sends payments via CTX ACH. If additional remittance information is needed, please provide email.
Email:

Email to apinterfaces@saia.com

A voided check copy is required for individuals.

(No check copy required for business accounts)