

Claim Form

Tote Id #: _____ *Pickup Date: ___/___/___

*First Name: _____ *Last Name: _____

*Contact Phone Number: _____ Alternate Phone Number: _____

*E-Mail: _____

*Pickup Address: _____

City: _____ State: _____ Zip Code: _____

*Is the above address the same as the address to where your belongings were delivered? Yes No

If no, please enter the destination address:

Pickup Address: _____

City: _____ State: _____ Zip Code: _____

*Please provide specifics regarding the item(s) being claimed to be damaged, lost or stolen:

*Name of Item	*Item Description	*Description of loss/damage	*Weight of item	*Age of Item	*Cost to Replace Item	*Amount Claimed	*Was Item Packed by Totable?

Statement of Claimant: I AM THE OWNER OF THE PROPERTY DESCRIBED. I DID NOT CAUSE OR CONTRIBUTE TO THE DAMAGE SET FORTH HEREIN. ALL STATEMENTS MADE IN THIS STATEMENT OF CLAIM AND ANY ATTACHED DOCUMENTS ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF, AND CONSTITUTE MY COMPLETE AND ENTIRE CLAIM. NO MATERIAL INFORMATION HAS BEEN WITHHELD. DOT REGULATIONS REQUIRE THAT ANY CLAIM FOR LOSS, DAMAGE OR DELAY MUST BE SUBMITTED IN WRITING BY CLAIMANT AND RECEIVED BY CARRIER WITHIN NINE (9) MONTHS FROM DATE OF DELIVERY. SEE GENERAL INSTRUCTIONS ON NEXT PAGE FOR ADDITIONAL INFORMATION. YOUR SIGNATURE BELOW INDICATES YOUR ACKNOWLEDGEMENT AND AGREEMENT, UNDER PENALTY OR PERJURY, TO THE ABOVE STATEMENT OF CLAIMANT.

*SIGNATURE OF CLAIMANT _____ DATE: ___/___/___

Form Instructions

We take the safety of your belongings very serious, while we also know that accidents do happen. We are committed to working with you to resolve your issue. To submit a claim related to a recently completed tote, please submit your claim here. We will contact you within 48 hours to resolve your issue.

General Instructions: 1. Please retain the damaged item(s), including shipping cartons. These items must be available for inspection. 2. Time limit for filing a claim is nine (9) months form date of delivery. 3. Documents must be sent via CERTIFIED mail to the address below or emailed to help@totable.com. 4. Service charges must be paid prior to claim settlement. 5. Please include photos of the actual damage and then the whole item itself.

Helpful Hints: 1. The tote id number must be referenced on claim form and subsequent correspondence or inquiries. The tote id number can be found on the Totable App by clicking “my totes” then “details” on the tote in question. 2. Complete top portion of form thoroughly, including zip codes with addresses and area codes with telephone numbers. Please give us the phone number where you can be reached during normal business hours. 3. Complete all columns for articles claimed: • Provide the name of the item(s). • Give a brief description of item(s) – make(s) and model number(s) if applicable. • Describe the extent, location and nature of damage. • Indicate the item(s) replacement cost today for same or similar item(s). • Enter the amount you are claiming in settlement. • Please indicate whether the item was packed by Totable. **All information denoted by an asterisk (*) is required for the claim to be processed.**

4. If additional space is required, please attach pages including the same information requested on this form on page 1. 5. The claim must be signed and dated; failure to sign will result in the form being returned for signature. 6. Be sure all unpacking has been accomplished and all items checked before submitting a claim. 7. Do not have any repairs made unless we advise you to upon receipt of your claim.

Sample Claim:

*Name of Item	*Item Description	*Description of loss/damage	*Weight of item	*Age of Item	*Cost to Replace Item	*Amount Claimed	*Was Item Packed by Totable?
Ikea table	End table	One leg missing	20 lbs	2 years old	\$25	\$25	Yes

Disclaimer:

Minimum filing requirements Federal regulations establish the minimum filing requirement as a “communication in writing from a claimant filed with a proper carrier within the time limits specified in the Bill of Lading or contract of carriage for transportation and containing facts sufficient to identify the baggage or shipment or shipments of property involved, asserting liability for alleged loss, damage, injury or delay, and making a claim for the payment of a specified or determinable amount of money shall be considered as sufficient compliance with the provisions for filing claims embraced in the Bill of Lading or other contract of carriage.”

Please return this form by certified mail only to: 1801 N Tryon St, Suite 106A, Charlotte, NC 28206