

## **INSTRUCTIONS FOR CLAIM FILING FOR THE SHIPPER:**

You can file your claim either on-line **or** by submitting a hard copy of a claim form by fax or mail.

Please remember; your damaged items may need to be inspected. ***Please do not discard or attempt to repair any claimed item without consent from Unirisc, or do anything that may contribute to the damage; or compromise our ability to inspect the item.***

*Please remember to file your claim within **90 days of the date of final delivery**, and list all damaged/lost items in your claim. File no more than one claim per shipment.*

*Should you have an **emergency-type** claim such as an overturned trailer, fire, or flood damage, **please contact UNIRISC as soon as possible.***

### **To file your claim on-line:**

- Please access the UNIRISC web site at **www.UNIRISC.com**
- On the UNIRISC home page, click the “**SUBMIT CLAIM**” button
- Under account login enter your e-mail address
- Enter a password for your account
- Click “**REGISTER**”
- Complete the “**CREATE A NEW ACCOUNT**” information
- Enter **RM38945** for the company code
- Enter your password again and confirm it
- Click “**REGISTER AND SIGN IN NOW**”
- You will be taken back to the home page where you will click on the “**CLAIM FORM**” button on the top middle of the page
- Please proceed with entering your claim following the directions given.

**To file your claim via fax or mail please complete the attached claim form following the instructions**

NAME		FEIS CLIENT #	ORIGIN ADDRESS	
MAILING ADDRESS:		NAME OF MOVING COMPANY		UNIRISC CERTIFICATE NUMBER
DESTINATION ADDRESS IF DIFFERENT FROM MAILING:		DATE OF PICKUP	DATE OF DELIVERY	CARRIER REFERENCE NUMBER
OTHER INSURANCE COVERAGE		ENTIRE SHIPMENT VALUE		

Inventory Number	Description of Article	Description of Damage	Purchase Date	Purchase Price	Replacement Cost	Amount Claimed		Amount Allowed		
<b>TOTALS:</b>										

Home Phone: \_\_\_\_\_ Cell: \_\_\_\_\_ Work: \_\_\_\_\_ Fax: \_\_\_\_\_

I AM THE OWNER OF THE PROPERTY DESCRIBED. I DID NOT CAUSE OR CONTRIBUTE TO THE DAMAGE CLAIMED. ALL STATEMENTS MADE ON THIS CLAIM FORM AND ANY ATTACHED DOCUMENTS ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND CONSTITUTE MY COMPLETE AND ENTIRE CLAIM. NO MATERIAL INFORMATION HAS BEEN WITHHELD. I HEREBY ASSIGN AND TRANSFER TO UNIRISC ANY AND ALL CLAIMS AND RECOVERIES ARISING OUT OF THE SHIPMENT OF MY GOODS. DO NOT DISCARD OR REPAIR ANY ITEM PRIOR TO CONTACTING UNIRISC. ATTACHING COPIES OF ESTIMATES OF REPAIR, PHOTOS, DOCUMENTS FROM THE MOVERS, PURCHASE RECEIPTS, APPRAISALS OR OTHER DOCUMENTATION SUBSTANTIATING THE AMOUNTS CLAIMED WILL EXPIDITE THE CLAIM.



Claimant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Email: \_\_\_\_\_

*All personal information that comes into the possession of Unirisc is treated as confidential and protected as such. No Customer personal information will be disclosed either orally, electronically, or in a written format to anyone that is not authorized to have this information. This information is retained by Unirisc only for the purposes of either placing coverage on your goods for your relocation, or handling your claim as a result of your relocation, and only during the course of either of these activities. For EU citizens, should you not consent to this, please notify us of this fact right away.*

## How to file a Claim:

You can file your claim either on-line **or** by submitting a hard copy of a claim form by fax or mail.

Please remember; your damaged items may need to be inspected. ***Please do not discard or attempt to repair any claimed item without consent from Unirisc, or do anything that may contribute to the damage; or compromise our ability to inspect the item.***

*Please remember to file your claim within **90 days of the date of final delivery**, and list all damaged/lost items in your claim. File no more than one claim per shipment.*

*Should you have an **emergency-type** claim such as an overturned trailer, fire, or flood damage, **please contact UNIRISC or your mover as soon as possible.***

1. Fill in information requested in the blocks on the top of the form.
2. In the **Inv. No** column: locate the damaged or missing item on the mover's inventory and list the number assigned to it. If you do not have a copy of the mover's inventory you can skip this step.
3. In the **Description of Article** column: please identify the item and include the brand name if applicable (i.e. Sony 50" TV).
4. In the **Nature and Extent of Damage** column: Describe in detail (i.e., right leg broken, top chipped)
5. In the **Date of Purchase** and **Replacement Cost** columns: List the date of purchase of the item and the cost to replace the item now. If the item was given to you, list the date of the gift and its estimated value.
6. In the **Amount Claimed** column, enter an amount or, if you feel the item is repairable leave it blank. UNIRISC will send representatives to repair and/or estimate the damage, or request that you obtain estimates. You will not be reimbursed for estimate fees unless said estimates are requested by UNIRISC.

**LIST YOUR AMOUNTS CLAIMED. THIS AMOUNT IS SUPPORTED BY THE ESTIMATED COSTS TO REPAIR OR REPLACE THE CLAIMED ITEM. REPLACEMENT COST WILL ONLY APPLY TO ITEMS THAT CANNOT BE REPAIRED. UNIRISC HAS A NETWORK OF REPAIR FIRMS AROUND THE WORLD, BUT DOES NOT HAVE ONE IN EVERY CITY SO YOU MAY BE ASKED TO PROVIDE ESTIMATES OF REPAIR FOR YOUR DAMAGED ITEMS. ANY REASONABLE FEE CHARGED TO OBTAIN THE ESTIMATE WILL BE REIMBURSED. DO NOT REPAIR OR DISCARD ANY ITEMS UNTIL YOUR CLAIM IS SETTLED.**

**IF YOU HAVE EMERGENCY ITEMS SUCH AS A WET SHIPMENT OR A DAMAGED CONTAINER, AND IT IS AFTER NORMAL BUSINESS HOURS, YOU MAY CONTACT THE LOCAL LLOYD'S OF LONDON SURVEY AGENT FOR ASSISTANCE WITH YOUR CLAIM. YOUR DELIVERY AGENT SHOULD BE ABLE TO HELP YOU WITH THIS.**

**IF YOUR ESTIMATES, PURCHASE RECEIPTS OR SUBSTANTIATION OF VALUE FOR THE CLAIMED ITEMS ARE IN A LANGUAGE OTHER THAN ENGLISH, THIS IS NOT A PROBLEM AS UNIRISC WILL HAVE THE DOCUMENTATION TRANSLATED. PLEASE NOTE WHICH CURRENCY YOU WOULD LIKE TO RECEIVE YOUR CLAIM PAYMENT IN. SHOULD YOU WISH FUNDS WIRED TO YOU IN THE CURRENCY OF YOUR COUNTRY, LET US KNOW THIS AND SUPPLY YOUR BANK NAME, ADDRESS, ROUTING NUMBER, AND ACCOUNT NUMBER AND NAME.**

**Send your completed claim form and all supporting  
documentation via mail, fax or email to:**

***UNIRISC***

***3191 Maguire Blvd***

***Suite 160***

***Orlando, FL 32803***

***Tel: 407 228 2026***

***Fax: 407 228 2797***

***[flclaims@unirisc.com](mailto:flclaims@unirisc.com)***

**A UNIRISC adjuster or an assigned repair firm or Survey  
Agent will contact you soon after receiving your claim.**