



GARBER CORP Fine Art & Accessories
600 29th Avenue Oakland, CA 94601
T: 510.434.1880 F 510.434.1696

Damage Claim

COMPANY:		DATE:
PHONE NUMBER	EMAIL ADDRESS	
CLAIMANT'S NAME:	ADDRESS:	
INVOICE #:		
DAMAGED ITEMS:		
CARRIER PRO#, CARRIER NAME (OR ATTACH COPY OF BILL OF LADING):		
DATE ITEM WAS RECEIVED:	TOTAL CLAIM AMOUNT: \$	
DAMAGE DESCRIPTION OF OUTSIDE PACKAGING (PLEASE ALSO INCLUDING DAMAGE TO PALLET IF APPLICABLE):		
DAMAGE DESCRIPTION:		

IF THE CLAIM INVOLVES DAMAGED GOODS, PLEASE CHECK ALL THAT APPLY: <input type="checkbox"/> DAMAGED GOODS CAN BE SOLD ON CLEARANCE FOR APPROXIMATELY \$ _____ <input type="checkbox"/> DAMAGED GOODS CAN BE REPAIRED FOR APPROXIMATELY \$ _____ <input type="checkbox"/> DAMAGED GOODS ARE AVAILABLE FOR CARRIER PICK UP IN ORIGINAL PACKAGING <input type="checkbox"/> DAMAGED GOODS ARE UNAVAILABLE (PLEASE EXPLAIN):	PLEASE PROVIDE THE FOLLOWING: <input type="checkbox"/> INVOICE SHOWING LOSS OR GOODS, INCLUDING FINAL PAGE <input type="checkbox"/> PICTURE OF DAMAGED GOODS (VIA EMAIL) <input type="checkbox"/> COSIGNEE'S COPY OF THE FREIGHT BILL BEARING LOSS OR DAMAGE NOTATIONS <input type="checkbox"/> ITEMIZED REPAIR BILL (IF APPLICABLE) <input type="checkbox"/> INSPECTION REPORT (IF AVAILABLE)
CLAIMANTS SIGNATURE:	DATE:

OFFICE USE ONLY:

PLEASE RETURN THIS COMPLETED FORM TO CUSTOMERSERVICE@GARBERCORP.COM OR FAX TO (510)434-1696 PLEASE ALLOW 30 DAYS FOR YOUR CLAIM TO BE PROCESSED.