

Instructions for Submitting a UNIRISC Claim Form Online

- You can file your claim either on-line or by submitting a hard copy of a claim form by e-mail.
- Please remember, your damaged items may need to be inspected. Please do not discard or attempt to repair any claimed item without written 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, mold or flood damage, please contact UNIRISC as soon as possible.

To file your claim on-line:

- Please access the UNIRISC website 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 **RM40941** 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 of the page
- Please proceed with entering your claim following the directions given.

To file your claim via e-mail, fax, or mail please complete the attached claim form following the instructions. HHGClaims@unirisc.com

- Fill in information requested in the blocks on the top of the form.
- 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.
- In the Description of Article column: please identify the item and include the brand name if applicable (i.e. Sony 50" TV).
- In the Description of Damage column: Describe in detail (i.e., right leg broken, top chipped)
- In the Amount Claimed column, enter an amount to the best of your knowledge. UNIRISC will send a representative to inspect or 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 or approved by UNIRISC

ADDITIONAL TIPS:

- 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 without written permission from Unirisc until your claim is settled.**
- If you have emergency items, such as a wet shipment or a damaged container, during or after business hours, you may contact Unirisc directly at the numbers below or your move coordinator.
- If your estimates, purchase receipts, or substantiation of value for the claimed items is in a language other than English, this is not a problem as Unirisc will have the documentation translated. Please note the currency in which you would like to receive your claim payment. Should you wish funds wired to you in the currency of your country, please let us know and supply your bank name, address, routing number, account number, and name.

Please send your completed claim form and all supporting documentation via the email address below:

HHGClaims@unirisc.com

**Please remember the deadline for filing your claim is 90 days from the date of delivery and you may only file one claim per move.
Please inspect all your goods prior to submitting your claim.**

STATEMENT OF CLAIM FORM

NAME				CLIENT NO. RM40984		MAILING ADDRESS:			
				EMPLOYER NAME:				CERTIFICATE NUMBER:	
ORIGIN ADDRESS::					FREIGHT FORWARDER		CARRIER REFERENCE #		
DESTINATION ADDRESS IF DIFFERENT FROM MAILING:			MODE OF SHIPMENT <input type="checkbox"/> AIR <input type="checkbox"/> SEA/SURFACE <input type="checkbox"/> STORAGE		DATE OF PICKUP	DATE OF DELIVERY	THE LAST THREE COLUMNS ARE FOR UNIRISC USE ONLY		
Inv. #	Description of Article	Description of Damage	Purchase Date	Purchase Price	Replacement Cost	Amount Claimed	Weight	Amount Allowed	Carrier Liability
CURRENCY BEING CLAIMED IN:			TO TOTAL AMOUNT CLAIMED, IN THE TOTAL BOX, RIGHT CLICK AND "UPDATE FIELD"			\$			

Home Phone Number
Cell Number
Work Number
Fax Number

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, 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

