Freight Claims Form

Print Clear Form

E-mail to: rma.us@conductix.com

Type of Claim: ☐ Damaged ☐ Lost

INCLUDE ANY PHOTOS YOU MAY HAVE

All FIELDS ARE REQUIRED TO PROCESS CLAIM.

SOLD TO - INFORMATION
Contact Name
Contact Phone
Contact Email

SHIP TO - Information
Contact Name
Contact Phone
Contact Email

Conductix-Wampfler Sales Order No. :

Please list damaged parts and quantities below:

Quantity:	Part Number:

Freight payment type: ☐ Prepay/ADD ☐ Collect ☐ 3rd Pty ☐ Other - Explain

***When shipping collect or 3rd party, Conductix is NOT responsible for replacement of claim - customer will need to file claim with freight company.**

Was order signed for short or damaged: ☐ Yes ☐ No

***If No, Conductix is not responsible for replacements or claim.**

Tracking Number:

Date Needed:

Shipping Contact Name and Address
Company Name
Contact Name
Phone No.
Address
City, State, Zip