

Lading Loss Claim Form

You may file a claim in writing or electronically through our website:

https://www2.nscorp.com/accessNS/

Claimant:	Date Filed:
Street:	
City/State:	
Zip:	Phono:
	Email:
Bill of Lading:	Customer Claim No:
Dollar Value of Claim:	Car Initial & Number:
Description of Loss/Damage:	
Charlet ist of Documents to Summer Cla	·
Check List of Documents to Support Cla	
Original Bill of Lading Original Paid Original Paid	
· · · · · · · · · · · · · · · · · · ·	of Destruction
Ingate/Outgate Receipt Inspection Re	eport Excise Tax Forms Seal Records
If you choose not to file electronically, yo	ou can mail or fax completed claim to:
Mailing Address:	Fax Number:
Norfolk Southern Corporation	404-658-2038
Freight Claims Settlement	
1200 Peachtree St., NE 156	
Atlanta, GA 30309	
The undersigned being unable to furnish or	iginal bill of lading and/or original paid freight bill account lost or
· ·	Norfolk Southern Corporation and any interested carrier against
, , , , , , , , , , , , , , , , , , , ,	hich may result from payment of this claim without surrender of
original documents.	Therefore the man payment of the diams without during of
Ü	
Drint Name	<u></u>
Print Name	

Signature of Claimant (THE FOLLOWING STATEMENT OF FACTS IS HEREBY CERIFIED AS CORRECT)