

Use this form to report overage, shortage, damage, refused freight, misdirected freight, or delivery exceptions.*** Required fields**

OS&D means overage, shortage and damage. Complete all known facts and attach supporting documents when available.

1. REPORT DETAILS

OS&D report #	Report date *	Report time	Reported by *	Phone / email *
BOL / PRO / Load # *	Customer account #	Invoice / reference #	Carrier / trailer #	

2. EXCEPTION TYPE

☐ Overage	☐ Shortage	☐ Damage	☐ Concealed damage	
☐ Refused freight	☐ Misroute / wrong destination	☐ Wrong freight	☐ Seal issue	☐ Temperature exception
Other exception type	Severity / priority	Customer notified?		
		☐ Yes ☐ No		

3. SHIPMENT PARTIES

Shipper name
Consignee name
Pickup city/state
Delivery city/state
Commodity / product

4. LOCATION DISCOVERED

Discovered at facility / location *
City, State / Province *
Date/time discovered *
Reported by / witness
Phone / email

5. DISCOVERY POINT

☐ Pickup	☐ In transit	☐ Terminal / yard	☐ Delivery	☐ Customer facility	☐ Other

6. ITEM / PACKAGE EXCEPTION DETAILS

multiple entries

Expected Qty	Actual Qty	Pkg Type	Item / SKU	Condition	Commodity / product description *	Value \$

7. CONDITION, PACKAGING, AND EVIDENCE

Visible condition of freight / packaging

Evidence available

☐ Photos
 ☐ Video
 ☐ Delivery receipt notation
 ☐ Inspection report
 ☐ Temperature log

☐ Seal record
 ☐ Packing list
 ☐ Commercial invoice
 ☐ POD
 ☐ Other

Seal / trailer / temperature details, if applicable

Seal # at pickup

Seal # at delivery

Trailer temp

Temperature / equipment notes

8. ACTION TAKEN

- ☐ Delivered as noted ☐ Held for instructions ☐ Returned to shipper ☐ Reconsigned / redirected
- ☐ Customer notified ☐ Carrier/driver notified ☐ Claim form requested ☐ Inspection requested
- ☐ Salvage / disposal pending ☐ Storage pending ☐ Corrected delivery scheduled ☐ Other

9. REQUIRED FOLLOW-UP AND RESPONSIBILITY

Assigned to Follow-up due date Disposition deadline Customer contact

Resolution status

- ☐ Open ☐ Pending docs ☐ Resolved ☐ Claim filed ☐ Billing adjustment needed

Final resolution / disposition

10. CERTIFICATION AND SIGNATURES

I certify that the information in this OS&D report is true and accurate to the best of my knowledge. This report documents an exception only and does not by itself approve payment, claim settlement, charge adjustment, or cargo liability.

Prepared by *

Title / role

Signature

Date *

SUBMIT VIA EMAIL**RESET FORM**