

Use this form to request review of an overcharge, duplicate charge, incorrect rate, accessorial charge, or billing dispute.

* Required fields

Undisputed charges remain due unless Black Eagle approves a billing hold in writing.

1. DISPUTE AND INVOICE INFORMATION

Claim date *	Invoice # *	Invoice date	Load / BOL # *	PO / Ref #
Original invoice amount \$ *	Disputed amount \$ *	Amount paid \$	Balance due \$	Currency

2. CLAIMANT / CUSTOMER

Company name *	
Street address *	
City, State, ZIP *	
Contact person *	
Phone / email *	
Customer account #	

3. BLACK EAGLE BILLING INFO

Black Eagle invoice contact	
Billing email used	
Rate confirmation #	
Original quote #	
Payment terms shown	
Invoice received date	

4. TYPE OF BILLING DISPUTE

Select all that apply *

- | | | | | |
|---|---|--|--|---------------------------------------|
| ☐ Incorrect rate | ☐ Duplicate invoice | ☐ Incorrect accessorial | ☐ Detention / layover issue | |
| ☐ Wrong weight | ☐ Wrong class | ☐ Fuel surcharge issue | ☐ Tax / fee issue | ☐ Paid already |
| ☐ Wrong pickup / delivery charge | ☐ Canceled load / TONU issue | ☐ Other | <input type="text"/> | |

5. SHIPMENT SUMMARY

Pickup location	Delivery location	Pickup date	Delivery date	Service

6. DISPUTED CHARGE DETAILS

multiple entries

Charge item	Invoice amount \$	Expected amount \$	Disputed amount \$	Rate / basis	Support ref.	Line #

7. REQUESTED RESOLUTION

Resolution requested *

☐ Credit memo ☐ Refund ☐ Rebill corrected invoice ☐ Remove charge ☐ Other

Requested credit \$ *

Requested refund \$

Corrected invoice total \$

Preferred resolution notes

8. EXPLANATION OF DISPUTE

Explain why the charge is incorrect. Reference quotes, rate confirmations, invoices, BOL/POD, emails, or written approvals.

9. SUPPORTING DOCUMENTS SUBMITTED

Check all documents included with this dispute

☐ Disputed invoice	☐ Rate confirmation / quote	☐ Bill of Lading	☐ Proof of Delivery
☐ Emails / written approvals	☐ Payment proof	☐ Detention / accessorial backup	☐ Scale ticket
☐ Contract / pricing agreement	☐ Photos / facility proof	☐ Other	

10. INTERNAL REVIEW / BLACK EAGLE USE

Received by	Date received	Assigned to	Status	Decision date
Review outcome				Credit/refund #
☐ Approved	☐ Partially approved	☐ Denied	☐ More information needed	

Internal notes

11. CLAIMANT CERTIFICATION AND AUTHORIZATION

I certify that the information provided in this overcharge or billing dispute claim is true and correct to the best of my knowledge. I understand that Black Eagle Linehaul Services LLC may request additional documentation and that undisputed charges remain due unless otherwise approved in writing.

Authorized claimant name *	Title	Phone	Date *
Signature of authorized person *		Email *	

SUBMIT VIA EMAIL**RESET FORM**