



Long Island Rail Road

CUSTOMER CLOTHING DAMAGE CLAIM FORM

NAME: _____

MAILING ADDRESS: _____

DAYTIME PHONE NUMBER: _____

DATE OF INCIDENT: _____	BOARDING STATION: _____
TRAIN # (if known): _____	TIME OF DEPARTURE: _____
CAR # (if known): _____	FINAL STATION DESTINATION: _____
DESCRIBE HOW YOUR CLOTHING WAS DAMAGED: _____	
Identify any train crewmember or LIRR representative notified (name, title, employee I.D. number) : _____	
Describe clothing and identify brand: _____	
Date purchased: _____	Where purchased: _____
Purchase Price: _____	**PLEASE PROVIDE COPY OF ORIGINAL PURCHASE RECEIPT

Please check one of the following:

Reimbursement for damages of \$200.00 or less, please provide a photo of clothing label for damaged item and of the damage to the item and a written repair estimate or paid repair receipt, or documentation that the clothing cannot be repaired (such as a statement by manufacturer or a tailor).

Reimbursement for damages in excess of \$200.00, please provide the damaged clothing and documentation that the clothing cannot be repaired (such as statement by manufacturer or a tailor).

*Note: If your claim is accepted, the MTA Long Island Rail Road will acquire ownership of the damaged clothing.

IMPORTANT: REIMBURSEMENT WILL BE MADE, IF AT ALL, AT THE SOLE DISCRETION OF THE LIRR. CLAIMANTS ARE ADVISED THAT ANY REIMBURSEMENT FOR DAMAGE WILL TAKE INTO ACCOUNT DEPRECIATION OF THE DAMAGED ITEM.

Signature: _____ Date: _____

Signature attests to truth and accuracy of information provided and signifies acceptance of settlement terms set forth above.

Please mail or deliver this form together with receipts/photographs/clothing to:

MTA Long Island Rail Road
Claims Dept. # 1144
Jamaica Station
Jamaica, New York 11435

****PLEASE FILL OUT ENTIRE FORM CAREFULLY AND COMPLETELY****