

LOST BAGGAGE CLAIM FORM

MAILING INFORMATION

Baggage Services
Pacific Coastal Airlines
204-4440 Cowley Crescent
Richmond, BC V7B 1B8
Email: baggage@pacificcoastal.com

AGENT USE ONLY (IF FORM IS FILLED AT FRONT COUNTER)

CSA NAME _____ BASE _____
Form given to BSA Date: _____
BSA to fill out Received form: _____ (dd/mm/yy)

We are truly sorry that your luggage was not available to you after your recent flight with us. Please accept our apologies for this inconvenience and our assurance that we will do everything possible to locate and return your property to you as soon as possible. Successful tracing and resolution of this claim may be expedited upon prompt completion and return of this form for each item that is missing along with the following required information.

ALL CLAIMS MUST BE MADE IN WRITING WITHIN 48 HOURS OF YOUR ARRIVAL.

Reservation Number: _____

Pacific Coastal Airlines reserves the right to deny liability if this form is not received, or postmarked within 48 hours from date of loss

PLEASE TYPE OR PRINT AND MAIL AS SOON AS POSSIBLE

Name Mr Mrs Miss/Ms (First Name, Initial Surname)	Home Phone Area Code ()	Business Phone or Cell Area Code ()
Home Address	Prov./State	Postal Code/ Zip Code
E mail	Country	

Number of item missing _____ Where did you last see your luggage?

Where did you check your luggage? Airport Counter Departure Gate Other (provide details)

Was/were the item(s) checked under another name? Yes No
If yes, what name? _____

If loss was not reported immediately, please describe the circumstances as to why.

Please provide a detailed description of your missing bag:

Brand _____ Color _____ Style _____ Size: S M L XL

Please indicate any other special markings or content inside to help identify the missing baggage

Print Name _____ Signature _____ City(Where this from is filled) _____ Date(DD/MM/YY) _____

Thank you for your time and patience in completing this form. Our Baggage Services Agent will contact you as soon as possible.

