



**Steel Dynamics™**

**STEEL DYNAMICS SALES NORTH AMERICA, INC.  
STRUCTURAL AND RAIL DIVISION**

2601 COUNTY ROAD 700 E  
COLUMBIA CITY, IN 46725  
(260) 625 -8100

**STRUCTURAL CUSTOMER CLAIM REQUEST FORM**

CUSTOMER:	CUSTOMER REFERENCE #:	SDI CUSTOMER SERVICE REP:
INVOICE #:	BILL OF LADING #:	SALES ORDER #:

SECTION SIZE	LENGTH	#OF PIECES	LBS	BUNDLE#	HEAT #	GRADE

DESCRIPTION OF CLAIM

CUSTOMER DESIRED ACTION :

**FIX / REPLACEMENT**    HOW: \_\_\_\_\_    EST. COST: \$ \_\_\_\_\_

SCRAP

PICKUP PRODUCT    LOCATION: \_\_\_\_\_    DATE TO PICKUP : \_\_\_\_\_

OTHER    DESCRIBE: \_\_\_\_\_

PICTURES ATTACHED? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> NOT APPLICABLE	REQUEST INITIATED BY	DATE REQUESTED
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SDI ACTION / RECOMMENDATION:

DATE: \_\_\_\_\_ BY: \_\_\_\_\_ NOTES: \_\_\_\_\_

To Initiate Claim:

1. Complete Form
2. Attach any Supporting Documentation
3. FORWARD TO CLAIMS CLERK at [claims.cci@steeldynamics.com](mailto:claims.cci@steeldynamics.com)

ACCOUNTING USE ONLY

Claim # \_\_\_\_\_

Received:        /        /