

CLAIM FORM

Date of Claim

SUBWAY® Franchisee ID Number

PO Number

EVER OCEAN Item Number / Description

Quantity of damaged items

Lot Number

(written on the front or back of the item)

Type of product baked

(type of breads or cookies)

Retarding

Duration Temp.°F or °C

Scoring

Yes No

Spraying

Yes No

Proofing

Duration Temp.°F or °C Humidity %

Baking

Duration Temp.°F or °C Model of oven

Cooling

Duration

Washing

Hand wash Dish washer

Use of Subway Soap

Yes No

Storage

Stacked On a rack Down flat

Description

Please provide images to complete this claim.

