

Owned and operated by Island Aviation Services Ltd M. Raaverige, Majeedhee Magu Male', Republic of Maldives

Staff no:

Application Date:	

REFUND APPLICATION FORM

TICKET DETAILS	FOR OFFICE ONLY Sector to be refunded (Cash/InvoiceNos) The content of payment (Cash/InvoiceNos)
Passenger Name Issued date Ticket	ONLY Sector to be Form of payment Remark
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2	
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Refunds will be processed through online	GENERAL DETAILS
FOR LOCAL BENEFECIARIES (ACCOUNTS) Account Name: Account Number: Bank Name: FOR FOREIGN BENEFECIARIES (ACCOUNTS) Beneficiary Name: Beneficiary Address: Bank Name: Bank Address: Bank Address: Account Number: Bank Address: Bank Address: Bank Address: Account Number: Bank Address: Bank Address: Account Number: Bank Address: Account Number: Bank Address: Bank Address:	n/cheque/debit card refund, applications should be supported d/Passport copies of passengers. If application forms for tickets issued on credit can be accepted in payment of the invoices. The payment of the invoices of payment of the invoices of payment of the invoices. The payment of the invoices of payment of the invoice of payment of the invoice of payment of pa
Swift/IFHS Code: Passport Number:	Applicant signature:
Office Lice Only	
Office Use Only Received by:	Signature:

Date: