



TICKET REFUND FORM

FORM TO BE FILLED IN BLOCK LETTERS

Date of Application_____

PASSENGER

Passenger Name_____

Should refund be requested for all names or PNR kindly fill out names of all passengers on the PNR

Email Address_____ Phone No_____

Booking Ref_____ Flight Date_____ Route_____ Amount_____

Reason for Refund_____

MODE OF PAYMENT

Online Card payment

Online Bank Transfer

POS Payment

NOTE:

- *Rano Air Ltd always reserves the right to make a refund in the manner and same currency used to pay for the ticket.*
- *Refund for credit/debit card purchases will be made only to the credit/debit card account used to purchase the ticket when ticket is not issued, however when ticket is issued refund could only be done for passenger whose name is written on the ticket and may take up to one month.*

ACCOUNT DETAILS:

Name of Account/Card Holder_____ Card Number

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Must match the account number provided *first 5 digit and last 4 digit*

Name of Bank: _____ Account Number_____

Signature_____ Date_____

Please note that for refund to a company, letter of authorization on company letterhead is required.

The passenger hereby warrant that the banking details and all other information provided are true and correct and authorize Rano Air Ltd to effect payment in line with the payment instructions indicated above.

Note: All refund request are subject to verification by Rano Air Ltd minimum of 7 working days from the date of submission.

FOR OFFICIAL USE ONLY

Refundable Amount _____ Refund Status _____

Sales & Revenue Manager _____ Head of Business Development _____

Internal Control _____ COO _____

AM/ED _____ Finance _____

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