

Ferrovie Appulo Lucane

FORM REIMBURSEMENTS

FERROVIE APPULO LUCANE

CORSO ITALIA N. 8 70125 - BARI

ITALY

relazioniesterne@ferrovieappulolucane.it

	Data of the complainant			
Name*:		Surname*:		
Date of birth*:		State*:		
City*:		Province*:		
Address*:		Zip code*:		
Email*:		Phone number:		
Type of purchase*				
TRAIN		BUS		
Single	ticket	Single ticket		
Week	y ticket	Weekly ticket		
Month	ly ticket	Monthly ticket		
	Purchasing channel*			
Websi	te	Self-Service		
Арр		Ticket Office		
	Ticket number*			
Train		Bus		
Nature of the complaint*				
Date of the	travel:	Train number:	Bus number:	
Reimbursements of the single tickets in case of irregular services				
Reimbursements for monthly tickets in case of repeated irregular services				
Reimbursements in case of no respect of the times communicated for the recovery of the availability of infrastructures or equipment of the stations				
Reimbursements in case of no respect of the indications given in relation to the usability of the rolling stock				
Description of the request*				

Attachments: Copy of the tickets or other document. (size of the file max 1Mb; formats allowed: jpg, png or pdf)

*The fields marked with an asterisk are mandatory