

Insolvent companies with limited
responsibility to the administrator of Mouzenidis Travel-Riga

REFUND APPLICATION FOR PACKAGE TRAVEL SERVICES NOT RECEIVED *

Only those travellers with signed contracts concerning package travel services (for example transport + hotel) have the right to a refund in case of liquidity problems of the tour operator in case of liquidity problems of the tour operator. Individual tourism services, e.g. purchase of flight tickets, hotel bookings or insurance, shall not qualify as package travel services and this protection shall not apply thereto.

I Applicant

| | |
|-----------------------------------|--|
| Name | |
| surname | |
| Identity number | |
| address of the place of residence | |
| phone | |
| e-mail | |

II Request

In accordance with agreement No. _____ signed on _____._____, please repay me money in the amount of EUR _____.

! Please state the whole sum paid for the travel or the balance between the sum paid by the traveler and the sum repaid by limited liability company Mouzenidis Travel-Riga (hereinafter – Mouzenidis Travel-Riga) or another person.

III Information about the signed agreement

| | |
|--|--|
| tourism operator | Limited Liability Company "Mouzenidis Travel-Riga" |
| registration number | 40103608718 |
| tourism agent* | |
| agreement Nr. | |
| agreement date | |
| agreement signed by (given name, surname) | |
| number of travellers in the agreement | |
| total price of the trip according to the agreement (EUR) | |

* To be filled-in if the agreement is signed with a tourism agency.

IV Payment for the trip

| | |
|---|--|
| date | |
| payer's name | |
| account no. (in case of bank transfer) | |
| cheque or receipt No. (in case of cash) | |
| amount (EUR) | |

! Further lines in this section should be added in case there were several payments made for the trip.

| | |
|---|--|
| date | |
| payer's name | |
| account no. (in case of bank transfer) | |
| cheque or receipt No. (in case of cash) | |
| amount (EUR) | |

| | |
|---|--|
| date | |
| payer's name | |
| account no. (in case of bank transfer) | |
| cheque or receipt No. (in case of cash) | |
| amount (EUR) | |

| | |
|---|--|
| date | |
| payer's name | |
| account no. (in case of bank transfer) | |
| cheque or receipt No. (in case of cash) | |
| amount (EUR) | |

!! A proof of payment should be attached to the application (a copy of the cheque or strict accounting receipt or a payment order certified **with a bank stamp or electronic signature**).

! I am informed that the original of the cash receipt or mandatory registration receipt proving the payment for the package travel service must be stored for at least 3 years from the moment of payment.

V Refund application submitted to Mouzenidis Travel-Riga or tourism agent

| | |
|------------------------------|--|
| date of the application | |
| applicant's name | |
| sum applied for refund (EUR) | |

! The application to the CRPC should be accompanied with a copied application lodged with Mouzenidis Travel-Riga or a tourism agent or a printout of an e-mail must be attached to the application!

VI Refund received from Mouzenidis Travel-Riga, tourism agent or other person

| | | |
|---------------------------------|-----|--|
| Received | YES | |
| | NO | |
| received from the | | |
| date | | |
| recipient's account Nr. | | |
| recipient's given name, surname | | |
| amount (EUR) | | |

! The application should be accompanied with a document proving the fact of receipt of money, e.g. printout of a payment order or bank statement showing the respective payment.

VII Information for money refund

| | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|----------------------------------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
| Name | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| surname | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Identity number | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| bank name | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| bank code | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| recipient's account No. | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| amount to be repaid (EUR) | | | | | | | | | | | | | | | | | | | | | | | | | | | |

Contacts:

| | |
|---------------|--|
| phone | |
| e-mail | |

! Further lines in this section should be added and filled-in in case each payer wishes to receive in his or her own checking account the refund of money paid by him or her for package travel services not received.

[illegible]

Contacts:

| | |
|---------------|--|
| Phone | |
| e-mail | |

| | |
|---------------------------|--|
| Name | |
| surname | |
| Identity number | <div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div> </div> |
| bank name | |
| bank code | |
| recipient's account No. | <div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div> </div> |
| amount to be repaid (EUR) | |

Contacts:

| | |
|---------------|--|
| Phone | |
| e-mail | |

!!! The following Section VIII shall be completed if a creditor's claim is filed concurrently with the administrator of the insolvent Mouzenidis Travel-Riga !!!

VIII Creditor's claim to the administrator of the insolvent Mouzenidis Travel-Riga

| | |
|----------------------------|--|
| Amount of main claim (EUR) | |
|----------------------------|--|

| | |
|---------------------------------|--|
| Amount of ancillary claim (EUR) | |
|---------------------------------|--|

| | | |
|---------------------------------------|-----|--|
| The claim depends on the condition ** | YES | |
| | NO | |

** The right of claim is conditional upon the occurrence of a condition, in which case the amount of the claim and the date (if known) by which the condition must be upheld

| | |
|------------------------------------|-------------------|
| Time of occurrence of the claim*** | ____.____.20____. |
|------------------------------------|-------------------|

| | | |
|---------------|-----------|--|
| Type of claim | Provided | |
| | Unsecured | |

| | | |
|----------------------------------|-----|--|
| Are you an interested person**** | YES | |
| | NO | |

***The date when the trip was planned, if it was intended until 13 August 2021 (excluding), if the trip was intended after 13 August 2021, then the time of occurrence of the claim is 13 August 2021

**** Within the meaning of Section 72 of the Insolvency Law (for example, member of the board of Mouzenidis Travel-Riga, participant, other interested person)

IX Documents attached

| | Total copy/s to ____ lp. | | YES | NO |
|---|--------------------------|--|-----|----|
| 1. Copy of the agreement with the tourism operator (tourism agent) | | has already been submitted to the CRPC | | |
| 2. Proofs of payment/copies | | has already been submitted to the CRPC | | |
| 3. Copy of the application submitted to Mouzenidis Travel-Riga or tourism agent | | has already been submitted to the CRPC | | |
| 4. Copies of documents proving the receipt of money from Mouzenidis Travel-Riga or another person | | has already been submitted to the CRPC | | |
| 5. | | | | |
| 6. | | | | |
| 7. | | | | |

X Additional information

My signature here certifies the following:

- 1. I have not received from Mouzenidis Travel-Riga, a tourism agent or another person other payments, except for the payments specified under Section VI;**
- 2. All information in the application is true.**

Submitted

| | |
|-----------|--|
| Date | |
| Full name | |

signature

| |
|--|
| |
|--|

** Executed based on Section 81(1)(4) of the Tourism Law, Section 73 of the Insolvency Law.*