

.....
Sender, Name, First Name

.....
Street

.....
ZIP Code, City, Country



.....
Airline

.....
Street

.....
ZIP Code, City

Date:

Registration of claims according to Regulation (EC) No. 261/2004

Flight number: _____
Booking number: _____
Departure airport: _____
Destination airport: _____

Dear Ladies and Gentlemen,

On I booked a flight with your company with the aforementioned flight details. The booked flight:

- has been canceled.
- was more than 3 hours late.

For this reason, I have the following claims in accordance with Regulation (EC) No. 261/2004 to:

| | | |
|---|--------------|--------|
| Compensation claim according to Art. 7 I a in the amount of (Flights less than 1,500 km away) | 250 € |€ |
| Compensation claim according to Art. 7 I b in the amount of (Flights within the EU or with a distance of 1,500 to 3,500 km) | 400 € |€ |
| Compensation claim according to Art. 7 I c in the amount of (Flights outside the EU and over more than 3,500 km) | 600 € |€ |
| Reimbursement of ticket costs in accordance with Article 8 I a (The airline did not carry out later transport) | |€ |
| Costs for care services according to Art. 9 (Costs for food, hotel, transport to the hotel, telephone, etc. were not covered by the airline) | |€ |
| Total amount | | _____€ |

A timely notification in the sense of Art. 5 I c of the cancellation / delay did not take place.
There were also no exceptional circumstances within the meaning of Art. 5 III.

I can therefore ask you to pay the following amount of € within a period
of 2 weeks at the latest:

.....

to my bank account

Account owner:

IBAN:

BIC:

If the amount has not been received within the set deadline, I reserve the right
to enforce it in court.

Kind regards

.....
Signature