Sender. Name, First Name		
ZIP Code, City , Country		FLIGHTRADAR.FLIGHT/
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,

<sup>On</sup> ..... 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. we	e not covered by the airlir	€ ne)

€

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

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