

Refund of Benefits in Kind Claim Form

Name:	Surname:
Tel./Mob. number:	Email: @
Address:	
I.D./N.I. Number:	Case Number (for office use only):
Date of Episode:	
EU/EFTA Member State (incl. location) where episode occurred:	
Reason for submitting this application: Not in possession of a valid EHIC <input type="checkbox"/> EHIC not accepted by Institution <input type="checkbox"/> EHIC Lost/Stolen <input type="checkbox"/> Other – Please specify: _____	
Total number of original receipts submitted:	

Please send this application form, duly filled and signed, plus the original receipts (proof of payment) to our office by registered post. Upon receipt of the aforementioned documents, our office will send you an Email/SMS to confirm whether the application has been accepted (i.e. to proceed further) or rejected (in which case we will contact you). Please provide the following financial information which is required in order to proceed with reimbursement if your application is accepted.

Payee's Bank/Branch	
Payee's Account No./IBAN	
BIC/SWIFT Code	
Currency: Euro/Foreign Currency	
Amount	

Declaration: I declare that I have travelled abroad for reasons **other than seeking treatment or a second medical opinion.**

All the information given in this form is correct and complete to the best of my knowledge.

Signature: _____

Date: _____

L-Entitlement Unit jiġbor l-informazzjoni sabiex ikun jista' jagħti servizzi mitluba skont ir-Regoli 883/04 u 987/09 tal-Komunita' Ewropea. Kull informazzjoni se tiġi miġbura u pprocessata skond ir-Regolament Generali dwar il-Protezzjoni tad-Data (UE) 2016/679 u l-Att dwar il-Protezzjoni u l-Privatezza tad-Data (Kap. 586), l-imsemmija Ordinanza u leġiżlazzjoni sussidjarja oħra. Il-formula tal-applikazzjoni mimlija tiġi meqjusa u pprocessata bħala dokument **kunfidenzjali**.

The Entitlement Unit carries out its functions in accordance to EC Reg. 883/04 and EC Reg. 987/09. All data is collected and processed in accordance with the General Data Protection Regulation (EU) 2016/679 (GDPR) and the Data Protection Act (Cap. 586), the said Ordinance, other subsidiary legislation and the Data Protection Policy of the Department. Completed application forms are considered and processed as **confidential** documents.