



Refund Request Form for a charge made in a case that's entitled for exemption under the upgraded rental plan "Ofran Plus"

Dear Customer, Please mark your preferre Israel Post / Email (please		ess)
In case that nothing is ma	rked – the documents will be sent	via Israel Post
Personal Details		
Surname	First Name	ID No
Address		Phone No
Ofran Reservation No. (Vo	oucher No.)	
Pick-Up Country	Car Supplier	
Date of Event		
Amount Billed	Currency	
Amount Billed in NIS		
 Ofran's rental vouche Rental agreement wit Damage assessment Final invoice of the re Confirmation that the reference to the amo Copy of the driving lice Request for bank tran 	h the car rental supplier done by the car rental supplier ntal from the car rental supplier payment has been made to the unt charged sense of the driver at the time or	e car rental supplier, with specific

Customer's Signature _____ Date ____



Request for Bank Transfer

I, the undersigned, hereby ask that Ofran Services Ltd. (with Shirbit) will pay me

the amount I am claiming due the event that occurred on									_ , by	, by making a transfer to				
			my b	ank ac	count	per th	e follov	ving de	etails:					
Name of acc	ount ho	lder												
							ID Number							
E-mail address for notification of the transfer:					Bank Name				Branch Name					
		A	l l									- Donald		
Account No.						Branch No.					Bank code			
Please atta details of t							accou	int ho	older	or co	nfirm	ation (of the	
I am I hereby or any t	Insur confir	ance L m the	td. to a waive	accept r of any g any c	my cla y rights harge	aim an s for fu made		e amo emand car ren	unt be from	ing cla the ca	aimed. r rental	suppli		
			Na	ame				Da	nte					
				_	S	ignatı	ıre	_						
Notic	e of pa	ıyment	will b	e sent	to the	email	specifi	ed on t	the firs	st pag	e of the	form.		
										- 	- 	- 	- 	

Fill this form and send it to ofran@harel-ins.co.il