

APPENDIX 7a – APPLICATION FOR REIMBURSEMENT for non-military vehicles up to 3.5 t GVW in the scope of PfP-SOFA

APPLICATION NUMBER: (to be filled out by ASFINAG!)	
APPLICATION	
according to section 5 (1)(3) Federal Road Tolls Act and section 1.3.3.1, third subparagraph, Tolling Regulations Part A for the reimbursement of the accounted time-related toll	
I / we apply for the reimbursement of the accounted time-related toll for the following vehicle. I / we confirm, that the vehicle was used within the meaning of section 1.3.3.1, Tolling Regulations Part A I.	
1. TIME OF THE TRIP	
Date of the single trip:	Time of the trip: from till
Distance covered (motorway junctions from - till):	
2. INFORMATION ABOUT THE VEHICLE	
Nationality / Vehicle registration number: /	
Vehicle type:	
3. INFORMATION ABOUT THE VEHICLE'S REGISTERED OWNER	
First and last name (company name): /	
Address:	
Contact person:	
Phone # / Fax # / E-mail: / /	
4. BANK DETAILS OF THE REGISTERED OWNER OF THE VEHICLE	
Bank:	
Bank code number (BIC / SWIFT Code):	
Bank account number (IBAN):	
Please ask for these details (BIC/SWIFT and IBAN), if not already known, at your bank.	
5. ATTACHMENTS	
To ensure proper processing of your application, the following documents are to be attached to the application form:	
<ul style="list-style-type: none"> • NATO-form (EUFOR, KFOR, US ARMY, ...), military way-bills or similar, which fit exactly to the vehicle registration number and show the correct date. 	
The completed and duly signed form is to be sent by post or by fax to: ASFINAG Maut Service GmbH, Am Europlatz 1, A-1120 Wien	
Fax from Austria: 0800 400 11 444, Fax from other countries: 0043 1 955 12 77.	
<p style="text-align: center;">..... Location, date</p>	<p style="text-align: center;">..... (Signature of the registered owner of the vehicle)</p>