JSC Latvijas Gāze

Customer Service Centre: 20 Vagonu Street, Riga, LV-1009

Phone: 67869866, e-mail address: [info@lg.lv](mailto:info@lg.lv)

**APPLICATION FOR A REFUND OF AN INCORRECT PAYMENT**

THE FORM MUST BE COMPLETED IN BLOCK LETTERS

*(To be completed by the payer or his legal or authorised representative)*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Name, Surname/Name | |  | | |
| Personal identity number/Reg. No. | |  | | |
| Declared residential address: | |  | | |
| E-mail |  | | Telephone |  |
| I am the authorised representative  *(a copy of the power of attorney or a document confirming the right of representation must be submitted with the application)* | | | | |

**Payment data**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Payment made to the wrong account | Another reason | | |  | | |
| Amount of the incorrect payment | |  | EUR | | date |  |
| ***(may be left blank, if the proof of payment is attached)*** | | | | | | |
| Name, Surname/Name of the Payer | |  | | | | |
| Personal identity number/reg. No. of the Payer | |  | | | | |
| Card number *(if the payment was made with a payment card)* | | | | | | |
|  | | | | | | |
| Account number to which the payment was made | | | | | | |
|  | | | | | | |
| I don't know, the payment was made using third party services | | | | | | |

**Refund**

|  |  |  |
| --- | --- | --- |
| Name, Surname/Name of the Recipient | |  |
| Personal identity number/reg. No. of the Recipient | |  |
| Account Number |  | |
|  |  | |

I attach (original or copy) to the application:

|  |  |  |  |
| --- | --- | --- | --- |
| payment documents; | power of attorney; | other documents |  |

Information that the payment has been refunded:

|  |  |
| --- | --- |
| should be sent to the e-mail specified; | I do not want to receive it. |

By signing this application, I certify, that:

* the information provided in the application is true and complete. I am aware that false information or a refusal to provide the required documents may be a reason for refusing to issue a refund.
* I have read the [Personal Data Processing Statement](https://lg.lv/personas-datu-apstrades-pazinojums) of *Latvijas Gāze* and I acknowledge its binding force.

*Latvijas Gāze* shall make the refund within 2 months from the date of receipt of the application or all of the necessary documents for the processing of the application.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| 202 |  | year |  |  |  | | |
|  |  |  |  |  | /signature and printed name/ |  |  |
| - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - -- -  **Notes of the employees of *Latvijas Gāze***   |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | | The refund is refused | | | To be repaid |  | EUR | | | Date |  | Signature and printed name of the employee | | | |  | | | | | | | | | |