

Refund Application Form

Please print clearly using block letters

OFFICIAL USE

Date Stamp

1. Passenger details

*This information will only be used for identification, and will not be shared or used for any other purpose.

Title	<input type="text"/>	Name	<input type="text"/>	Surname	<input type="text"/>
Email	<input type="text"/>			Cellphone	<input type="text"/>
Card No. (Last 8 digits of myconnect)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

2. Refund application details

I think I have been charged incorrectly	<input type="checkbox"/>	I have a refund slip and bank slip from a card vending machine	<input type="checkbox"/>		
Date of incident	<input type="text"/> / <input type="text"/> / 20 <input type="text"/>	Time of incident	<input type="text"/> : <input type="text"/>	Station/stop	<input type="text"/>
Bus Number	<input type="text"/>	Value disputed	<input type="text" value="Rand Value"/>	Penalty	<input type="text" value="Y"/> <input type="text" value="N"/>
Station/stop tapped IN at	<input type="text"/>	Station/stop tapped OUT at	<input type="text"/>		
Please provide details of the incident (incomplete, incorrect or illegible applications will not be processed)					
<input type="text"/>					

3. Refund card details

Complete only if the card to be refunded is a different myconnect card to the one listed in Section 1

Number of myconnect card to be refunded	<input type="text"/>	<input type="text"/>	<input type="text"/>	-	<input type="text"/>	<input type="text"/>	<input type="text"/>	-	<input type="text"/>	<input type="text"/>	<input type="text"/>	-	<input type="text"/>	<input type="text"/>	<input type="text"/>
Reason for refund to a different card	<input type="text"/>														

4. Declaration

If the applicant is under 18 years, this form will need to be signed by a guardian

I, the undersigned, understand that providing untrue information constitutes fraud and certify that the information provided is true in all respects.

Signature of applicant or guardian	<input type="text"/>	Date	<input type="text"/> / <input type="text"/> / 20 <input type="text"/>
------------------------------------	----------------------	------	---

For official use only

Mini-statement attached	<input type="text" value="Y"/> <input type="text" value="N"/>	CVM refund slip attached	<input type="text" value="Y"/> <input type="text" value="N"/>	Redacted bank slip attached	<input type="text" value="Y"/> <input type="text" value="N"/>
Cashier name	<input type="text"/>	Cashier signature	<input type="text"/>	Date	<input type="text"/> / <input type="text"/> / 20 <input type="text"/>

Customer Slip

Cashier to complete, tear off and hand slip to passenger for hardcopy submissions

Passenger name	<input type="text"/>	Station submitted	<input type="text"/>	Date	<input type="text"/> / <input type="text"/> / 20 <input type="text"/>
Cashier name	<input type="text"/>	Cashier signature	<input type="text"/>	Time	<input type="text"/> : <input type="text"/>

Passengers must keep this slip as proof of submission. A reference number will be issued by the Transport Information Centre (TIC) via email, SMS, or phone once the application is registered. The TIC will inform passengers of the outcome and any refund collection details, if applicable.

POPIA DISCLAIMER

By completing this (form/register, insert whichever one is applicable), I understand and consent that (i) my personal information will be processed by the City of Cape Town, for purposes of and in relation to the City of Cape Town's programmes and community initiatives, and that such processing shall comply with the provisions of POPIA and any other applicable law; (ii) I may, at any stage, withdraw my consent but acknowledge that the City of Cape Town may still process my personal information if the law allows or requires this; and (iii) I also have the right to request access to my personal information and where necessary request the deletion, correction or destruction of such personal information.



CITY OF CAPE TOWN'S PUBLIC TRANSPORT SERVICE

Call the Transport Information Centre (free call 24/7) 0800 65 64 63

www.myciti.org.za



MyCiTi Bus



@MyCiTiBus



@mycitibus



Download the official MyCiTi App