

APPEAL FOR RETURN OF OVERPAYMENT

I request to return overpayment, which has arisen by reason of earlier check-out of the student dormitory.

I request to return overpayment to the below mentioned account .

Name :

Surname: Telephone:

Variable symbol :

Permanent address :

Number of account IBAN:

BIC:

Reason of check-out:

Date of check-out

.....

Signature of requester

**Expression of Accommodation department of the Administration of Student dormitories
and Dining-Halls of the Slovak University of Technology.**

OVERPAYMENT : €

.....

Signature of Acc. Dept. of

Administration

Overpayment will be returned within 30 working days from the date of passing of the request in case of correct filling of dates.