



Oranjestad, Aruba  
Tel: 523-7100  
Email: [customerservice@elmar.aw](mailto:customerservice@elmar.aw)  
website: [www.elmar.aw](http://www.elmar.aw)

## Payment Request Form

**Date:** \_\_\_\_\_

**Customer Name:** \_\_\_\_\_

**Customer Address:** \_\_\_\_\_

**Location #:** \_\_\_\_\_ **Customer #:** \_\_\_\_\_

**Amount to be Refund:** AWG \_\_\_\_\_

Bank Account Transfer

**\* For transfers, make sure only current account is submitted\***

Bank Name	Bank Account Number
Aruba Bank N.V.	
Banco di Caribe N.V.	
Caribbean Mercantile Bank N.V.	
Royal Bank of Canada N.V.	

### Purpose for Payment request

Refund

Damage claim

Verbrande Aparatuur

Gevallen Draad

Other: \_\_\_\_\_

*Attached valid proof of identification: I.D. Card, Passport, Driver License*

### Comment:

---

---

---

**Customer Signature:**

---

**Department Supervisor Signature:**

---