

To be sent to: **DARS d.d., DarsGo servis, Grič 54, 1000 Ljubljana**

Information on the person liable for toll:

(* Field must be completed)

*Name of company/name and surname of the user:	
*Address:	
*Post code and post:	Country:
Liable for VAT: <input type="checkbox"/> - YES <input type="checkbox"/> - NO	*Tax number:
Contact person:	Electronic address:
*Telephone number:	

Data on the vehicle of the person liable to pay the toll:

*Vehicle make and model:
*Vehicle registration number:

Data for payment:

*Bank name:
*IBAN (international bank account number):
*BIC (bank identifier code):

Pursuant to Article 38 of the Tolls Act (Official Gazette of the Republic of Slovenia, no. 24/2015 in 41/2017), I hereby request the reimbursement of the amount paid for the annual vignette or the reimbursement of the proportionate share of the value of the half-year vignette (for a motorcycle) for the following reason:

- replacement of windscreen
- replacement of a part of a motorcycle on which the vignette was displayed
- replacement of a windscreen, part of a motorcycle or vehicle on which the vignette was displayed during the warranty period.
- arrangement for the vehicle to be destroyed.

The displayed vignette on the vehicle was:


- a half-year vignette (single-track vehicle) for the year _____ and the marked date ____
- a yearly vignette for the year _____
- serial number of the vignette __ _ _ _ _ _ _ _ _ _ _

which was replaced with a new vignette (identical replacement vignette is purchased):

- serial number of the vignette __ _ _ _ _ _ _ _ _ _ _

Mandatory attachments:

- the removed vignette, or the part of windscreen with the vignette (if the entire serial number on the vignette is not legible, the accompanying coupon should also be submitted). **The validity period must be evident, otherwise the purchase invoice must be attached;**
- the **original** coupon(voucher) and **original** invoice for the purchase of the new/replacement or replacement (equivalent) vignette (*to be returned to the applicant after inspection*);
- a copy of the invoice for replacing the windscreen, or a copy of the invoice for replacing part of the motorcycle,
- or a document or copy of a document on the warranty replacement of the windscreen, part of the motorcycle or vehicle issued by the workshop which replaced it;
- copy of the vehicle registration certificate for vehicles not registered in the Republic of Slovenia;
- a photocopy of the document on the handover of the vehicle for destruction and of the document on the cancellation of the vehicle from the official registry of registered vehicles. **The documents have to be enclosed with their translations into Slovenian language issued by a sworn translator.**

TURN OVER 

For the yearly vignette, the total value of the vignette is reimbursed.

A user is entitled to reimbursement of the yearly vignette value only if the replacement vignette was purchased before the start of validity of the yearly vignette for the following calendar year.

The person liable for tolls should apply for reimbursement of the value of a replacement yearly or half-year vignette within 30 days in order to exercise this right.

I understand that the unjustified obtaining of (a relative proportion) the value of a replacement vignette on the basis of false information is a criminal offence.

Date: _____

Applicant signature: _____

Personal information on the applicant in this application form will be protected by DARS d.d. in compliance with the provisions of the Personal Data Protection Act (Official Gazette of the Republic of Slovenia, No. 94/07 – official consolidated text). DARS d.d. undertakes not to use personal information contrary to the provisions of this Act, and to use them only for the purpose for which they were obtained.

To be completed by DarsGo servis

On the basis of the signed application and the mandatory attachments received, the user may be reimbursed for the replacement vignette value (relative proportion for the half-year vignette), payable to the abovementioned account.

Date of application receipt: _____

Clerk: _____

INFOtel: 080 15 03 or +386 (1) 51 88 350