

## **EGYPT AIRLINES General Managements Of Stations Baggage Services Department**

## **High Value Declaration Form**

(For mobility devices on direct flights to/from Canada)

• If you would like to submit a High Value Declaration, please complete the following information:

•	•			
	Customer Co	ontact Information		
First Name:		Surname:		
Date:	Destination:	Flight number :		
Reference number:		Ticket Number:		
Address:		Passport number:		
Email address:		Telephone number:		
	Mobility De	vice Information		
Mobility device tag number:		Weight:		
Brand:		Value:	Age:	
Description and features	V A			
Receiving condition:	-			
Wrapped ☐ Minor dama	ige 🗆 Major damage 🗆			
Comments:				
<ul> <li>This service is applied</li> <li>This form is valid for</li> <li>The mobility device at</li> <li>In case of claim for continuous</li> <li>Note: Please print 2</li> <li>Deliver one copy at</li> <li>In the event of lease</li> </ul>	compensation, you will need to copies of this form: to the check-in agent during the oss or damage, please indicate	ter must be securely locked o provide proof of value (purcheck-in procedures and keep e that you have submitted a	and wrapped by the passenger.  chase receipt) for the declared ite the second copy as a reference.	
Date			Signature	
ISSUE 1 DEV. O			MSC/ST/	

SSUE 1 REV. 0