

IndiGo



My Wheelchair Information

Place a picture of your wheelchair here (if available)

Please specify on the picture, where to lift the wheelchair from.

Name of Owner: _____

Contact Number: _____

PNR Number: _____

Weight of Chair: _____ kgs/lbs

- Battery Type: Non Spillable (Dry Cell/Gel)
- Spillable (Wet Cell / Acid batteries are not carried by IndiGo)**
- Lithium (No of Grams____)

Are there any removable parts?

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____

Please specify the parts that fold/collapse _____

Are parts of the chair taken in cabin? _____
If yes, please specify _____

Special Instructions/Precautions

"I, hereby, agree to explain to an IndiGo representative the way to dismantle, remove or fold different movable parts of my wheelchair & also explain how to reassemble the same when I reach destination."

Signature of Owner: _____