	LECTRIC OBILITY AID
RETURN AT GATE* / BAG HALL* (*delete as appropriate)	
PAX Name: Flight no.: Seat no.: Make/Model:	Reservation no.: Travel date: Tare weight (Kg):
Instructions for protecting from short-circuit: The battery is fully encased with no exposed terminals Other:	
Instructions for inhibiting electrical circuits: Switch off key and give to PAX Insert inhibiting plug Separate battery cable connector by:	
 Other: Wet acid batteries <u>only</u> that cannot be loaded and stowed in an upright position: remove, insulate terminals and arrange packing in accordance with the ICAO Technical Instructions. 	
I confirm that I have protected the device from short circuit and have inhibited the electrical circuits as specified above. Name (print): Sign: PERSON RESPONSIBLE FOR MAKING SAFE FOR CARRIAGE	
I confirm that I have checked the mobility aid and it does not operate. Name (print): Sign: LOADING SUPERVISOR	