SBM bank

CARDHOLDER DISPUTE FORM

NAME: _____

CARD NUMBER:

				X	X	X	X	X	X	X	X				

I am disputing the following transaction(s) for the reason given below and request you to settle the case(s):

DETAILS OF DISPUTED ITEM(S):

TRANSACTION DATE	MERCHANT NAME	TRANSACTION AMOUNT

Please select the most appropriate one:

- ❑ I have neither authorized nor participated in the above transaction(s). I confirm that the card is still in my possession.

- ❑ My card was lost/stolen on __/__/____ and the same was reported to you on _____.

- ❑ Duplicate/Multiple billing. I have done only one transaction for Rs. _____ at the Merchant Establishment on __/__/____ but i was billed ____ times on __/__/____.
  (Please attach a copy of actual transaction receipt/ communication with merchant)

- ❑ I only authorized one transaction for Rs. _____ on ___ / ___ / ___. It appears to be processed for the incorrect amount of Rs. _____.
  (Please attach a copy of transaction receipt and any other applicable documentation).

- ❑ I have cancelled the transaction(s)/returned the goods but have not received credit/refund for the same. Expected date of credit ___ / ___ / ___.
  (Please attach the cancellation copy / communication with merchant)

- ❑ I had received defective merchandise/goods and had returned the goods to the merchant on __/__/____.
  - ❑ Please attach the communication with the merchant.
  - ❑ Provide evidence for damaged / defective / not as described goods.

- ❑ Paid by alternate means. I gave my card for payment, but later paid by other means for the same transaction. I Paid by Cash (attach cash receipt/bill)/ Cheque (attach Cheque /Bank statement)/ other card (attach transaction receipt/other card statement)

- ❑ Cancelled Membership/Subscription/Booking.
  (Please attach the cancellation proof / communication with merchant)

- ❑ I ordered goods/services and the same were expected to be delivered by date (dd/mm/yy)_____, but I never received the same.
  (Attach the proof of order placed / communication with merchant)

- ❑ Cash was not dispensed at the ATM, but I was billed for the entire amount of Rs._____.
  (Attach the transaction receipt)

- ❑ Cash was dispensed partially in the ATM for Rs._____ but I was billed for the entire amount of Rs. _____.
  (Attach the transaction receipt)

- ❑ Others (Please explain in detail. Please attach necessary supporting document)

Mandatory: For resolution of the dispute, please forward the duly signed and filled CDF along with the applicable documents.

DECLARATION:

I declare that above given information is true and correct to my knowledge. I understand that I can be held liable for all charges incurred if dispute raised by me is found invalid. I agree to pay the charges levied by the bank for the same including the cost incurred for investigation of my claim. The Bank may contact me whenever it requires any further information.

Email/Phone / Fax: _____ Date: _____

Address_____ Cardholder's Signature: _____