

Cardholder Name																	
	Number																
Transaction Date			Merchant Name									Trans	actio	n Amo	ount	Dispute Amount	
	Unauth			-	-						•						
	If you have any recurring payment / standing instruction, please notify the merchant/billing organization of the ch details e.g. new credit card number and expiry date upon receipt of your new credit card I have neither authorized nor participated in the above transaction(s). I confirm that the card											of the change of card					
												he card is still in					
	my possession.																
	My card was lost/stolen on and misused. It was reported to you on																
	Duplicate/Multiple billing. I have done only transaction(s) at the Merchant Establishment but I was billed times. (Attach copy of authorized charge slip)																
	I have cancelled the transaction(s)/returned the goods but have not received credit/refund for the same. (Attach Credit Voucher/Refund note/Merchant's letter or any form of merchant's confirmation that the credit is due to the card account)																
	The service / merchandise that I have received are not as described or found defective																
		(Attach copy of all correspondence had with the merchant, proof that goods were returned to the merchant OR proof of merchant acknowledging the cancellation intimation)											nt OK proof of				
		transaction was Unsuccessful OR the Merchant confirms non-receipt of payment															
	(Provide d																
	l ordere	-					ne sa	me w	vere	expe	cted to	be del	livered	by da	te (dd	/mm	ι/yy),
	but I ne						loar d	ocoria	tion o	f tha	and ar		ordorod	10000	ofallo		andonco had with the
	merchant	ch order confirmation / Provide clear description of the goods or services ordered / copy of all correspondence had with the hant)															
	Paid by	alterr	nate n	neai	ns. I	gave	my	card	for p	ayme	ent, but	later	paid by	other	r mea	ns fo	or the same
			Paid	by (Cash	(atta	ch cas	sh rece	eipt/b	ill)/ Ch	eque (Bo	ınk state	ement)./	Other o	card (a	ttach	charge slip/other card
	statemen	ntement) Incelled Membership/Subscription/Booking. (Attach proof of cancellation)															
	Cancelle		inper	SIII	J/ SU	DSCH	μιοι	1/ 000	JKIIIE	3. (Att	ach proo	r of can	cellation)				
	The transaction amount incurred/authorized by me is for Rs but I was billed for Rs.																
	(Attach copy of authorized charge slip / Invoice copy)																
	Cash wa	as not	dispe	ense	ed at	the	ATM	but l	l was	bille	d for th	e enti	re amo	unt of	⁻ Rs		
	Cash wa	as disp	pense	d pa	artia	lly in	the	ATM	for F	Rs		b	ut I was	bille	d for t	he e	ntire amount of Rs.
		·															
	Others	(Pleas	e exp	lain	in d	etail	. Plea	ase a	ttach	n a se	parate	letter i	if neces	sary)			



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. The Bank may contact me whenever it requires any further information.

Cardholder Signature_____

Contact Number_____

Email ID_____