

ATM / POS / E-COM COMPLAINT / DISPUTE REDRESSAL FORM

REG: COMPLAINT/CHARGE-BACK FOR ATM/POS/ECOM TRANSACTION

Bra	nch								Co	mp	lain	t su	bmi	ssio	n Da	te _					
SL	PARTICULARS		DETAILS																		
1	Account Holder Name																				
2	Account Number (16 digit account mandatory)																				
3	ATM Card Number	5	0	8	5	-					-					-					
1	Transaction Type: (Tick correct txn type)		ATM	l		·		PoS				E-COM									
5		Date of Transaction																			
	Transaction Details	Transaction (Disputed) Amount (INR)																			
		ATM/PoS owner Bank																			
		ATM/PoS/E-Commerce merchant Name/Location/URL																			
6			1				_		r sam				•			٠ ،				of	
		accepted transaction chargeslip/Ticket booking History for online transaction Partial Amount of Rs dispensed instead of Rs from ATN																			
	Reason for disputing the transaction (Tick one)	Ordered Goods or Services not received (Attach copy of order receipt/booking details)																			
	Documents, wherever										-					-					•
	required is mandatory	Credit Not Processed (Attach copy of Credit Voucher/Refund note/Merchant's letter or any form of merchant confirmation that the credit is due) Date of Credit Voucher																			
	with this Dispute Form	Billed for No-Show Charge after Cancellation (Attach copy of proof of cancellation) Cancellation Date: Cancellation Number:																			
		Incorrect Txn Amount (Attach copy of chargeslip/document for the accepted amount). Transaction amount incurred was Rs, but I have been charged for Rs															nt).T				
DFC	CLARATION		trar	isacti	on a	amou	int inc	urred	was R	S		, t	out I r	nave	been	cha	rgeo	1 for	RS_		
liab sam Cha	e declare that above given informule for all charges incurred if dispute including the cost incurred forgeback is 'REPRESENTED/REJECTATED of Cardholder	ite ra for ir	aised nvest	by n igatio	ne i on icqu	s fou of n	und in ny cla g Ban	valid. aim. 1 k.	I/We /We I	agr	ee t	o pay	the to	cha inde	rges mnif	levi y th	ed I e B	by th Bank	he l	oan cas	k fo
Signature of CardholderEmail id							u						161.1	10/	MODII	<u> </u>					
Plea	se note that the applicable Retrieva	l Fee	shall	be c	harg	ged p	er tra	nsacti	on to	you	Car	d Acc	ount	if ca	se do	es n	ot c	:lose	in '	you	r fav
For Remote Data C								Centre Use Dispute Reference No													
	have verified the above particula ure is identified and found suspe	ars in	the	CBS	sys	stem	and	NPCI	Raw o												tion
Chargeback Entered/raised on								Refere	nce n	0											
Date of CB Transaction								ate o	f refu	nd t	o cu	stom	er								
Rep	resentment Amount						I	Refun	d to S	pon	sor	Bank									
	-Arbitration (in case the char	_				-	-	-													
Chargeback Entered raised on																					
Date of CB Transaction Representment Amount									f refu d to S												
_																					

Sign of Maker Sign of Checker