

CARDHOLDER DISPUTE FORM

I am/ We are disputing a transaction

Customer 's Name:		
Branch	Account number:	
Mobile number of customer:	Email Id of customer:	

Sr. No	Transaction Date as in statement	Merchant Name (as it appears in the Bank statement/Passbook)	Bill Amount	Reference Number(RRN) as appearing in Bank statement/Passbook.

Attach annexure if there are more than two transactions.

I dispute the above mentioned transaction(s) for the following reason (please tick one box only)

Duplicate Billing				
I was charged more than once for a single authorized transaction (transaction date & Amount should be				
same). I have done the transaction onlytime(s) but I have been billedtime(s)				
Paid by other means				
I paid this transaction by other means a cash cheque other Card				
Please enclose proof of payment by other means (i.e. cash, receipt, other credit card transaction receipt				
etc.)				
Incorrect Amount				
The amount billed to my a/c is different from the amount that I had authorized. Transaction amount was but I was billed for				
(Please enclose copy of transaction receipt /charge slip which you authorized).				
Fraud				
I have not authorized the above transaction(s). The card is blocked/ not blocked and is in my possession/				
lost/stolen. I will lodge an FIR with police for the same and submit to branch by				
I came to know about the unauthorized transactions by (details how the fraud was known				
. I have received SMS for the transactions- Yes/ No				
I have shared my confidential details like CVV / Card no / card exp / OTP etc – Yes / No				
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Acknowledgement for Dispute Form for A/C Number				
Branch Official Name Accepting the Dispute Form : Sign of Branch official (PA / RP stamp):				
Branch Stamp :				
Date & Time :				



Refund/ Credit not processed				
I have cancelled the transaction but credit / refund not processed /posted to my account				
Please find enclosed credit transaction receipt/ void slip/ merchant's letter etc as proof.				
ATM withdrawal				
□ I have tried to withdraw cash fromBank ATM but cash not dispensed (ATM slip				
copy enclosed).				
I received only (amount) for ATM withdrawal but my account debited for				
Services not rendered Services for the transaction (s) were not rendered due to inability/unwillingness of the merchant. I have attempted to resolve the dispute with the, merchant and/or merchant's liquidator. Date services were to be provided by (Indicate the date, services were supposed to be provided) Please enclose proof that the dispute has been addressed to merchant with fax/postal confirmation, if any.				
Others (Please enclose necessary document to support the dispute & brief about the same)				

Cardholder Declaration: I hereby declare that

- All information provided above is true and to the best of my knowledge.
- I hereby authorize SVC Bank to investigate/correct the transaction(s) in dispute.
- Should the dispute be found invalid, I agree that, I may be liable for the sales slip retrieval fee and other processing charges incurred by the Bank in the course of the investigation.

Customer Signature (stamp & sign, if any): _____ Date: _____

For official use: Branch Official Name Accepting the Dispute Form:_____

Date & Time :	Sign of Branch official (PA / RP stamp) :
Branch Stamp :	Card block date :

Physical verification of the card done – Yes/ No