

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 only _____ time(s) but I have been billed _____ time(s)

☐ **Transferred to Wrong Account**

I have erroneously transferred funds to an unintended beneficiary through ☐MPS ☐UPI

Reference No: _____ Amount: _____

Date of Transaction: _____ Remitter Customer A/c No: _____

Wrong Beneficiary Account No: _____ Correct Beneficiary A/c No: _____

(Please enclose a written application form and any available proof of transaction)

☐ **Paid by other means**

I paid for this transaction by other means ☐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 CVV / Card No. / Card expiry date / OTP etc – Yes / No

Acknowledgment for Dispute Form for A/C Number _____

Branch Official Name Accepting the Dispute Form : _____

Sign/Stamp of Branch official: _____

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 from _____ Bank ATM but cash not dispensed
(ATM slip copy enclosed)

☐ **Partial Cash received**

I received only (amount) _____ for ATM withdrawal but my account debited for

☐ **Others** (Please enclose necessary documents 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 Kalupur Bank to investigate / correct the transaction(s) in dispute
- Should the dispute be found invalid, I agree that, I may be liable for any 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/Stamp of Branch official : _____

Branch Stamp : _____ Card block date : _____

Physical verification of the card done – Yes/ No