

Date: _____

Transaction Dispute Form

Name	
Card Number (Please provide last 4 digits of the Card Number only)	
Phone Number (This is important, to allow us to get in touch with you for further clarification)	
Email Address (This is important, to allow us to get in touch with you for further clarification)	

Details of the Disputed Item(s)

Transaction Date	Statement Date	Merchant Name	Transaction Amount	Disputed Amount

You can use a separate annexure if disputed transactions are more than specified in box above.

DECLARATION: I am disputing the transaction(s) listed above for the reason as follows:

Reason for Dispute	Details	Mandatory Documents Required
Lost / Stolen Card***	Card lost / stolen on ___/___/___ at ____ a.m/p.m and reported the same to you on ___/___/___, at ____ a.m/p.m by way of _____.	Copy of the FIR filed with Police
Duplicate Charge	I have been charged twice for the same transaction on: _____. Disputed Amount: _____	Copy of Charge slip showing the actual amount
ATM Cash Not Received	A - Cash Not dispensed _____ B - Partial amount dispensed by ATM _____	Copy of the ATM slip
Paid for Goods by Other Means	<input type="checkbox"/> Cash <input type="checkbox"/> Cheque / DD / Credit card _____ Date _____	Cash Memo/Bank Statement/Payment Counterfoil/Card Statement.
Non-Receipt of Goods or Services	Tickets/ Merchandise not received. Expected Delivery Date: _____	Copy of Letter / Email sent to Merchant to resolve the issue
Credit Not Processed	Date of Credit Voucher Issuance: _____	Copy of Credit /Refund Slip/ Cancellation letter from merchant establishment.
Billed for No-Show Charge after Cancellation	Cancellation Date: _____ Cancellation Number: _____	Confirmation letter / email received from the merchant Copy of Terms & Conditions from merchant
Incorrect Transaction Amount	Transaction amount incurred was _____, but I have been billed for _____.	Copy of Charge slip showing the actual amount
Unauthorized Transaction(s)***	<input type="checkbox"/> I have neither incurred nor authorized the above transactions. <input type="checkbox"/> I have incurred one transaction-dated _____ at the above merchant establishment. However I have not incurred or authorized other transactions listed above at the same merchant.	Copy of charge slip for the genuine transaction

Primary Cardholder's Signature

Dear Customer,

For us to serve you better please provide us with the additional documents as listed above depending on the nature of the dispute.

We request you to kindly send us the form duly filled and signed at the below mentioned address.

Manager Card Services

RBL Bank Ltd.

Unit: 306 – 311, 3rd Floor,

JMD Megapolis,

Sohna Road, Sector - 48,

Gurgaon - 122018, Haryana.

As per the Master Card regulation, the letter from the Cardholder is a mandatory requirement and will help us to initiate a Charge Dispute on your behalf with the concerned acquiring bank. Hence, we would request you to kindly send us the signed dispute form mentioning the details within 45 days from the transaction date.

Kindly be advised that in case we are not in receipt of the required documents within the specified timelines we would be unable to raise the dispute with the acquiring bank and the liability of the transaction would lie with you.

You can also scan the request and send it to cardservices@rblbank.com.

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 before the date of reporting of loss/ theft and also, if dispute raised by me is found invalid.

Others (any additional comments)

*** Allow us to block your card for further investigation (As per MasterCard Norms its mandatory)

Primary Cardholder's Signature

RBL Bank Limited

Card Operating Centre: Unit 306-311, 3rd Floor, JMD Megapolis, Sohna Road, Sector - 48, Gurgaon - 122 018, Haryana.

Registered Office: 1st Lane, Shahupuri, Kolhapur - 416 001, India. CIN: U65191PN1943PLC007308