# THE NASIKROAD DEOLALI VYAPARI SAHAKARI BANK LTD.

Kalpavruksha , Ashanagar ,Nasikroad ,Nasik-422101 Phone:0253-2464640,2450002

## CARDHOLDER DISPUTE FORM

Account Number:-

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ATM Card Number:-

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Details of disputed item/s

| Transaction Date | Merchant Name/ATM Location | Transaction Amt | Disputed Amt |
|---|---|---|---|
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I am disputing the transaction(s) listed above for the below given reason and request you to settle the case.

1)Duplicate /multiple billing . Ihave done only one transaction but I was billed _____ (Twice/ Thrice etc) (# accepted transaction receipt)

2) The transaction Amount is Rs_____but I was billed for Rs._____ (#Attach customer copy of chargeslip/sales slip).

3)Transaction cancelled and I have not received the credit/refund for the same (Attach credit slip/refund note /merchant's letter or any form of merchant's confirmation that the transaction was cancelled and the credit was due to you).

4) Cash not dispensed in the ATM but I was billed for the amount.

5) Received cash Rs._____ in the ATM but I was billed for the entire amount Rs_____.

6) I have not participated or authorised the above transaction(s). The card was in possession of mine at all times.

7) Others (Please explain in detail. Please attach a separate letter if necessary).

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* Credit with hold funds will not be given for all disputes arising due to misuse and fraudulent usage on cards being reported as stolen or lost.

*If the aforesaid transaction(s) is deemed to be a valid transaction, Credit put to your account with hold funds will be reversed and proof of transactions will be sent to you.

Declaration: I hereby confirm that the information mentioned above is true and to the best of my knowledge.

Cardholder's Name : Place :

Signature : Date :

Email : Landline / Mobile No :