

Transaction Dispute Form



Fax: +971 4 324 2961

| Statement Date | Transaction Date | Merchant Name | Amount in AED | Amount in Foreign Currency (if applicable) |
|----------------|------------------|---------------|---------------|--|
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I dispute the above mentioned transaction(s) for the following reasons: (Please tick relevant)

- Transaction not recognized**
- Not participated in or authorized the transaction. My card was in my possession at the time of the transaction**
- Unauthorized Internet / Mail Order / Phone Order transaction**
- Debit instead of a credit
- Incorrect transaction currency* (Please attach the signed agreement copy showing the authorized currency)
- Amount altered* (Please attach the actual signed Sales Draft)
- Duplicate billing
- Paid by other means* (Please attach proof of payment)
- Canceled recurring membership / subscription on ____ / ____ / ____ * (Please attach the cancellation proof)
DD MM YYYY
- Returned merchandise or cancelled services that did not match description at the time of purchase*
 (Please attach proof of return, date when the merchandise was returned or service was cancelled, date when the merchandise was received by merchant and explanation of what was not as described)
- Returned the merchandise that was received damaged or defective* (Please attach proof of return on date when the merchandise was returned or service was cancelled, date when the merchandise was received by merchant and explanation of what was not as described)
- Refund / Credit not received* (Please attach the credit/refund voucher)
- Canceled the transaction on ____ / ____ / ____ with cancellation number _____*
 (Please attach cancellation proof)
DD MM YYYY
- Cash not dispensed from ATM
- Not received the ordered merchandise or services expected by ____ / ____ / ____*
 (Please attach receipt of expected arrival date of goods)
DD MM YYYY
- Other (please specify below):

Provide additional information:

* Please ensure to attach relevant documentation to support your dispute. Disputed transaction shall not be entertained without supporting documents.

** If the transaction appears to be valid, I agree to be charged a processing fee of AED 100 per transaction.

Declaration: I agree to have my Card replaced to facilitate the dispute investigation as and when directed by the Bank.

Card Number (Basic / Supplementary) :

Name (Basic / Supplementary) : _____ Date : ____ / ____ / ____
DD MM YYYY

Signature (Basic / Supplementary) _____ Phone : _____

Fax : _____

Mobile : _____

As the review is likely to take at least 90 days and we would not want you to be inconvenienced on this account, a Temporary Credit for the disputed amount will be offered by the Bank at its discretion and the same will be intimated to you via SMS by the mobile number provided on the form.

If the dispute case is not in your favor, the Temporary Credit will be reversed and you will be liable to pay; however, if the case is settled in your favor, the Temporary Credit will become permanent in your account.

(Disputes should reach within 30 days of the statement date, otherwise it will be considered as correct.)