



Date	
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CARDHOLDER DISPUTE FORM

Card Number (Basic/Supplementary)		Card Number (Basic/Supplementary)			
No.	Statement Date	Transaction Date	Merchant Name and Country	Amount (AED)	Amount (In Foreign Currency- it applicable)
1.					
2.					
3.					
4.					

I hereby dispute the above-mentioned transactions (Please tick relevant boxes):

☐ I certify that the charge(s) listed above have NOT been incurred by me nor have I received any goods/services through the charge(s), nor have I participated nor authorized the charge(s).

The card was:

- ☐ Lost • ☐ Stolen • ☐ Never Received. • ☐ In My Possession

☐ The amount of transaction is incorrect. I was charged AED_____I should have been charged AED_____(Enclosed is a copy of my charge slip/notification).

☐ The payment was declined/rejected from the merchant's side and I did not receive goods/services against the above charge(s).

(Enclosed is goods/service description, goods/service expected date, proof that the payment was declined from the merchant's side (Receipt/ E-mail/ Website Notification), and any proof of communication with the merchant if found).

☐ I have been billed more than once for the same charge (Duplicate Charges).

☐ I have settled the charge directly with the Merchant Establishment through Cash/ Cheque/Other_____ (**circle one**).
(Enclosed is the copy of the receipt issued by the Merchant Establishment evidencing other form of payment).

☐ I expected to receive goods/services by date_____ against the above charges from the Merchant Establishment, and goods/service have never been received.
(Enclosed is a copy of the goods or service description/details purchased from the Merchant Establishment, and any proof of communication with the Merchant Establishment if applicable).

☐ I returned the merchandise against the above charge by date_____ and did not receive a refund till today.
(Enclosed is a copy of the postal / courier receipt evidencing return of merchandise and my correspondence with the Merchant Establishment).

☐ I cancelled the Subscription / Membership / Policy / Other_____ (**circle one**) against the above charge(s) on date_____ and did not receive a refund till today.
(Enclosed is a copy of my letter/email to the Merchant Establishment & Cancellation confirmation from the Merchant Establishment).

☐ The merchant did not process Credit / Refund as agreed. (Enclosed is copy of Credit Slip / Refund document/ Void Receipt).

Reservation (Hotel Reservation, Car Rental, Other_____)

☐ I have cancelled the reservation on date_____ under the Merchant cancellation code/policy and did not receive refund till today.
(Enclosed is a copy of my letter/email to the Merchant Establishment & Cancellation confirmation from the Merchant Establishment)

ATM DISPUTE:

- ☐ I tried to withdraw cash from ATM, but no cash was dispensed.
☐ I tried to withdraw AED_____ from ATM, but received only AED_____ from the ATM (**Partial Dispute**).
☐ Other (Please specify) _____

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

We may ask in some instances to please provide your Original Cancelled Card and Passport Copies (All pages) to any Emirates NBD branch.

Declaration

- I hereby affirm that the information furnished above is true to the best of my knowledge.
- I agree to have my card replaced to facilitate the dispute investigation as and when directed by the Bank.
- Dispute should reach within 30 days of the statement date, otherwise the transaction will be considered as valid.

Customer Signature (S)

Mobile Number		Email ID	
Phone Office/Residence		Fax	

IMPORTANT

- Please enclose the relevant statement copy duly marking the disputed amounts).
- Please include all relevant documents such as your charge slip copy, correspondence with the merchant, cash receipt etc., to enable us review further.
- Disputed transactions shall not be entertained without supporting documents.

FOR BANK USE ONLY			
Signature verified		Documents verified	
Authorized by		Input by	