ATM CUM DEBIT CARD DISPUTE FORM

To,   ANNEXURE

The Branch Manager

_____ [Name of the Bank]

_____ [Name of the Branch]

_____ [Name of the City]

1.	**Customer Information** Name of the Customer : Account No. : Debit Card / ATM Card No. : Telephone no / Mobile No. :
2.	**Transaction Information** Date of Transaction : _____/_____/_____ Time of Transaction : _____ : _____ : _____ RRN / TXN NO : _____
3.	**Atm Information** ATM ID / Location (if ID is not available) : Name of the Bank of which ATM use :
4.	**Pos Information** Location (In case of Pos Transaction) :
5.	**E-Commerce Information** Portal of The E-Commerce :
6.	**Complaint relating to withdrawal :** Amount requested for Withdrawal / Transaction : [Rs.] Amount actually disbuesed at the time of Transaction : [Rs.] Amount to the account debited : [Rs.]
7.	**Other Complaints** Card Capture by ATM :
	Date : / / Signature of the Card Holder

Signature verified by   Officer   /   I/c Branch Manager   /   Branch Manager

(Send atm dispute form after signature verification of card holder)

(Attach bank statement and highlight of above transaction)