

CUSTOMER DECLARATION FORM

Credit / Debit card number * _____

Please mention your previous card numbers (if re-issued) 1. _____

***If the charge was incurred by your additional cardholder, request your additional cardholder to fill the declaration**

Dear Sir / Madam,

You are kindly requested to review the charge(s) (details below), which has been billed to my account. I have specified the reason (s) and am enclosing relevant documents as per section B,

A) CHARGE DETAILS

Sale Date	Reference No.	Amount	Merchant Name

B) REASON FOR REVIEW

- I certify that the ecommerce charge(s) listed above have **NOT** been incurred by me nor have I received any goods / services through the charge(s). I also certify that the authentication credentials (PIN, card details etc) have not been shared by me
- Charge(s) mentioned above was attempted by me through internet and was unsuccessful however my card account has been charged with the transaction amount
- I certify that the charge(s) listed above have **NOT** been incurred by me nor have I received any goods / services for the charge(s). At the time of the transaction, the card was :
 - In my possession Lost Stolen Never received
- The amount of transaction is incorrect. I was charged Rs. _____ whereas I should have been charged Rs. _____ (Enclosed is a copy of my charge slip / transaction confirmation for ecommerce transaction)
- I have not incurred the above charge(s) but I did engage in a transaction of Rs. _____ on dt. _____ at the same merchant outlet. (Enclosed is a copy of my charge slip)
- I have been billed more than once for the charge. I have authorized only one of these charges.
- I have settled the charge directly with the Merchant Establishment through cash / cheque / other means _____ (enclosed is the copy of the RECEIPT issued by the Merchant Establishment evidencing direct settlement)
- I expected to receive goods / services by dt. _____ against the above charge(s) from the Merchant Establishment. The goods / services have never been received. (Enclosed is a copy of my correspondence with the Merchant Establishment)
- I returned the merchandise against the above charge (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 against the above charge(s) on dt. _____. (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 and 15 days have elapsed since the refund confirmation by the Merchant Establishment (enclosed is copy of credit slip / refund document)

HOTEL RESERVATION

- I have cancelled the reservation on dt. _____ under the cancellation code _____.
- I have not made any reservation

ATM DISPUTE

- I tried to withdraw cash from ATM, but no cash was dispensed.
- I tried to withdraw Rs. _____ from ATM, but received only Rs. _____ from the ATM.

Others (Please Specify)

C) DECLARATION

I hereby affirm that the information furnished above is true to the best of my knowledge. In case, if any of the information mentioned above is found to be incorrect, the Bank has right to reject the dispute.




Signature _____

Date _____

IMPORTANT

Please enclose the relevant statement copy duly marking the disputed amount(s). Please include all relevant documents such as your charge slip copy, correspondence with the merchant, cash receipt, postal receipts etc., to enable us review further.

Please send this form through email / fax / courier / registered mail along with the enclosures within 7 days of receipt of this CDF failing which any temporary credits provided earlier will be reversed.

 retail.dox.india@citi.com	 Attention: CIU Toll Free # 1800-425 5757		Cardmember Services Citibank N.A, Mail Room, No.2, Club House Road, Chennai – 600 002 Tamil Nadu
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