



# CREDIT/DEBIT CARD DISPUTE FORM

Cardholder Details																																	
Cardholder Name:																																	
Card Number:																																	
<table border="1"> <tr> <td></td><td></td><td></td><td></td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td>X</td><td></td><td></td><td></td><td></td> </tr> </table>						X	X	X	X	X	X	X	X																				
				X	X	X	X	X	X	X	X																						
Account Number (In case of Debit Card dispute(s)):	Shadow A/c Number:																																
<table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>																	<table border="1"> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>																

Transaction Details			
	Transaction Date	Merchant Name (as appears in Credit Card/Account statement)	Billing Amount (SCR)
1.			
2.			
3.			
4.			
5.			

I dispute the above transactions appearing on my MCB Seychelles Credit Card/Account Statement for the following reason:  
 (Note: Disputes should be reported to the bank within 45 days from the statement date)

- The billed amount is incorrect. The transaction amounts to \_\_\_\_\_ . (Please provide a copy of your sales slip).
- I have already been billed for the above transaction on \_\_\_\_\_ .
- I have paid for this transaction by other means. (Please provide proof of alternative payment).
- I have not received the Goods/Services. (Please provide a copy of the merchant's delivery terms and your correspondence with the merchant, if any).
- I did not receive the requested cash at the ATM.
- This is a recurring transaction/subscription. I have already cancelled same with effect as from \_\_\_\_\_ . (Please provide cancellation letter sent to the merchant).
- I have already arranged for the cancellation with the Merchant but I have not received credit therefor. (Please provide copy of your credit voucher).
- I have not effected the above transactions.
- I have neither participated in nor authorised the above transactions. The card and PIN was in my possession at all times.

**Please provide additional information relevant to the dispute:**

---



---



---

Contact Details			
Address:			
Email:			
Mobile no:	Home no:	Office no:	Fax no:

Customer Declaration	
I hereby declare and certify that all information herein communicated are true, complete and accurate in all respects. I understand that the bank shall further to the above, undertake the requisite investigation which may take up to 180 days and that the bank reserves the right to reverse any interim credit given in this regard.	
Customer Signature: _____	Date: _____