



CREDIT/DEBIT CARD DISPUTE FORM

Cardholder Details																																	
Cardholder Name:																																	
Card Number:																																	
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Account Number (In case of Debit Card dispute(s)):	Shadow A/c Number:																																
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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).
- 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.
- I did not receive the requested cash at the ATM.
- Cash deposited on ATM not credited on account:

Amount deposited on the ATM				
	SCR25	SCR50	SCR100	SCR500
Number of notes deposited for each amount				

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: _____