

DISPUTE SETTLEMENT FORM

I used my:

- ATM Debit Card and my request was not met, whereas my account was debited.
 Credit Card and my request was not met, whereas my account was debited.

It is requested to please resolve the same or provide proper evidence according to SBP.

Name of Cardholder _____

 Card #

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 Branch Code

--	--	--	--

 Branch Name _____

Account Type

(For ATM/Debit Card Only)

- PLS Savings Current Other (Please specify) _____

IBAN / Account

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Phone/Fax # _____ Mobile # _____

(For Credit Card only)

Name of Supplementary Cardholder _____

 Supplementary Card #

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SECTION A

Please Tick One Box

- | | |
|--|---|
| <input type="checkbox"/> Local ATM Dispute (Debit Card) | <input type="checkbox"/> Internet Banking |
| <input type="checkbox"/> Local ATM Dispute (Credit Card) | <input type="checkbox"/> Global ATM Dispute (Debit & Credit Card) |
| <input type="checkbox"/> Local/Global POS Transactions (Debit & Credit Card) | |
| Transaction Mode | |
| <input type="checkbox"/> Cash Withdrawal (Allied Bank ATMs) | <input type="checkbox"/> Inter Branch Funds Transfer |
| <input type="checkbox"/> Cash Withdrawal (Other Banks' ATMs within Pakistan) | <input type="checkbox"/> Inter Bank Funds Transfer |
| <input type="checkbox"/> Utility Bill Payments | |

SECTION B

 ATM Location _____ Bank _____
(From where cash was not received or transaction was not successful)

 Transaction Date

D	D	M	M	Y	Y	Y	Y

 Transaction Amount _____

 Disputed Amount _____ STAN _____
(No. mentioned on the transaction slip)

Approx. Time of Transaction _____

SECTION C

TRANSACTION DATE	MERCHANT/BANK NAME	AMOUNT IN PKR	AMOUNT IN USD

I am disputing the transaction(s) mentioned earlier for the following reason. (Please tick only one box).

DOUBLE BILLING

I made only one transaction but I have been charged more than once.

CANCELLED TRANSACTION

I made a transaction through my Debit/Credit Card at a merchant outlet but cancelled the same on the date _____. (Please provide the cancellation # _____ with proof of cancellation).

REFUND/CREDIT NOT RECEIVED

The merchant did confirm processing credit on my Debit/Credit Card but the same has not been credited so far. (Please attach copy of a credit voucher or merchant acknowledgement for credit).

CASH NOT DISPENSED

I attempted to withdraw cash from an ATM internationally through my Debit/Credit Card. I did not receive the cash, however my account has been debited for that amount.

PAID BY OTHER MEANS

I made the transaction but payment was not made with my Debit/Credit Card. My mode of payment was _____, (Please attach cash memo, etc.).

UNAUTHORIZED INTERNET & MAIL ORDER TRANSACTION

My Credit Card was in my possession at the time of transaction(s). I have never made internet and/or mail order transaction(s).

NOT AUTHORIZED THE TRANSACTION(S). I DO NOT RECOGNIZE THIS TRANSACTION(S)

I am unable to recognize the transaction(s) because when the transaction(s) was conducted the Card was in my possession. Neither I, nor my Supplementary Cardholders, have any knowledge of this transaction(s).

GOODS RETURNED

I purchased the goods on the date _____ through my Debit/Credit Card and returned the same to the merchant on _____. (Please share the evidence).

NEVER RECEIVED SERVICES AND/OR GOODS

I have never availed the service or received goods from the merchants as per the agreed date _____ (Please attach evidence).

AMOUNT ALTERED

I conducted this transaction but the amount I had originally agreed to pay is different from the one posted on my Debit/Credit account. (Please attach original signed sales slip).

DEBIT INSTEAD OF CREDIT

I was issued a credit slip of an amount _____ on my Credit Card but my account has been debited instead of credited. (Please attach copy of credit slip).

CANCELLED MEMBERSHIP/SUBSCRIPTION

I had been paying for my membership/subsription through my Credit Card but now I have cancelled this membership/subsription with the merchant on the date _____ but I am still being charged for that amount. (Please attach all supporting evidence/ documents).

AMOUNT CREDITED TO WRONG BENEFICIARY ACCOUNT

I mistakenly transferred funds to the wrong beneficiary account.

BILL NOT PAID

I paid my bill on time but it was not settled.

MOBILE CREDIT NOT RECEIVED

I made the transaction but I never received credit on my mobile number.

OTHER (Please specify) _____

REMARKS _____

SUPPLEMENTARY
CARDHOLDER'S SIGNATURE (Where applicable)

CARDHOLDER'S SIGNATURE

Note :Kindly ensure that your bank statement/credit card statement is attached and the disputed transaction is clearly marked. The form and Supporting documents shall be mailed or faxed to:

Allied Bank Limited.
Complaint Management Division,
Service Standards and Quality.
4th Floor, Plot No. 74, Sheet GK-7,
M.W. Tower, M.A. Jinnah Road, Karachi, Pakistan.
Fax # : (+9221) 32331784
24/7 Allied Phone Banking: 111-225-225

(200.000) AHE 07/2015

FOR BANK USE ONLY (For Debit Card Walk-in Customers)

Please ensure that a copy of the bank statement is attached with this form and the disputed transaction is clearly marked on it.

Br. Authorized Signature
Affix Branch Stamp