



लक्ष्मी बैंक लिमिटेड
Laxmi Bank Limited

Card Dispute Claim Form

No.	Particulars	
1	Name	
2	Account Number	
3	Card Number	
4	Transaction Amount (NPR/INR/USD)	
5	Transaction Date	
6	Transaction Type	<input type="checkbox"/> ATM <input type="checkbox"/> POS <input type="checkbox"/> E-commerce
7	Dispute Type	<input type="checkbox"/> Partial Amount <input type="checkbox"/> Full Amount
8	Transaction Bank / POS (Merchant Name)	
9	Location & Country	City: _____ Country: _____
10	Copy of Merchant Slip (please attach, if applicable)	<input type="checkbox"/> Yes <input type="checkbox"/> No
11	Contact Number	
12	Email Id.	
13	Dispute Reason	<input type="checkbox"/> Quality <input type="checkbox"/> Service

- I used my Debit/ Credit card to perform transaction. However, the transaction was declined & my account debited.
 I did not participate or authorize the transaction. My card was in my possession when the transactions had occurred.
However, my account has been debited.
 Any other information (please justify):

If you have made any complain with the merchant earlier, please mention details with recent date & time

I hereby declare that the above facts are true. It is understood that in case of any error, the Bank shall be within its right to rectify the error unilaterally without notice to me/us and recover any amount wrongly paid/credited along with other transaction fees. Further, I authorize the bank to debit my account by the reversed amount if the transaction is found successful and the Acquirer/Merchant makes a presentment for the transaction.

Customer Signature:

Date:/...../.....

For Bank Purpose Only

Transaction Trace Code from Finacle:

Claim Logged Date:

Claim Ticket Number:

Verified By: Staff Name:

Signature: