



Please scan completed signed form and mail to hbmedisputes@hsbc.com
 For security reasons we advise you to send the dispute form from your registered email address with the bank

CREDIT/DEBIT CARD DISPUTE FORM

Date: //

Card Number:
 Please enter the card number on which the dispute transaction(s) has taken place

Account Number: - -
 In case of Debit Card dispute(s)

Cardholder Name: _____

Please fill in the correct transaction details for dispute transactions hereunder. You may refer to your statement for the information.
 Kindly use additional copies of the dispute form if you are unable to accommodate all the dispute transactions

No.	Transaction Date	Merchant Name (as appears in Credit Card/Account Statement)	Billing Amount
1			
2			
3			
4			
5			

I dispute the above transactions appearing on my HSBC Credit Card/Account Statement for the following reason:

(Note: Disputes should be reported to the bank within 30 days from the statement date)

- The billed amount is incorrect. I have signed for _____ Amount. (Please provide a copy of your sales slip)
- I have already been billed for the above transaction on _____ Date: DD/MM/YYYY
- I have paid for this transaction by other means. (Please provide proof of alternate 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 cancelled this on _____ Date: DD/MM/YYYY (Please provide cancellation letter sent to the merchant.)
- Credit is still not processed by the merchant. (Please provide copy of your credit voucher)
- I agree to the transaction for _____ Amount dated _____ Date: DD/MM/YYYY at _____ Merchant Name, But do not agree to the above transactions by the same merchant.
- I have neither participated in nor authorised the above transactions. The Credit/Debit Card and PIN was in my possession at all times. I authorize the bank to block my card and re-issue not re-issue a new card.

(I/We declare that none of the transactions listed above were made by me or by anyone acting upon my authority or with my consent or knowledge. Neither I nor any of the additional cardholders assigned to the account authorised or participated in all transactions disputed or received any benefit directly or indirectly from disputed transactions. I confirm that at the time of the disputed transaction/s the originally issued card was in my possession).

Dispute related comments (if any): _____

I agree to an investigation fee of AED 100* for each disputed credit card transaction if the transaction is subsequently found to be genuine. Further I endorse that I shall stand by the truth of this statement for subsequent legal enquiries by the bank/Law enforcement authorities (if any). I understand that the investigation may take upto 180 days to resolve and that the bank reserves the right to reverse any interim credit given in this regard.
 I authorise you to disclose to the police, details of any of the disputed transactions carried out on my account in order to allow them to pursue their investigations. I understand that any statements made by me may be used in court or as part of litigation proceedings.

(* Please refer to Schedule of Services and Tariffs, which can be amended time to time, and the most up-to-date version can be found on www.hsbc.ae

Please provide your contact details and preferred number where our team may contact you regarding the dispute(s)

Address: _____

 Email: _____
 Mobile: _____ Telephone: _____
 Office: _____ Fax: _____

Cardholder Signature