

ATM Transaction Dispute Form

Chargeback/Pre-Arbitration

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To,				
The Branch M	lanager,			
Bombay Merc	antile Cooperative Bank I	Limited,		
	Branch			
	City			
Name of the C	Customer			
Account no.				
Debit Card /ATM Card No.				
Mobile no.				
Transaction Date & Time	Bank & ATM Location /Merchant Shop Details / Website & Wallet Used	Transaction Type (ATM/POS/EComm (Internet)	Transactio n Amount	Disputed Amount
I am disputing	this transactions above for	the reason{s} as follows	s:	
I herebyI agree t	claration: Information provided above authourise BMC Bank to Into pay Chargeback slip retrictions of the investigation.	vestigate/correct the tra	ansaction in Di	spute.
Date:	Customers Signature:			
		KNOWLEDGEMENT		
Mr./Mrs				
	nowledge the receipt of you			
Date :	Signa	ture of Bank Officer/Mai	nager	
Time :	Name	e of Officer/Manager		

Branch Name _____