# Charge Dispute Form

Kindly take a print of this form and fill it completely if you are disputing a transaction posted to your credit card account. Your duly filled and signed form (sections A-C) must reach us either via mail, fax or e-mail (Scanned copy) within 30 days of your statement date along with all the supporting documentation (The relevant statement copy duly marking the disputed amount(s) / charge slip / correspondence / cash receipt / postal receipts etc.).

After the lapse of 30 days from your statement date, it will be construed that all transactions posted in the statement are acceptable and are in order.

## Section A - General Information:

Please provide all of the following information and sign the form where indicated:

(If the charge under dispute is incurred on the add-on cardholder card, then the declaration needs to be filled by the add-on cardholder)

**Credit Card Number:**

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## Section B - Transaction Information:

Please provide all of the following information regarding the transaction(s) being disputed:

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<th>Sr. No</th>
<th>Transaction Date</th>
<th>Merchant Name / ATM Location</th>
<th>Transaction Amount</th>
<th>Disputed Amount</th>
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## Section C - Dispute Type:

Read each of the following descriptions carefully and check the one box (1-11) that most appropriately fits your particular dispute:

- The charge has not been incurred by me and the card was in my possession at the time of transaction.
- I have been billed the wrong amount. Enclosed is a copy of my charge slip showing the amount ___________authorized by me.
- I have not incurred the above charge(s) but incurred a charge of Rs. ___________ on ___________ at the same merchant outlet (enclosed charge slip). My card was in my possession at all times.
- I have been billed more than once for the same transaction. I authorize only one charge with this merchant for the amount of ___________ on ___________.
- I have settled this charge directly with the Establishment by other means (Enclose copy of receipt issued by the Establishment, evidencing direct settlement. If the payment to the merchant is made through cheque, provide bank statement copy showing the debit. If the payment is made through any other card, please provide the statement showing the debit. If cash payment is made, please provide cash receipt).
- My account has been charged for the transaction listed above, but I have not received the merchandise or service. (Enclose is the copy of correspondence with merchant)
☐ The item purchased do not conform to what was agreed by the merchant or was defective. (Please specify as to what goods or services were expected and what were actually delivered. Enclose any documentation that supports your claim. If you have returned the merchandise to the merchant, please provide us with proof of return, such as postal / courier receipt and correspondence with the merchant)

☐ I have cancelled the subscription / membership / policy (circle one) on ___/___/___ (Please provide proof of cancellation) yet the charge is billed to my credit card.

☐ I have not withdrawn cash from ATM.

☐ Cash not dispensed at ____________ ATM or partial cash dispensed Rs. (or local currency) ______only.

☐ I have received a refund slip from the merchant; however the charges are still billed to my card account. (Enclose the refund slip)

☐ I have not incurred or authorized the charge.

☐ I have cancelled the hotel reservation under cancellation code ______ date of cancellation ___/___/___

☐ I have not made any Hotel reservations.

☐ If none of the above reasons apply: Please print this form and provide a complete description of the dispute along with your attempted resolution with the merchant. Also enclose any documentation that may support your claim.

Please Note:
On receipt of the dispute claim along with the relevant supporting documentation, we will raise the dispute with the member bank and request them to provide the details on the basis of which the disputed charge was processed to your card account. On clarification from member bank regarding the disputed charge we shall revert to you with clarifications on the dispute, which normally takes 90 to 120 days of time in accordance with VISA dispute resolution rules.

I hereby affirm that the information furnished above is true to the best of my knowledge.

__________________________     ______
Signature               Date

The form should be sent to us with the relevant supporting documents by fax/ e-mail/ courier to:

Card Customer Service - Billing Disputes
Axis Bank Ltd,
Solaris Tower ‘C’, 6th Floor,
Opp.L&T Gate No 6, Saki Vihaar Road,
Powai, Mumbai - 400072
Fax 022-40754632
Email Id: Customer.services@axisbank.com
Contact No: 1800 233 5577 or 1800 209 5577 or 1800 103 5577