



CARDHOLDER DISPUTE FORM

To,
The Manager
HDFC Bank Cards Division
PO Box No. 8654
Thiruvananthapuram P.O.
Chennai – 600041.

Please send the duly filled CDF from your registered email ID to cc.disputes@hdfcbank.com

NAME : _Mohan Suresh G

CREDIT CARD NUMBER :

4	8	9	3	7	7	2	5	0	4	3	7	3	6	0	2
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I am disputing the following transaction(s) for the reason given below and request you to settle the case(s) :

DETAILS OF DISPUTED ITEM(S) :

TRANSACTION DATE	MERCHANT NAME	TRANSACTION AMOUNT
15-11-2018	THE NGP SCHOOL	22700.0

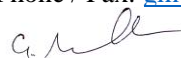
Please select the most appropriate one :

- ☐ I have neither authorized nor participated in the above transaction(s). I confirm that the card is still in my possession.
- ☐ My card was lost/stolen on _____ and the same was reported to you on _____.
- ☐ Duplicate/Multiple billing. I have done only one transaction at the Merchant Establishment but I was billed ____ times. (Attach copy of authorized chargeslip)
- ☐ I have cancelled the transaction(s)/returned the goods, but have not received credit/refund for the same (Attach Credit Voucher/Refund note/Merchant's letter or any form of merchant's confirmation that the credit is due to the card account)
- ☐ I had received defective merchandise/goods and had returned the goods to the merchant. (Attach Credit Voucher/Refund note/Merchant's letter or any form of merchant's confirmation that the credit is due to the card account)
- ☐ Paid by alternate means. I gave my card for payment, but later on paid by other means for the same transaction. I Paid by Cash (attach cash receipt/bill)/ Cheque (attach Cheque /Bank statement)/ other card (attach chargeslip/other card statement)
- ☐ Cancelled Membership/Subscription/Booking. (Attach the proof of merchant acknowledging the cancellation)
- ☐ I ordered goods/services and the same were expected to be delivered by date (dd/mm/yy)_____, but I never received the same. (Attach the proof of merchant acknowledging the cancellation)
- ☐ The transaction amount incurred/authorized by me is for Rs. 22700 but I was billed for Rs. 23021.43. (Attach copy of authorized chargeslip)
- ☐ Cash was not dispensed at the ATM but I was billed for the entire amount of Rs. _____.
- ☐ Cash was dispensed partially in the ATM for Rs. _____ but I was billed for the entire amount of Rs. _____.
- ☐ Others (Please explain in detail. Please attach a separate letter if necessary)

I declare that above given information is true and correct to my knowledge. I understand that I can be held liable for all charges incurred if dispute raised by me is found invalid. I agree to pay the charges levied by the bank for the same including the cost incurred for investigation of my claim. The Bank may contact me whenever it requires any further information.

Email/Phone / Fax: gmohansuresh@gmail.com / 9952209939

Date : 02/01/2019


Cardholder's Signature

Add-on Cardholder's Signature (If any)