DISPUTE FORM

Date: _____

Cardnumber: | | | | | | | | | | | | | | | | |

I/We hereby dispute the following transaction(s) :-

Transaction Description	Statement Date	Transaction Date	Amount (RM)
TOTAL			

Reason(s) for dispute and enclose supporting document(s) where applicable:-

☐	I/We request a Sales Draft copy for reference (A fee of RM5.00 will be levied).
☐	The above charge(s) was/were neither made nor authorized by me/supplementary cardholder. The card was in my/supplementary cardholder's possession at the time of the above transaction.
☐	I/We participated _____(times) transaction(s) amounting to _____ but was/were billed _____ (amount).
☐	Amount charged differs. I/We authorised _____ (amount) but amount debited was _____ (amount). ***Enclose proof of payment***.
☐	I/We has/have paid the charge by cash/cheque/other credit card/charge card/debit card. ***Enclose proof of payment***.
☐	I/We have not received the merchandise/service for the transaction billed above. The expected delivery of merchandise/service was _____ (date). ***Proof of sales invoice with date of delivery***.
☐	I/We have cancelled the above transaction on _____ (date). ***Enclose proof of cancellation***.
☐	Credit voucher issued by merchant was not posted into my/supplementary cardholder's account. ***Enclose copy of voucher/invoice***.
☐	I/We cancelled the reservation with the above hotel on _____ (date) and the cancellation code is _____. ***Enclose proof of cancellation***.
☐	Other (please specify):_____

1) I/We hereby authorize Malayan Banking Berhad (the 'Bank') to investigate/correct the transaction(s) in dispute.
2) I/We hereby acknowledge that upon initial investigation of the disputed transaction, the Bank may at its sole and absolute discretion credit the monies into my/our account being goodwill payment (the 'Sum') for my/our claim on the unauthorised transaction pending the finalisation of the Bank's investigation on my/our claim without admission of any liability whatsoever on the part of the Bank as to my/our claim.
3) I/We further acknowledge that in the event the Bank's investigation proves otherwise, in which the payment of the Sum would not be required, I/we hereby acknowledge that the Bank shall exercise its right to set off the Sum standing in credit of any or all of my/our banking accounts towards satisfaction of the said Sum.

Declaration:

I/We hereby agree that upon resolution of the dispute and/ or refund of the said sum, the Bank shall be discharged from all liabilities and I/we further agree that the Bank shall not be responsible for and I/we shall fully indemnify the Bank and hold the Bank harmless against all losses, costs and expenses which may be incurred by me/us or by the Bank howsoever arising in connection with the transfer made by me and any subsequent refund of the said sum. This indemnity is irrevocable until such time the Bank revokes the same. I/We hereby undertake that I/we shall not make any further claim for compensation or damages whatsoever in connection with the transfer made by me and any subsequent refund of the said sum'.

Signature:

Name:

IC No:

Contact No:

Email add:

For submission:

- Email to: disputemgmt@maybank.com.my
- Fax No: 03-79538675
- Mail to: Maybank Card Centre,
  100, Jalan Tun Perak,
  50050 Kuala Lumpur.

Kindly submit this form to us within 20 days from closing date of billing period else we will assume the charge(s) is in order.