

# Transaction Dispute Form

Please send form to BankVic via:

✉ cards@bankvic.com.au

✉ Post form to "BankVic Card Disputes Reply Paid 90210 Melbourne VIC 8060"

By completing this form, you acknowledge we are collecting your personal information to respond to your query. For further details about how we manage your personal information, including how you can access or correct your personal information and make a privacy complaint, please read our [Privacy Policy](#) available at bankVic.com.au/privacy

By completing this form, you are accepting that your Card(s) will be blocked permanently where the disputed transaction(s) took place. Please keep a copy of this completed form and original documentation.

## A. Cardholder details.

Title	<input type="checkbox"/> Ms <input type="checkbox"/> Miss <input type="checkbox"/> Mrs <input type="checkbox"/> Mr <input type="checkbox"/> Dr	Card Number (Last 8 digits only)	<input type="text"/>
	<input type="checkbox"/> Other <input type="text"/>	Expiry Date	<input type="text"/> / <input type="text"/>
Surname	<input type="text"/>	Email	<input type="text"/>
Given name/s	<input type="text"/>	Phone no	<input type="text"/>
Date of birth	<input type="text"/> / <input type="text"/> / <input type="text"/>		
Residential Address	<input type="text"/>		
State	<input type="text"/>	Postcode	<input type="text"/>

## B. Reason for Investigation.

Select one of the following options regarding your dispute and complete the blank fields associated with that option:

1. I did not authorise the transaction(s) that are appearing on my card. The card is currently: **In my possession / lost / stolen**
2. I only authorised one of the transaction(s) that are appearing on my card (e.g. there is a duplication of the same transaction).
3. I used another method of payment for the transaction I wish to dispute.
4. I engaged in the transaction(s) but did not receive the goods/services ordered (including online subscriptions). I have attempted to make contact with the selling merchant directly.
5. I engaged in the transaction but the goods/services received were not as described or agreed upon. I have attempted to return the goods/services to the selling merchant.
6. Other (specify the reason):

## C. Disputed transactions.

I wish to dispute the following transactions:

Date/Time	Transaction / Merchant Details (including type of transaction and location)	Amount (\$)
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$

## D. Details.

Please attach copies of vouchers or transaction receipts and any other documentation that may assist us in our investigation. Please give details about the transaction(s) requiring investigation. Specify the exact nature of the dispute and if any contact has been made with the merchant involved and the outcome.

Please answer the following questions:

1. Were the cards signed?  Yes  No

2. Do you suspect someone?  Yes  No

If yes, provide details of the suspect including full name, relationship, address and/or description:

3. Do you believe the card was stolen?  Yes  No

If yes, provide details of the date/time of theft, location and how the theft occurred:

4. Have you reported the stolen card to the police?  Yes  No

If yes, provide details of the Police Station, office name and contact number:

5. Are other individuals authorised to use the bank account associated with the dispute?  Yes  No

If yes, provide details of the authorised individuals including full name:

6. What was the last authorised transaction performed on the card?

7. Have you given your PIN at any time to make a transaction or ATM withdrawal on your behalf?  Yes  No

If yes, provide details:

8. Do you have a record of the PIN?  Yes  No

If yes, provide details of how and where the PIN was recorded (do not provide your PIN):

9. Has the record containing your PIN been lost or stolen?  Yes  No

If yes, please provide details of how the record was lost or stolen including the date/time:

10. Have you ever provided your PIN and card number in response to an email?  Yes  No

If yes, provide details:

11. Are the PIN(s) disguised?  Yes  No

12. Have you ever selected your own PIN(s) through Internet Banking or via the BankVic app?  Yes  No

13. Where is/are the Card(s) kept daily?

14. When you received the PIN(s) advice from BankVic, did you destroy the original?  Yes  No

15. Have you taken any steps to ensure the security of transactions that you consider relevant?  Yes  No

16. Are there any other factors or surrounding circumstances which you believe should be taken into account when BankVic considers whether you are liable or partially liable for disputed transactions? Include such circumstances as delay in notification, how the loss occurred or any other details you consider relevant.

## E. Declaration.

I request the Bank to investigate this claim and declare that the details are true and correct to the best of my knowledge.

I acknowledge and agree that personal information which may at any time be provided to the Bank in connection to my dispute may be used by the Bank in investigating the dispute and may be disclosed by the Bank for that purpose to others (including the Bank's agents and any relevant authority, in either case here or overseas)

I acknowledge the matter may be referred to the Police for further investigation.

Full Name

Signature

 /  / 

Date

## F. Next steps.

1. Ensure you have requested a stop on your card if your card or PIN are stolen or your PIN has become known to another party.
2. If you require replacement cards, please call BankVic 13 63 73.
3. Your dispute will be settled in accordance with BankVic's Terms & Conditions and the ePayments Code.
4. Where we are required to do so, we normally re-credit your card within 10 days, although there may be a delay while our investigations are completed. Investigations usually take a maximum of 45 days from receipt of all information. However in exceptional circumstances we may advise you in writing if this time limit is to be exceeded.
5. A copy of this form should be retained until the dispute has been resolved. Please contact BankVic 13 63 73 if you have any queries in relation to this dispute.

### **ONLY COMPLETE THE STATUTORY DECLARATION ON PAGE 4 IF**

Your card was physically lost or stolen/skimmed. Complete the attached Statutory declaration including as much information as you can regarding the circumstance of what has occurred and when you noticed the fraud.

# Commonwealth of Australia STATUTORY DECLARATION.

Statutory Declarations Act 1959 Details of person making declaration.

Surname:  Given name/s:

Address:

Occupation:

I, as the person named above, make the following declaration under the Statutory Declarations Act 1959:

I understand that a person who intentionally makes a false statement in a statutory declaration is guilty of an offence under section 11 of the Statutory Declarations Act 1959, and I believe that the statements in this declaration are true in every particular.

Signature of the person making the declaration

 /  / 

Date

Declared at (town/city where signed)

 /  / 

On (date)

Before me (signature of witness)

Witness surname:  Witness given name/s:

Witness address:

Qualification:

Note 1. A person who intentionally makes a false statement in a statutory declaration is guilty of an offence, the punishment for which is imprisonment for a term of 4 years — see section 11 of the Statutory Declarations Act 1959.

Note 2. Chapter 2 of the Criminal Code applies to all offences against the Statutory Declarations Act 1959 — see section 5A of the Statutory Declarations Act 1959.