


# Customer Investigation Request for Disputed Corporate Card Transactions



 Please keep a copy of this completed form and original documentation.

- The signed form must be sent to the address indicated.
- If acknowledgement of your fax is not received within 5 days please follow up.
- Please acknowledge your account maybe stopped and reissued as required.

**Please return completed form to:**  
 Premium Service Centre, Operations Processing Centre, Reconciliations and dispute.  
 Facsimile number 1300 729 512

**Section 1 – Account Details**

Credit Card account number	Company name	Facility number
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>
Title		Surname
<input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/> Other		Initials
<input style="width: 95%;" type="text"/>		<input style="width: 95%;" type="text"/>

**Section 2 – Type of disputed transaction (please tick as appropriate)**

I did not authorise the transaction(s) nor did any other party to this account.  
 Please acknowledge your acceptance of us stopping your account before we can investigate the dispute , a new card will be issued. We cannot commence with investigation until the card has been stopped.

I have not completed a transaction for the same amount with a different merchant.

I only authorised one of the transactions (apparent duplication).


I did engage in the transaction but did not receive the goods/services ordered (mail/telephone order).  
 I have contacted/attempted to contact the merchant without success.

I have cancelled the authority with the merchant but my account is still being charged.  
 I enclose a copy of my letter of cancellation to the merchant and confirm the authority was cancelled on

The attached credit voucher has not been credited to my account.

I used another method of payment for this transaction, not the above credit card account and I enclose my proof of payment.

Other (e.g. amount(s) incorrectly processed).


 **Please attach copy of voucher(s) and any other documentation available that may assist us in our investigation.**

**Section 3 – Please specify the exact nature of the dispute and if contact has been made with the merchant involved.**

**Section 4 – Details of disputed transaction(s) as they appear on your statement. Please attach a copy of statement(s) if available.**

Date	Reference number	Merchant description	\$ Amount

I authorise the Bank to stop my account as required and correct the transaction(s) in dispute.

 We cannot commence with this investigation if the account is not stopped.

Cardholder signature	Date	
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	
Address		
<input style="width: 95%;" type="text"/>		
State	Postcode	
Home telephone number (incl STD area code)	Business telephone number (incl STD area code)	Email address
<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>