

CUSTOMER DETAILS

بيانات العميل

Customer Name اسم العميل
Account Number رقم الحساب
Card Number رقم البطاقة
Contact Number رقم الاتصال

TRANSACTION DETAILS

تفاصيل العمليات

رقم No.	المبلغ Amount	العملة Currency	إسم التاجر أو البنك "كما يظهر في كشف الحساب" Merchant/Bank Name "as it appears in the statement"	تاريخ العملية Transaction Date

Via عن طريق
Dispute Reason سبب المطالبة
Remarks ملاحظات

CLIENT AGREEMENT

موافقة العميل

Important: Please attach copies of any documents or receipts that support your claim, lack of it may delay resolution of your dispute.

هام: الرجاء إرفاق أية مستندات أو إيصالات قد تدعم المطالبة، وفي حالة عدم تقديمها سيؤدى ذلك لتأخير عملية المطالبة

- I authorize AlRayan Bank to Debit my account with a Retrieval Fee of QAR 75.00 for each dispute transaction if the disputed transaction is invalid.
- In case the transactions are genuine and prove to be mine in the future, I hereby authorize the bank to re-debit my account with such transaction/amounts along with related charges, if any.
- I hereby authorize AlRayan Bank to investigate about the above transactions.

- أفوض بنك الريان بخضم ٧٥ ريال قطري لكل عملية عليها مطالبة في حالة ثبت أن المطالبة غير صحيحة
- في حالة ثبوت صحة هذه المعاملات مستقبلاً وتعلقها بي فإنني أفوض بنك الريان بإعادة قيد تلك المبالغ وما أضيف إليها من رسوم
- أفوض بنك الريان في التحقيق في المعاملات الموضحة أعلاه.

I Confirm the Card was Always in my Possession ☐ No ☐ Yes ☐ نعم ☐ لا ☐ أؤكد بتواجد البطاقة بحوزتي بشكل دائم

Fees	الرسوم	Request Date	تاريخ الطلب	SV	مصادقة التوقيع	توقيع العميل Signature
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FOR BANK USE ONLY

لإستخدام البنك فقط

Staff ID#	Signature	مدير الفرع أو نائبه Branch Mgr/Asst Mgr	Staff ID#	Signature	موظف خدمة العملاء CSR
Staff ID#	Signature	مدقق الطلب Application Checked	Staff ID#	Signature	قسم البطاقات Card Centre

Dispute Reason:

- ☐ Transactions NOT recognized. (required Clarification)
- ☐ Unauthorized Transaction
- ☐ Decline Transaction
- ☐ Cancelled Recurring Transaction
- ☐ Cancelled Merchandise/Services
- ☐ Incorrect amount billed
- ☐ Incorrect currency
- ☐ Incorrect transaction code
- ☐ Duplicate Transactions
- ☐ Credit not processed. (Question need to answer:)

– The Transaction Processing Date: _____

– The date on the Credit Transaction Receipt: _____
(required attached a copy of credit Receipt)

☐ Paid By Other Means (Question need to answer)

☐ Paid cash
(required attached copy of cash)

☐ Use card for another bank
(required attached copy of cash)

☐ ATM Cash – cash not Dispensed from the ATM

☐ ATM Cash deposited / Partly deposit – Amount Deposited in the ATM but the amount not Credited
(Question need to answer)

– Account Type: ☐ Current

☐ Saving account

– Card type: ☐ Credit card

☐ Debit card

☐ Prepaid card

☐ Salary card

– Total amount deposited:

– Any note return back from ATM:

☐ Amount Debited, the Goods or Services are not Received

(Ensure Before initiate a Dispute, the Cardholder must attempt to resolve the dispute with the Merchant)
(Question need to answer)

– What was purchased or Services: _____

– Who canceled the goods / service?

☐ The merchant

☐ The cardholder

– Did the card holder submit a request to cancel the good or service Before the date of delivery?

☐ Yes

☐ No

– Provide us the Transaction Date, & the date the services were expected or the delivery date for the merchandise
is not specified date of expected receipt: _____

– Was the merchandise returned? ☐ Yes

☐ No

(If yes: Date of merchandise returned (required attached a copy of receipt for Q-post))

– Was the service/ order cancelled from merchant side?

☐ Yes

☐ No

– Did the cardholder attempt to resolve with the merchant?

☐ Yes

☐ No

(required attached a copy of corresponding letter / emails if available)

☐ Other Reasons: _____

(any dispute case not cover above reason code)