

Declaration: I hereby confirm that the averments made by me within this form are bona-fide and the information provided is true and accurate to the best of my knowledge and belief. In case this claim is determined by the bank to be false or misleadingly made, I shall be fully responsible for the consequences which may include civil/criminal lawsuit being initiated by the bank. I also understand that if the disputed transaction turns out to be valid then a transaction retrieval fee per transaction will be charged to my account.

Cardholder's Name	:	Place	:
Signature	:	Date	:
Email	:	Landline / Mobile No	:

For Branch use only

Branch Name:

Branch Manager Sign:

Forward To HO Date:

(Stamp of Branch)

For Head Office Use only

Request Received date :

Officer Name:

Official Sign :