

DISPUTE FORM

Please email the completed form to uaeservice@alahli.com
or call 800 55000 for any clarifications

Customer Name			
Account Number		Date	dd / mm / yy
ATM card Number			

ATM Cash Deposit
I/We have deposited cash in your ATM machine and haven't received the credit in my above mentioned account. Kindly investigate and arrange to credit the same to my account

DETAILS	DENOMINATION/NO.	AMOUNT
Amount	1000x	
	500x	
Date and Time	200x	
	100x	
Location	50x	
	20x	
Machine ID / ATM ID	10x	
Additional Information		

ATM withdrawal
I/We have attempted to withdraw cash from an ATM and did not receive the same although my account was debited for the withdrawal. Kindly investigate and arrange to credit the same to my account

Amount Requested		Amount Received	
Date		Time	
ATM Bank Name			
Machine / ATM ID			
Transaction Reference No			
Additional Information			

Debit Card purchases (POS/Online)
I/We would like to dispute the below transaction. Kindly investigate and arrange to credit the same to my account

	I did not authorize or perform the below transaction. My Debit card was lost/stolen/in my possession all the time
	I received a refund for below transaction but the refund has not been applied to my Debit Card/Account
	I cancelled the transaction but amount has been charged to my Debit Card/Account
	My Debit card was lost <input type="checkbox"/> stolen <input type="checkbox"/> in my possession all the time <input type="checkbox"/>

Transaction Amount		Date of Transaction	
Merchant Name			
Transaction Reference No			
Additional Information			

NOTE: Please attach copies of any documents to support your claim. Lack of documentation may delay resolution of your dispute.

Customer Signature

FOR BANK USE ONLY

Maker Name:		CRM Reference:	
Signature:		Assigned to:	