



CUSTOMER INVESTIGATION REQUEST – CREDIT CARD TRANSACTIONS

Return the form by using the document upload feature at cardservicesdirect.com.au/upload or
 Post to: Credit Card Disputes, Transaction Services, GPO Box 40 SYDNEY NSW 2001

Customer Name		Card Number	
File reference		Amount	
Transaction Date	Merchant Name		Reference

I dispute the above mentioned transaction for the following reason **[Please tick one box only]**

<input type="checkbox"/>	Unauthorised Transaction – Transaction not authorised by Primary or Additional Cardholder. The card (was / was not) in my possession at the time of the transaction. NOTE – The Credit Card will be cancelled and a replacement card will be issued (subject to replacement card eligibility policy).
<input type="checkbox"/>	No Knowledge – Need a copy of the voucher to identify the transaction.
<input type="checkbox"/>	Duplicate billing – I was charged more than once for a single authorised transaction. I authorised \$ _____
<input type="checkbox"/>	Non-receipt of Goods OR <input type="checkbox"/> Services Not Rendered Goods/Services for the transaction were not provided due to the inability/unwillingness of the merchant. Goods/Services were to be provided on _____. I have attempted to resolve this dispute with the merchant and/or merchant’s liquidator. <u>Documentation Required:</u> A copy of the transaction receipt or other documentation containing a written description of the merchandise or services. -Communication proof that you attempted to resolve the dispute with the merchant, OR -Documentation proving that the services will not be rendered. i.e. media coverage, a written notice from the merchant or their liquidators. Note: Disputing arising due to the quality of goods or services received cannot be disputed
<input type="checkbox"/>	Refund/Credit Not Processed Credit transaction receipt issued but credit not processed to my account. <u>Documentation Required:</u> Please enclose a copy of the original credit transaction receipt and /or letter from the merchant stating credit authorised.
<input type="checkbox"/>	Goods returned to the merchant or services cancelled but refund not processed. <u>Documentation Required:</u> Communication proof that you attempted to resolve the dispute with the merchant, AND -Proof of return/cancellation when you returned or cancelled goods/services, including the tracking number.
<input type="checkbox"/>	Not As Described OR <input type="checkbox"/> Defective Merchandise OR <input type="checkbox"/> Counterfeit Merchandise <u>Documentation Required:</u> Please enclose proof that merchant received the returned merchandise i.e. Registered mail receipt or courier invoice signed by the merchant upon receipt of the goods. -A copy of the transaction receipt or other documentation containing a written description of the merchandise purchased. -Explanation of what was not as described or defective. -Communication proof that you attempted to resolve the dispute with the merchant. -Counterfeit Merchandise – Evaluation / certification evidence from a qualified third party person or entity which validates the goods as counterfeit.
<input type="checkbox"/>	Cancelled Membership/Subscription – Date Cancellation was made _____. <u>Documentation Required:</u> Please provide copy of cancellation notice to the merchant. A copy of the merchant terms and conditions and/or the merchants refund/cancellation policy. Note: Refund can only be requested if your account is debited 15 calendar days after cancellation date.
<input type="checkbox"/>	Paid By Other Means – the transaction was charged to my account and was also paid by other means. <u>Documentation Required:</u> Please enclose proof of payment by other means i.e. cash receipt, cardholder copy of other credit/charge card transaction receipt.
<input type="checkbox"/>	Processing Error – Amount charged is incorrect, the transaction amount should be \$ _____. <u>Documentation Required:</u> Please enclose transaction receipt confirming the correct amount.
<input type="checkbox"/>	Cancelled Accommodation – Accommodation was booked and cancelled according to cancellation policy Cancellation date _____ with Cancellation number _____. <u>Documentation Required:</u> Please provide proof of cancellation and a copy of the merchants terms and conditions or the merchants refund/cancellation policy.
<input type="checkbox"/>	Other – If your dispute does not fall in to any of the above categories, please attach a detailed explanation of the circumstances surrounding your dispute and enclose relevant supporting documents.
<input type="checkbox"/>	I no longer dispute this transaction, because _____ and accept the charge

I authorise Card Services to investigate/correct the transaction(s) in dispute. Where applicable I enclose relevant supporting documentation requested above.

------(Signature) ___/___/___ (Date) -----(Signature) ___/___/___ (Date)
 Primary Cardholder Additional Cardholder