ELECTRONIC CHANNEL DISPUTE FORM

CUSTOMER INFORMATION

NAME

CONTACT #

CELL #

ADDRESS

CHANNEL

☐ RETAIL INTERNET BANKING

☐ ABM/POS

☐ CREDIT CARD (INTERNET)

TRANSACTION INFORMATION

CARD NUMBER

(First 6 digits)

ACCOUNT NUMBER

(Last 4 digits)

USER ID

EMAIL ADDRESS

CUSTOMER’S REPORT

PLEASE ANSWER THE FOLLOWING QUESTIONS:

1. WAS YOUR CARD LOST?  

   YES  NO

2. WAS YOUR CARD STOLEN?  

   YES  NO

3. WAS YOUR PERSONAL IDENTIFICATION NUMBER (PIN) WITH THE CARD?  

   YES  NO

4. a. WAS YOUR PIN WRITTEN ANYWHERE? IF YES, WHERE?  

   YES  NO

   b. WAS INTERNET BANKING PASSWORD WRITTEN ANYWHERE  

      YES  NO

5. a. HAVE YOU EVER ALLOWED ANYONE ELSE TO USE YOUR CARD? IF SO, WHO?  

      YES  NO

   b. HAVE YOU ALLOWED ANYONE ACCESS TO YOUR INTERNET BANKING ACCOUNT  

      IF SO, WHO  

      YES  NO

ORIGINAL SIGNED BY CUSTOMER  

☐
IF YOU ANSWERED “YES” TO #1 OR #2, PLEASE ANSWER THE FOLLOWING:

A. WHEN DID YOU FIRST REALIZE YOUR CARD WAS MISSING?

DATE \nTIME \nLOCATION

B. DID YOU NOTIFY THE POLICE?  YES  NO

STATION NAME

I declare that the foregoing is true and correct.

I authorize National Commercial Bank Jamaica Limited to release to the police information relating to this transaction and agree to indemnify, release and hold the bank harmless in all actions, proceedings and claims and in respect of any damages, costs and expenses whatsoever in relation thereto.

I understand that:

i. provisional credits may be processed after submission of complaint

ii. notwithstanding the provisional credit, NCB reserves the right to return the item up to twenty-one (21) days after presentation, if the claim is found to be invalid, at which time my account will be debited.

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SIGNATURE  DATE  

INTERNAL USE ONLY (TO BE COMPLETED BY BANK OFFICIAL)

NAME OF CSR  BRANCH  DATE  LIABILITY

BANK  □  CUSTOMER  □

CARD NUMBER  DATE  TIME  REASON CODE

(First 6 digits)  (Last 4 digits)

RESOLUTION  DATE RESOLVED

REIMBURSED  □  DECLINED  □

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EMPLOYEE SIGNATURE  ID NO.  

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