HSBC/HSBC Amanah Dispute Form

To Dispute Section (E-mail: chargebackdisputecpd@hsbc.com.my)

I am disputing the following transaction(s) debited to my account (see below):

Transaction Date	Merchant Name	Transaction Amount
D D M M Y Y Y Y		
D D M M Y Y Y Y		
D D M M Y Y Y Y		
D D M M Y Y Y Y		

Dispute Reason(s):

Please Tick as appropriate (√)

- ☐ I require a copy of the sales draft/ transaction receipt for my record. (RM20.00 will be charged for each sales draft)
- ☐ I confirm the transaction charged was not authorised by me. The card/-i was in my possession at the time of the transaction.
- ☐ I have incurred RM _____ on _____ BUT not the above amount. I enclose copy of my duly signed original sales draft.
- ☐ I have been charged _____ times for the same transaction.
- ☐ I made the hotel reservation BUT have since cancelled it. I enclose a copy of my hotel cancellation letter and the cancellation code given by the hotel.
- ☐ I was billed with an incorrect original transaction currency. It should be _____ and not _____ .
- ☐ I have paid in full by cash/ cheque/ other card. I enclose the cash receipt, cheque number or other card account statement as evidence of the payment being made by on alternate means.
- ☐ I have not received the refund for the enclosed credit slip provided by the merchant.
- ☐ I placed the order BUT no goods/ services have been received from the merchant to-date. I enclose the order form with the agreed delivery date for the goods/ services.
- ☐ I received the goods/ services BUT they are different from what is specified in the order form. I enclose a copy of the invoice/ receipt which showed the exact description of the goods/ services that I have ordered.
- ☐ I have received the goods/ services BUT the goods/ services delivered are defective OR unsuitable for the purpose sold. I enclose a copy of my letter that is self-explanatory of this matter.
- ☐ I have duly notified the above merchant to cancel my monthly/ quarterly/ yearly membership subscription OR my takaful contribution/ insurance premium by ☐ letter ☐ facsimile or ☐ e-mail and yet I was billed. I enclosed is a copy of my cancellation notification to the above merchant.
- ☐ Other Dispute – Please specify:

My Contact Telephone Number: _____

Cardholder/ Customer Name: _____

Credit Card/-i or Debit Card/-i No*: _____
(*please delete where not applicable)

Signature: _____

Date: D D M M Y Y Y Y

NB: Kindly complete and return the dispute form via e-mail to chargebackdisputecpd@hsbc.com.my within 3 business days from the day the cardholder/ customer contact the Bank to enable the Bank to proceed with dispute resolution failing which may result in delay and/or result in you being deprived of the right to recovery of the above disputed transaction(s) amount(s) from the merchant via Chargeback processes.

Warning: It is the responsibility of cardholders to make accurate, complete and truthful claims. The Bank reserves the right to take action against cardholders for any attempt to make false claims on disputed transactions.

Validate & Print

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