

Visa Credit/Debit Card disputed transaction form



About this form

You can use this form to dispute a transaction with a merchant.

Don't use this form if you believe the transaction is fraudulent – call 133 464 immediately. For example, if:

- you don't recognise the transaction or merchant
- you don't remember making this purchase
- you haven't authorised or participated in the transaction(s)

Step 1: Cardholder details

Name

Client number Account number

Visa Debit/Credit Card number
 * * * * *

First 4 digits Last 4 digits

Step 2: Disputed transaction details

| Date | Transaction details | Amount (AUD) |
|--|----------------------|-------------------------|
| <input type="text"/> / <input type="text"/> / <input type="text"/> | <input type="text"/> | \$ <input type="text"/> |
| <input type="text"/> / <input type="text"/> / <input type="text"/> | <input type="text"/> | \$ <input type="text"/> |
| <input type="text"/> / <input type="text"/> / <input type="text"/> | <input type="text"/> | \$ <input type="text"/> |
| <input type="text"/> / <input type="text"/> / <input type="text"/> | <input type="text"/> | \$ <input type="text"/> |
| <input type="text"/> / <input type="text"/> / <input type="text"/> | <input type="text"/> | \$ <input type="text"/> |
| <input type="text"/> / <input type="text"/> / <input type="text"/> | <input type="text"/> | \$ <input type="text"/> |

Please tick **ONE** box below, complete the details and attach the supporting documents.

Duplicated transaction or incorrect amount

I only authorised one transaction for \$ on / / . It appears to be duplicated or processed for the incorrect amount.

Please attach supporting documents:

- Evidence of quoted amount (e.g. quote), confirmed amount (e.g. sales invoice) or consent to charge an amount on your card (e.g. tax invoice)
- Evidence of another payment method, if applicable (e.g. by cash or a different card)
- All relevant correspondence (e.g. emails) with the merchant including dates

Cancelled recurring transactions

The merchant was authorised to deduct regular payments from my account. However, I've cancelled or attempted to cancel my authority on / / .

Please attach supporting documents:

- Evidence of cancellation prior to the transaction (e.g. email, letter)
- All relevant correspondence (e.g. emails) with the merchant including dates

Returned goods or cancelled services

The goods were returned, or the services were cancelled on / / .

A credit for the amount of \$ was due to be processed to my card/account on the / / .

Please attach supporting documents:

- A copy of a tax invoice for the goods or services purchased
- Evidence of return of the goods (e.g. return authorisation or tracking information)
- All relevant correspondence (e.g. emails) with the merchant including dates

Goods or services not received

I have not received the goods or services I have paid for. They were expected on / / . I have contacted the merchant to try and resolve this matter. My last contact was on / / .

Please attach supporting documents:

- A copy of a tax invoice for the goods or services you bought
- Evidence that the merchant is under administration, if applicable (e.g. notification from the liquidator)
- All relevant correspondence (e.g. emails) with the merchant including dates

Goods or services damaged, defective or not as described

The goods or services I have paid for were damaged, defective or not as described. I returned the goods or cancelled the services on / / . I have contacted the merchant to try to resolve this matter on / / .

Please describe and provide evidence (e.g. invoice) of damage/defective/not as described goods or services.

Please attach supporting documents:

- A copy of a tax invoice for the goods or services you bought
- Evidence of goods or services ordered vs what was received (e.g. description and pictures showing the difference)
- Proof the goods have been returned (e.g. return authorisation or tracking information). If not returned, please provide the reason
- All relevant correspondence (e.g. emails) with the merchant including dates

Step 3: Additional information

Please provide any additional information that may assist with your dispute.

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Step 4: Your signature

Primary cardholder's signature

Date (dd/mm/yyyy)

 / /

Additional cardholder's signature (if relevant)

Date (dd/mm/yyyy)

 / /

Step 5: What to do when you have completed this form

Please send the completed form and documents to:

Email: card.investigations@ing.com.au

Mail: ING Payments Services
GPO Box 4094
Sydney NSW 2001

We'll investigate your transaction and respond to you within 10 business days. To speak with us about your dispute, we're here on **133 464**.