

CHARGEBACK APPLICATION FORM FOR WITHDRAWAL TRANSACTION ON OTHER BANKS ATM

Date: / /201_

From,
Mr./Ms:-
Branch:-
Account No.:- SB/CD
ATM Card No:-

To,
The Incharge,
Abhyudaya Co Op Bank Ltd,
BRANCH

Sub: Non receipt of CASH from Other Bank ATM

UNSUCCESSFUL Transaction Details:

	1st TXN	2nd TXN	3rd TXN
DATE of Transaction			
Time			
Name of BANK			
ATM Location			
ATMID			
Transaction Number			
Amount			

Kindly do the needful to credit my account with **Rs.**_____

Thank you,

Your Faithfully,

Mr./Ms_____
Mobile No:-

(*NOTE:- FOR MORE THAN SINGLE UNSUCCESSFUL TRANSACTION USE 2nd TXN AND 3rd TXN column)