

CLAIM FORM

CARDHOLDER AND CLAIM DETAILS

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	Name	Surname		Last name
Card number N ^o				
	Please write down the first four and the last four digits of your card number			
			MM	YY

Expiry date:

Details of the disputed transactions:

Transaction date	Transaction amount and currency	Merchant name	Country	Address

In case of more than 3 transactions, please fill in a few first pages of the claim form!

REASON

Please mark with X where it is necessary

- The above mentioned transaction was processed without my knowledge and authorization:
 - I declare the card has always been in my possession and I have not provided it to other people.
 - The card was lost / stolen (underline the valid circumstances) on date/.....
- The above mentioned transaction is processed without my knowledge and authorization. I used the card at the same merchant/merchant outlet before and attach a transaction receipt.
- The amount of the transaction above is different from the amount of the payment I made. I herewith attach a copy of the original transaction receipt.
- The currency of the transaction above is different from the currency of the payment I made. I herewith attach a copy of the transaction receipt.
- The above transaction has been posted in a currency I do not agree with. During the transaction I was refused to pay in local currency.
- The above transaction is an ATM transaction attempt and:
 - The transaction amount was not disbursed;
 - The terminal disbursed (specify the amount received in the original transaction currency),
Instead the requested..... (specify the requested amount in original transaction currency)
- The above transaction duplicates another one I made at the same merchant location/ATM.
- The amount of the above transaction was paid(please specify the payment method) but now appears on my monthly statement.
- The transaction above should be a credit transaction, which I've been provided with a credit voucher for, but the amount has not been posted to my card account yet.
- The transaction was performed with my participation/authorization but I have not received/ have partially received the merchandise/service (underline the correct option for your case). I herewith attach documents supporting my claim.
- I authorized the transaction but the merchandise/service received turned out to be defective/not as described/ damaged (underline the correct option for your case) and it has been returned to the merchant. I herewith attach documents supporting my claim.
- The transaction above is a recurring payment I have canceled on time. I herewith attach documents supporting my claim.
- Other (please specify):

I declare, that I have been informed that in case of bad claim I own a fee according current "Tariff for fees and commissions of UniCredit Bulbank AD". I would like to be reimbursed with the disputed amount.

Signature

Date/.....

PLEASE ANSWER THE FOLLOWING QUESTIONS:

(TO BE COMPLETED IN CASE OF UNRECOGNIZED / UNAUTHORIZED TRANSACTIONS)

1. Describe the way you keep your card:

.....
.....

2. Describe the way you keep your PIN code:

.....
.....

3. Do other people have access to your card, if so, please specify:

.....
.....

4. Have you provided your card to other people, if so please specify:

.....
.....

5. When and under what circumstances you found out the lack of funds and what actions did you take?

.....
.....

6. Have you ever used your card at this/these merchant/s:

.....
.....

7. Have you informed the local police department for lost /stolen or unrecognized transaction/s:

.....
.....

****If there are more clarifications or documents, please attach them in free text to claim.***

Signature.....

Date/.....

CARDHOLDER CONTACT DETAILS :

Name Personal ID:
Address:
Phone: E-mail

UNICREDIT BULBANK EMPLOYEE DETAILS:

Employee: Branch: Code:
Telephone: Signature:

! In case of non-recognized/unauthorized transaction the card shall be blocked and the following additional documents shall be provided to us:

- A copy of the I.D. card/international passport - all pages shall be photocopied (in case the transactions have not been performed online and have been performed in a country that is not member state of the EU);
- Statement of Acceptance of a card delivered to the branch card with date and hour of its returning;
- A copy of the destroyed card - front and back;

! In case of lost or stolen card Customer must inform the Local police authority and provide a copy of police report to the Bank!

IN CONNECTION WITH THE CLAM FORM I ENCLOSE THE FOLLOWING ADDITIONAL DOCUMENTATION:

1.
2.
3.

Signature

Date/.....