

Customer's Complaint / Request Form for Debit Card or ATM transactions

ATM Withdrawal failed transaction—Complaints to be lodged by Jamia Co-operative Bank Customer only

Please fill the following Form with all the necessary details and hand it over to Branch Manager

	Franch Manager,														
	Co-operative Bank Ltd.														
Branch (Branch where cardholder account is maintained which is linked to ATM card) 1. Customer Information															
1.		Cus	tome	r Inf	orm	atio	1								
	Name		1	1	1						-				
	Account No.													\sim	
	Card Number											Ш	\perp		
2.	ATM Information														
	ATM ID/Location, if ID is not available:														
	Name of the ATM Bank:														
3.	Nature of the Complaints / Request														
	a) Complaint relating to Cash withdrawal:														
	Amount requested for withdrawal : [Rs]														
	Amount actually disbursed at ATM: [Rs] Amount to the account debited : [Rs] Date of transaction : [/ /] (dd/mm/yyyy) Time of transaction : []														
	Date of transaction : [/ /] (dd/mm/yyyy)														
	Time of transaction :]										
	b) Cond Conture by ATM . []														
b) Card Capture by ATM: []															
	c) Other Request :														
	Block / Un-Block Card PIN-Regeneration* Issue Duplicate Card*														
4.	Register for ECOM (Online Transaction)														
	Mobile No. for receiving OTP (One Time Password)														
	+91														
Date:/															
Signature of the Card Holder Contact Tel/Mobile No															
		For Br	ranch	use	only	,									
(Please verify details before forwarding. Application with incomplete information will not be processed)															
Name of Verifying Officer															
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Signature of Verifying Officer (Branch Stam						amp	/Seal	l)							

^{*}Charges Applicable for PIN-Regeneration and Duplicate card Issue.