



STATEMENT OF DISPUTE

Fax : 03- 2711 4144

Email: customer.service@aeoncredit.com.my

Section A: Customer Information

Card Number					
Agreement No.	<i>(if not card related dispute)</i>				
Customer's Name					
Contact No.		House		Office	Mobile
Email Address					

Section B: Disputed Transaction (for card related dispute only. Please continue on blank sheet if more than 3 transactions)

I have examined the charge(s) made to my account and I wish to dispute the transaction(s) listed below:-

No.	Transaction Date	Merchant Name	Amount (RM)
1.			
2.			
3.			

Section C: Reason for dispute (Please tick one only)

Description of Dispute	Required Documentation (Mandatory)
Duplicate billing: I was charged more than once for a single transaction.	-
Non-receipt of goods/Services Not Provided: Date goods/services expected by _____. I have attempted to resolve with the merchant on _____ and the merchant's response was _____	Proof of expected delivery of goods/services
The goods/ services received were broken/defective/not as described and I have attempted to resolve with the merchant on _____ and the merchant's response was _____	Proof of goods/ services returned/not as described
Refund/Credit not processed: I did not receive credit for the cancelled/unsuccessful transaction.	Credit note, void slip, refund confirmation by merchant, etc
Cancelled recurring transaction/membership/subscription: I have notified merchant to cancel charge/monthly/yearly subscription on _____.	Proof of cancellation i.e. letter, email, chat record, etc)
Paid by other means: The transaction was also charged to my account but I have paid for it in cash/via cheque/by other credit cards.	Cash receipt, sales draft, etc
Incorrect amount: Amount charged is incorrect; the transaction amount should be _____ and not _____.	Copy of the sales draft
Do not recognize the said transaction(s). I would like to request sales draft copy for reference.	-
Unauthorized transaction(s): I confirmed that the transaction(s) was not authorized by me. My card was in my/our possession at the date and time of the transaction(s).	-
My card was lost/stolen. I confirmed that the physical card which I had safe kept in _____ is no longer in my possession since _____.	A copy of Police Report
Others (Please Specify)	Relevant document (if any)

Dispute Conditions:

Please ensure ALL the following are fulfilled, failing which you may be delayed/deprived of the right to recover the above disputed amount.

1. The completed form(s) must be returned to AEON Credit **within 3 business days** upon first dispute complaint notified to our Customer Care Centre.

Additionally for cardholder:-

2. Dispute must be lodged **within 14 days of the monthly statement date** and complete **documents MUST be provided**

3. In the event that the investigation(s) reveals or indicates that the cardholder is liable for any disputed transaction(s), the **Sales Draft Retrieval Fee of RM15.00** applicable for Credit Card and Prepaid Card respectively for each sales draft shall be levied to your account.

4. AEON Credit has the right to reverse any temporary credit(s) given and impose applicable finance charges on the disputed transaction(s) and any other government tax (if any).

Section D: Declaration

I make this solemn declaration conscientiously believing the statements given to be true and without prejudice to any party.

I understand that any findings in any investigation conducted related to my Card Account/Agreement shall be conclusive, final and binding on me and shall not be opened for questioning in any event.

Customer's Signature: _____

Date : _____