

Name of bank _____
Clearing no. _____
Postal code/town _____
Reference no. _____
Date _____

Objections regarding transactions with debit cards

1. Personal details of cardholder

(please complete in full)

Name

First name

IBAN

Telephone

2. Declaration by the account holder

I have checked the account statement and hereby declare that:

- ☐ I did not carry out the transactions shown
- ☐ The amount was debited twice
- ☐ I did not receive the product/service
- ☐ I did not receive the cash at the ATM
- ☐ I only received part of the cash. I received the following amount: _____
- ☐ Other reasons:

3. Further description

Further description of how the loss occurred (describe perpetrator if possible).

4. Objections regarding transactions with debit cards

(please complete in full)

No.	Date dd/mm/yyyy	Time hh:mm:ss	Transaction amount Currency Amount	Name and location of the ATM / merchant / website (URL)
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				
16				
17				
18				
19				
20				
21				
22				
23				
24				
25				

5. Affected debit card(s)

The debit card(s) was/were

☐ Stolen ☐ Lost ☐ is/are still in my possession

Did you block your card?

☐ yes ☐ no

Date/time you realized that you had lost the card:

Date/time the loss was reported:

The following documents were lost (e.g. ID card, passport):

Place the card was lost:

Date/time the card was lost:

Only for transactions at ATMs or physical points of sale (please do not complete in the case of transactions in online shops)

Where was the debit card PIN kept?

Do you have the debit card PIN memorized?

☐ yes ☐ no

Did you choose your own debit card PIN?

☐ yes ☐ no

Do you use the same debit card PIN for more than one card?

☐ yes ☐ no

Were written copies of the debit card PIN lost?

☐ yes ☐ no

Where was the debit card kept?

Did anyone else know the debit card PIN?

☐ yes ☐ no If yes, who?

Could this person have the debit card?

☐ yes ☐ no

Could someone have seen your debit card PIN?

☐ yes ☐ no

6. Insurance

Is any loss covered by an insurance company?

☐ yes ☐ no If yes, please enclose the decision of the insurance company.

7. Loss report to police

Did you report the fraudulent transactions to the police?

☐ yes ☐ no If yes,

Police station:

Report filed on:

City/country:

8. Confirmation

By submitting this form, the account holder confirms that all information provided to the bank is true.

- The account holder undertakes to inform the bank immediately if the debit card(s) is/are found or returned.
- If compensation is paid to the account holder, claims arising from the loss event in relation to the party responsible and in relation to insurers (if applicable) are assigned to the bank.
- The account holder declares that he/she agrees to his/her data being passed on to the police or investigating judicial authorities, and, upon request, will provide the bank and/or SIX Payment Services AG with the police report and other required documents.

Place/date

Signature of account holder

Signature of cardholder

(if the account holder is not the cardholder)