

Visa Credit/Debit Card disputed transaction form



About this form

You can use this form to dispute a transaction(s) that you participated in with a merchant(s).

Please don't use this form if you believe the transaction(s) is fraudulent or is the result of a scam, call 1800 052 743 immediately.

For example, if you or any other cardholder:

- Don't recognise the transaction(s) or merchant(s)
- Don't remember making the purchase
- Haven't authorised or participated in the transaction(s)
- Did not intend to purchase goods or services from the merchant(s)

Please note, if you are an additional cardholder under an Orange One credit card account, all correspondence on this issue will be directed to the cardholder whose card was used in the transaction(s) being disputed with the merchant(s).

We advise that providing insufficient, misleading, or false information may impact the outcome or processing of your dispute.

Step 1: Cardholder details

Name

Client number Account number

Visa Debit/Credit Card number
 * * * * *
First 4 digits Last 4 digits

Step 2: Disputed transaction details

Date	Merchant name	Amount (AUD)
<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/>	\$ <input type="text"/>
<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/>	\$ <input type="text"/>
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Sections to complete

Duplicated transaction or incorrect amount	→ Complete Section A
Cancelled recurring transactions	→ Complete Section B
Goods or services not received	→ Complete Section C
Returned goods or cancelled services	→ Complete Section D
Goods or services damaged, defective or not as described	→ Complete Section E



Section A

Please tick **ONE** box below, complete the details and attach the supporting documents.

Duplicated transaction

I only authorised one transaction for \$
on / / . It appears to be duplicated.

OR

Incorrect amount

I have been charged an incorrect amount.

The amount I should have been charged is \$

I have contacted the merchant(s) to try to resolve the matter by

phone email web chat other (please tick any that apply)

My last contact with the merchant(s) was on

/ /

Please attach all supporting documents and information (additional information can be provided in step 3):

- Evidence of quoted amount (e.g. quote), confirmed amount (e.g. sales invoice) or consent to charge an amount on your card (e.g. invoice, tax invoice or transaction receipt)
- Evidence of another payment method, if applicable (e.g. receipt for payment by cash or a different card, copy of another card/bank statement or transaction receipt)
- All relevant correspondence (e.g. emails, letter, web chat) with the merchant(s) including dates of contact and the merchant's response (if applicable)

Section B

Complete the details below and attach the supporting documents.

Cancelled recurring transactions

The merchant(s) was authorised to deduct regular payments from my account. However, I've cancelled or attempted to cancel that authority on / / . However, the merchant(s) has continued to deduct payments from my account.

Reason for cancellation (For example, services no longer required):

I have contacted the merchant(s) to try to resolve the matter by

phone email web chat other (please tick any that apply)

My last contact with the merchant(s) was on

/ /

I contacted the merchant(s) using this number/website/email

Please attach all supporting documents and information (additional information can be provided in step 3):

- A description of how you cancelled/attempted to cancel the authority, and the merchant's response
- All relevant correspondence (e.g. emails, letter, web chat) with the merchant(s), including dates of contact and the merchant's response (if applicable)
- Copy of the merchant's Terms and Conditions and/or cancellation policy



Section C

Please tick **ONE** box below, complete the details and attach the supporting documents.

Goods not received **OR** **Services not received**

I have not received the goods or services I have paid for. They were due to be delivered on / / .

Detailed description of what was purchased:

I have contacted the merchant(s) to try to resolve the matter by

phone email web chat other (please tick any that apply)

My last contact with the merchant(s) was on

/ /

Please attach all supporting documents and information (additional information can be provided in step 3):

- A copy of the order confirmation/invoice for the goods or services purchased
- Evidence that the merchant(s) is under administration, if applicable (e.g. notification from the liquidator)
- Evidence of any alternative solution offered by the merchant(s) (e.g. credit voucher) if applicable.
- All relevant correspondence (e.g. emails, letter, web chat) with the merchant(s) including dates of contact and the merchant's responses (if applicable).

Section D

Please tick **ONE** box below, complete the details and attach the supporting documents.

Returned goods **OR** **Cancelled services**

I received the goods or services on / /

For returned goods:

I returned or attempted to return the goods on / /

by post courier instore (please tick any that apply)

The merchant(s) received the goods on / / (if applicable).

The reason for returning or attempting to return the goods:



For cancelled services:

I cancelled the services on / /

The reason for cancellation of services:

For the returned goods or cancelled services, a credit for \$ was due to be processed by the merchant(s) to my card/account on the / / .

Please attach all supporting documents and information (additional information can be provided in step 3):

- A description of the goods or services purchased
- A copy of the order confirmation/invoice for the goods or services purchased
- For returned goods: Evidence of the return (e.g. return authorisation/delivery/tracking information/merchant confirmation of receipt) and date the merchant(s) received the goods
- If goods not returned, please provide the reason and/or evidence of your attempted return to the merchant(s)
- All relevant correspondence (e.g. emails, letter, web chat) with the merchant(s), including dates of contact and the merchant's response (if applicable)
- Copy of the merchant's Terms and Conditions and/or cancellation policy

Section E

Please tick **ONE** box below, complete the details and attach the supporting documents.

Goods damaged/defective OR **Services not as described**

The goods or services I have paid for were damaged, defective or not as described.

I received the goods or services on / / . I returned or attempted to return the goods on / / .

For goods:

I returned the goods by post courier instore (please tick any that apply)

The merchant(s) received the goods on / / (if applicable).

For services:

I received the services on / / . I cancelled the services or requested a refund on / / .

I have contacted the merchant(s) to try to resolve the matter by

phone email web chat other (please tick any that apply)

My last contact with the merchant(s) was on

/ /

Please attach all supporting documents and information (additional information can be provided in step 3):

- A detailed description of how the goods or services received were damaged, defective or not as described
- Evidence of the goods or services ordered, and demonstrating the difference between what was received and what was ordered (e.g. description and pictures showing the difference or damage)
- A copy of the order confirmation/invoice for the goods or services purchased
- For goods: Evidence of return of the goods (e.g. return authorisation/delivery/tracking information/merchant confirmation of receipt)
- For goods: If goods not returned, please provide the reason and/or evidence of your attempted return to the merchant(s)
- All relevant correspondence (e.g. emails, letter, web chat) with the merchant including dates of contact and the merchant's response (if applicable)



Step 3: Additional information

Please provide any additional information that may assist with your dispute.

By signing and submitting this form, you affirm that the information provided is truthful, accurate and complete.

Step 4: Your signature

Primary cardholder's signature

Date (DD/MM/YYYY)

 / /

Additional cardholder's signature (if relevant)

Date (DD/MM/YYYY)

 / /

Step 5: What to do when you have completed this form

Please send the completed form and documents to:

Email: card.investigations.au@ing.com

Mail: ING Payments Services
GPO Box 4094
Sydney NSW 2001

Next steps

We'll confirm receipt of your form and any documentation provided. We will investigate your dispute(s) in accordance with the Visa and/or EFTPOS Scheme Rules and we will be in touch via email.

Please note, we will only communicate with the cardholder whose card was used for the transaction(s) being disputed with the merchant(s).

If you need assistance or have any questions about your dispute, visit ing.com.au/contact-us for the best ways and times to connect.

