



PUNE DISTRICT CENTRAL CO-OPERATIVE BANK LTD

Head Office: 4B, B.J.Road, Pune - 411001.

**FORM FOR LODGING COMPLAINT FOR
FAILED ATM TRANSACTIONS**

To,

The Branch Manager,

Branch,

I wish to lodge complaint for the following failed ATM Transaction/s.

Customer Information:

Name of Customer (कार्डधारकाचे नांव)	
Account Number (खाते नंबर)	
Card Number (कार्ड नंबर)	

ATM Information:

ATM ID / Location (ए.टी.एम. आय. डी व ठिकाण)	
Name of the ATM Bank (ए.टी.एम. बँकेचे नांव)	

Nature of the Complaint:

a) Complaint relating to Cash Withdrawal	
Amount requested for withdrawal (ए.टी.एम.मध्ये पैसे काढण्याची विनंती)	{Rs. }
Amount actually disbursed at ATM (ए.टी.एम.मधून पैसे मिळाले)	{Rs. }
Amount of the account debited (रकम खाते नावे पडली)	{Rs. }
Amount disputed (बादाची रकम)	{Rs. }
Date of Transaction (व्यवहाराची तारीख)	{ / / } dd/mm/yyyy
Transaction No & Time (ट्रान्झॅक्शन नंबर व वेळ)	{ & }
b) Card Capture by ATM	
c) Other Complaints	

Date: ____ / ____ / ____

(Signature of the Card Holder)

Mobile _____

(Branch Acknowledgement)

(Signature of the Branch Manager & Branch Seal)

Date: ____ / ____ / ____