

**ATM TRANSACTION COMPLAINT FORM**

**To: The Branch Manager**

**TRIPURA GRAMIN BANK**

..... **(Name of the Branch)\***

..... **(Name of the Village / City)**

..... **(PIN Code Number )**

**1. CUSTOMER INFORMATION \***

NAME OF THE CUSTOMER : \_\_\_\_\_

ACCOUNT NUMBER : \_\_\_\_\_

DEBIT/ATM CARD NUMBER: \_\_\_\_\_

CONTACT NUMBER : (Mobile) ..... (Tel) .....

**2. ATM INFORMATION**

ATM ID / Location if ID is not available: \_\_\_\_\_

Name of the ATM Bank: \_\_\_\_\_

Do you have the ATM receipts?       YES                       NO

(If YES, please enclose the ATM slip with this form while submitting)

**3. NATURE OF COMPLAINT**

**A. Complaint relating to Cash With drawl**

AMOUNT REQUESTED FOR WITHDRAWAL:      Rs. \_\_\_\_\_

AMOUNT ACTUALLY DISBURSED AT ATM:      Rs. \_\_\_\_\_

AMOUNT DEBITED TO THE ACCOUNT:      Rs. \_\_\_\_\_

DATE OF TRANSACTION:      \_\_\_\_/\_\_\_\_/\_\_\_\_      (DD/MM/YY)

TIME OF TRANSACTION: \_\_\_\_\_ (AM / PM)

**B. Card Captured by ATM :**

**C. Other Complaints**

DATE : .....

CLIENT SIGNATURE

**FOR BRANCH USE**

Trace ID/Transaction Number : \_\_\_\_\_

**Additional Details** : \_\_\_\_\_

**Terms and Condition:-**

- 1. Please submit the form at the branch along with transaction slip (If available )
- 2. Please ensure all details provided are accurate.