



FIRST CITIZENS BANK LIMITED

Branch: _____

CHANNEL TRANSACTION DISPUTE FORM

CUSTOMER NAME:		
ADDRESS:		
CIF:	ACCOUNT NUMBER:	TELEPHONE CONTACT:
EMAIL ADDRESS:		
CHANNEL: <input type="checkbox"/> Retail Online Banking <input type="checkbox"/> Mobile Banking <input type="checkbox"/> Telebanking		
QUERY TYPE: <input type="checkbox"/> Bill Payment <input type="checkbox"/> Credit Card Payment <input type="checkbox"/> First Citizens Transaction <input type="checkbox"/> Other Financial Institution		
PAYEE: <input type="checkbox"/> Custom Payee <input type="checkbox"/> Standard Payee		

TRANSACTION DATE	TRANSACTION DETAILS/ PAYEE NAME & ACCOUNT NUMBER	AMOUNT

Dear Customer,

The following information is critical in order for us to process your inquiry. Please check the appropriate box, sign, and return to us, along with a copy of any related documentation as soon as possible:

QUESTION	ANSWER
Did you ever disclose or share your Online Banking login credentials with anyone?	<input type="checkbox"/> YES <input type="checkbox"/> NO
Did you sign up for any investments circulating on social media or service online via a consultant where you divulged personal and banking information?	<input type="checkbox"/> YES <input type="checkbox"/> NO
Did you receive an Email, SMS or message via another app (e.g. WhatsApp, Telegram, Instagram, Facebook) and clicked on any link requesting personal and banking information?	<input type="checkbox"/> YES <input type="checkbox"/> NO
Do you share a device with anyone?	<input type="checkbox"/> YES <input type="checkbox"/> NO
Did you login to your online banking using public Wi-Fi (e.g. Airport, Hotel, Coffee shop etc.) or an unfamiliar devices?	<input type="checkbox"/> YES <input type="checkbox"/> NO
Do you save your login credentials to your web browser?	<input type="checkbox"/> YES <input type="checkbox"/> NO
Were any of your devices recently repaired or serviced by a third party service provider?	<input type="checkbox"/> YES <input type="checkbox"/> NO

- I certify the payee(s) listed above was neither setup or added by me nor by anyone authorized by me to use my CIF.
- I certify the transaction(s) listed above was neither made by me nor by anyone authorized by me to use my CIF.
- I authorized a payment however the payee account entered was invalid.
- I authorized a payment however the wrong payee account number was selected.
- I authorized a payment to this payee in the sum of \$_____ and the transaction was duplicated.

- I authorized the payment but the transaction declined; however, the charge still appeared on my account.
- I authorized a payment to this payee but entered the incorrect amount.
- I made a payment to the payee but they did not receive the funds.

CUSTOMER'S COMMENTS:

DECLARATION:

I make this declaration conscientiously believing the same to be true and I am aware that if there is any statement in this declaration which is false in fact, which I know or believe to be false or do not believe to be true, I am liable to First Citizens Bank Limited (“the Bank”).

I hereby acknowledge my responsibility to provide accurate instructions to effect payment transactions as specified by the terms of the Interactive Electronic Services Agreement entered into between myself and the Bank. I also acknowledge that where the instructions provided do not meet this requirement, recovery of funds remitted is not guaranteed.

I also hereby consent to the Bank divulging full particulars of my account to any unit/department of the Trinidad and Tobago Police Service and/or any other appropriate public authority in order for a proper investigation of this matter to be carried out.

Account Holder Signature **Date**

The processing of claims is governed by First Citizens Bank Limited. Whilst some claims may be resolved quickly, it must be noted that some claims may be more involved and may take an average of thirty (30) days or greater. The decision of First Citizens Bank Limited is final.

FOR OFFICIAL USE ONLY

Was Client Reimbursed? YES NO

COMMENTS:

Prepared by: Branch Official Name & Signature **Job Title** **Date**

Authorized by: Branch Official Name & Signature **Job Title** **Date**