Claim form for improper bookings without physical card loss / card theft

What do you need to do?

– Please read the claim form carefully, complete it in full and sign every page.
– Send the completed and signed form to: PostFinance AG, Fraud Disputes, Flughofstrasse 35, Postfach, 8152 Glattbrugg.
  Use the pre-printed address sheet on the last page if required.

Further course of action

– Once we receive your claim, we will check it carefully. We may need additional information from you.

Important notes

– You can only dispute the transaction in writing within 30 days from the date of the invoice.
– For security reasons, we do not contact our clients via e-mail and will therefore always contact you by phone or mail.
– Please state the number of the credit card / prepaid card that was used to make the improper bookings.
– The claim form must include the cardholder's signature. Signatures of authorized agents or other persons are not valid.
– If your credit card / prepaid card is not yet blocked, please arrange this immediately.

Affidavit

Credit card number: _____

Name: _____   First name: _____

I herewith confirm that the abovementioned PostFinance credit card was never lost nor stolen from me. I was in possession and control of all genuine cards at the time of the transaction(s) and I never authorized any other party to complete transactions on my behalf. The transaction(s) listed on the addendum to this Affidavit was (were) not performed or signed by me, neither did I authorize them to be made on my behalf.

I also confirm that I do not personally know the offender. Should I obtain any knowledge of the offenders, I undertake to forward this information to PostFinance immediately and on my own initiative.

I will immediately inform PostFinance and on my own initiative of any total or partial repayment by a third party.

Should I accept compensation from PostFinance I explicitly transfer to PostFinance any claims against the perpetrator and/or insurers in the amount of the compensation received for the loss. In addition, should I accept compensation from PostFinance, I undertake to forward to PostFinance immediately and on my own initiative any total or partial repayment of the loss received from a third party.

I hereby declare that I consent to my card information being forwarded to every appropriate police and investigative authority and to the police report being handed over to PostFinance in the event of a financial loss being incurred.

In this case, I release PostFinance in full from its obligation to maintain bank-client confidentiality vis-à-vis all the appropriate police and investigative authorities.

Should a disputed transaction subsequently be found to be legitimate or should any information provided on this form prove to be false, the cardholder may be charged a processing fee.

Should any information provided on this form prove to be false, PostFinance reserves the right to take legal action against the undersigned.

I hereby confirm that all the information given on this form is truthful and complete.

Date: _____   Signature: _____

Affidavit

I confirm that the transaction(s) listed below was (were) neither made nor signed by me, nor did I authorize it (them) to be made on my behalf.

Date	Merchant	Amount

PostFinance AG
Fraud Disputes
Flughofstrasse 35
Postfach
8152 Glattbrugg

Adress sheet

Please complete this section

Cardholder confirmation for the disputed transaction:

Last name: _____   Phone number (home): _____

First name: _____   Phone number (office): _____

Mobile phone: _____