

Claim form for improper bookings following lost/theft of card



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

Date, time and location the loss/theft was noticed: _____

Date: _____ Time: _____ Location: _____

To whom was the loss/theft reported? _____

Date and time the loss/theft was reported: Date: _____ Time: _____

Where and how was the card kept? _____

If the card was stolen out of a vehicle, why did you keep it there? _____

Where were you at the time of the loss/theft? _____

Was the credit card signed? Yes No

Where and how was the PIN code kept? _____

Have you lost any written copies of the PIN code? Yes No

Do you know your PIN code by heart? Yes No

Does anybody else know your PIN code? Yes No If so, who? _____

Could this person be in possession of your card? Yes No

Have you changed the PIN code into a combination of your telephone number, car licence number, date of birth or any easily ascertainable combination of numbers? Yes No

If so, into what kind of combination? _____

To which police station and to which officer did you report the offence?
Please provide the police report if available. This has to be confirmed by the local police.

Police station/officer: _____

File number: _____ Date: _____

Were any other objects lost/stolen from you? Yes No

If so, please specify and list all missing objects, documents and bank cards.

Last use of mentioned credit card before the loss/theft?

Date: _____ Amount: _____ Merchant/Place: _____

Description of the circumstances of theft/loss. Use another piece of paper if necessary.

Are any damages covered by an insurance company? Yes No

Name of insurance company: _____

Date: _____ Signature: _____

PostFinance AG
Fraud Disputes
Flughofstrasse 35
Postfach
8152 Glattbrugg

Adress sheet

Please complete this section

Confirmation of the cardholder for the contested transaction:

Last name: _____

First name: _____

Street, no.: _____

Postcode/Location: _____

Mobile phone: _____