

**客戶自動櫃員機爭議交易申請表**  
**(CCF) Customer Claim Form – ATM**

客戶資料 Customer's Details	
持卡人姓名 Cardholder Name	聯絡電話 Contact Telephone
發卡銀行 Card Issuing Bank	交易賬戶號碼 Transaction Account Number

交易資料 Transaction Details			
代理銀行 Originating Bank	分行 Branch	提款機編號 ATM#	交易日期 / 時間 Transaction Date / Time
交易種類 Transaction Type <input type="checkbox"/> 提款 Cash Withdrawal <input type="checkbox"/> 跨行轉賬 Interbank Transfer 附上客戶通知書 <input type="checkbox"/> 有 <input type="checkbox"/> 沒有 Customer Advice Slip Attached    Yes                    No <input type="checkbox"/> 提款 / 轉賬金額                    \$                    x                    次數 Withdrawal / Transfer Amount                    times <input type="checkbox"/> 櫃員機付出現金                    \$ ATM Cash Dispensed <input type="checkbox"/> 要求償還金額                    \$ Amount Claimed <input type="checkbox"/> 戶口已被扣除                    \$ Account Debited <input type="checkbox"/> 申請償還原因 <input type="checkbox"/> 櫃員機沒有付出現金 No cash dispensed from ATM Claimed Reason <input type="checkbox"/> 忘記拿取現金 Forget to take cash <input type="checkbox"/> 其他 (請註明) Other (Please specify) _____ <input type="checkbox"/> *轉賬銀行                    _____ *Transferee Bank <input type="checkbox"/> *轉賬賬戶號碼                    _____ *Transferee Account No. <input type="checkbox"/> *轉賬參考號碼                    _____ *Transfer Reference No.			
( *如屬跨行轉賬交易，此項必須填寫 Must Fill in for Interbank Transfer Transaction )			持卡人簽署 Cardholder Signature

此欄只供銀行專用 FOR OFFICIAL USE ONLY		
Reporting Branch	Authorized Signature	Credit Card Department

Confidential Upon Completion