



DISPUTE RESOLUTION FORM (DRF) FOR IMPS TRANSACTIONS

Full Name	
Customer Account Number (full 16 digits)	
Customer Phone Number	

Details of Disputed Transaction(s)

Date and Time of Transaction	___/___/____(DD/MM/YYYY) __: __ HH:MM AM/PM
Transaction Amount	Rs.
Reference Number	
Disputed Amount	Rs.
Date and Time the Complaint Received at Branch	___/___/____(DD/MM/YYYY) __: __ HH:MM AM/PM
Beneficiary Name	
Beneficiary Location (with State and Country)	
Mode of Transaction	<input type="checkbox"/> Net Banking <input type="checkbox"/> Mobile Banking
Complaint Level	<input type="checkbox"/> Charge Back <input type="checkbox"/> Pre-Arbitration <input type="checkbox"/> Arbitration <input type="checkbox"/> PRD

Type of Dispute (Tick One)

<input type="checkbox"/> Wrong credit
<input type="checkbox"/> Account debited but beneficiary not credited

Description for Dispute Raised by Account Holder*:

Brief explanation on account holder's attempt to resolve the dispute with beneficiary and the details of beneficiary response. (*Mandatory)

--

Turn Around Time and Charges Applicable for Dispute Resolution

Product	TAT for Complaint/Chargeback (From the Date of Transaction)	TAT for Pre-Arbitration (From the Date of Complaint/Chargeback Rejection)	TAT for Arbitration (From the Date of Pre-Arbitration Rejection)
IMPS	45 days	25 days*	10 days*

*Other than Wrong Credit chargeback and Fraud chargeback.

Charges Applicable

Product	Chargeback	Pre-Arbitration	Arbitration/NRP	PRD
IMPS	Nil	Nil	Rs. 500.00+GST	Rs. 3000.00+GST

Account Holder Declaration:

I declare that the information given above is true and correct to the best of my knowledge. I understand that I can be held liable for all charges incurred before the time of reporting of loss/theft and if dispute raised by me is found invalid, I agree to pay the charges levied by South Indian Bank for the same.

Account Holder Name & Signature: _____

Date: ___/___/____

Branch Declaration:

I declare that the above facts were obtained based on my discussion with the Account holder and those facts are true and correct to the best of my knowledge.

Branch Head/BOM Name & Signature: _____

Date: ___/___/____

