

## Business Visa Debit Card Notice of Claim

Complete the form using blue or black pen and print in clear CAPITAL LETTERS

Complete this form to dispute an Unauthorised Transaction made by a Business Visa Debit Cardholder on the Business Transaction Account. **Note: Only an Authorised Signatory to the Account can complete this form.**

 Mail the completed form to: **GPO Box 5302, SYDNEY NSW 2001** **OR**  Fax to: **1300 765 150**

### CARDHOLDER DETAILS

Business Visa Debit Card number

Name of cardholder

Home address of cardholder

Postcode

Work address of cardholder

Postcode

### LODGE A CLAIM

We wish to lodge a claim in respect of an unauthorised transaction and request a claim form to be sent to this office. In terms of the conditions applying to such a claim, we hereby request and authorise you to cancel the HSBC Business Visa Debit Card specified above.

The police have been notified of the matter and a copy of the police report is attached.

Police report number

Please indicate action taken

- The HSBC Business Visa Debit Card has been cut in half and destroyed by us.
- The HSBC Business Visa Debit Card has been previously returned to you.
- HSBC Business Visa Debit Card is still in possession of the cardholder and accordingly, we have notified the cardholder that he/she is no longer authorised to use the HSBC Business Visa Debit Card (copy of letter attached).

### AUTHORISATION

For and on behalf of:

Account holder (*business name*)

Authorised Signatory

Date

DD / MM / YY

Name

Office Use Only

Police report attached <input type="checkbox"/>			
SV <input type="checkbox"/>	Checking officer name	Signature	Date / /