

Card Transaction Dispute Form

epay, PO Box 132122, Sylvia Park, Mt Wellington 1644

DISPUTE FORM VALID FROM MARCH 2026



1. Customer details

Please print your details clearly in CAPITAL LETTERS, using a pen

Name

S/N (12 digits on the back of the card)



Do not enter the card number

2. Disputed transaction details

I wish to dispute the following transaction/s on my card:

Transaction date (dd/mm/yyyy)	Transaction time	Merchant	Amount \$
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Please select the reason you would like to dispute these transaction/s (please tick)

I'm unsure about this transaction, please clarify the following details:

Merchant name	Merchant location	Transaction date	Transaction amount	Other (Please specify overleaf)
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I did authorise this transaction, but I haven't received any goods or services. They were expected on
I've attached documents showing the expected service or delivery date.

The amount appears to be altered from \$ to \$

(Please attach a copy of the sales voucher, receipts etc and specify more details on page 2)

I've already paid for goods or services by an alternate means - eg cash, another credit card, travellers cheques.

I only authorised one transaction (possible duplication). The date of the original transaction was

Neither I nor any additional cardholder have authorised or participated in this transaction from the above merchant, nor received any goods or services.

The goods I received were not as described or the goods received were defective/damaged.

I received a credit for \$ on which has not been processed. I've enclosed a copy of
the credit transaction receipt. Merchandise was returned on . I last contacted the merchant about this
matter on

3. Disputed Fee

When a cardholder initiates a dispute, a \$15.00 dispute fee will be charged.

If the dispute is upheld, the fee will be refunded.

The handling of the fee depends on the cardholder's available balance:

1. Cardholder has sufficient funds: the \$15.00 fee will be deducted from the customer account using a Debit Adjustment in CMS, with an approved memo/reference.

2. Cardholder does not have sufficient funds: the customer will be asked to top up or reload the account. Once reloaded, the dispute will be raised and the \$15.00 fee will be charged.

4. Authorisation

I give my consent for epay to act on my behalf in raising and processing this dispute. I understand that a \$15 dispute processing fee will be charged at the time of lodging the dispute. If the dispute is upheld, the fee will be refunded to my card. If the dispute is not upheld, the fee will not be refunded

Primary cardholder's signature

Date signed (DD/MM/YYYY)

When complete, please return this form and supporting documents via either:

Mail PO Box 132122, Sylvia Park, Mt Wellington 1644

Or email epaynzchargebacks@epayworldwide.co.nz

You must sign this form.

IMPORTANT: Please ensure you complete page 2 of this form and attach copies of any documents that support your claim. Lack of documentation may delay resolution of your dispute.



5. Contact details

Home Phone

Mobile

Address

Postcode

Email address

I would prefer to be contacted by

Email

Phone

6. Additional information

To assist us in managing your dispute, please provide a detailed explanation about the transaction/s.

Thank you for your patience. You'll receive progress updates via your selected communication method as the claim progresses.