

GLOBAL ACCESS/VISA CUSTOMER COMPLAINT FORM

**To : Technical Service Manager
BAF**

From : _____ Branch : _____ Date : _____

Customer's Name	Card Number
Correspondance Address	Card Type
Telephone Number	VISA <input type="checkbox"/> CASH CARD <input type="checkbox"/> OTHERS (Please specify) <input type="checkbox"/>
Residence <input type="checkbox"/> Office <input type="checkbox"/>	
Account Number/Type Accessed	Issuing Bank

Details of Complaint

Network of th ATM in Question			
Hongkong Bank <input type="checkbox"/> Midland Bank <input type="checkbox"/> Marine Midland Bank <input type="checkbox"/> Wells Fargo Bank <input type="checkbox"/>	Hang Seng Bank Ltd Bank <input type="checkbox"/> Hongkong Bank of Canada <input type="checkbox"/> Hongkong Bank of Malaysia B. <input type="checkbox"/> The Saudi British Bank <input type="checkbox"/>	The B. B. M. E. <input type="checkbox"/> The Egyptian British Bank <input type="checkbox"/> Express Net <input type="checkbox"/> Visa / Plus System (Please specify Bank Name) <input type="checkbox"/>	
ATM Number	Location		
Date of Transaction	Time of Transaction	Number of Times You Tried	
Type of Transaction and Further Details			
Cash Withdrawal : <input type="checkbox"/> Amount _____			
Was Money Dispensed ? <input type="checkbox"/> Yes, Amount _____		No <input type="checkbox"/> Balance Enquiry <input type="checkbox"/>	
Was Your Account Debited ? <input type="checkbox"/> Yes, Amount _____		No <input type="checkbox"/> Cheque Book Request <input type="checkbox"/>	
Transfer : <input type="checkbox"/> Amount _____		Statement Request <input type="checkbox"/>	
Account Number of Transferee _____			
Description of Problem			
Reject Message on ATM Screen (if any)		Reject Code	
Customer Advice Yes (Please attach) * <input type="checkbox"/> No <input type="checkbox"/>		Card Retained Yes (Card Reclaimed) <input type="checkbox"/> Card NOT Reclaimed <input type="checkbox"/> No <input type="checkbox"/>	
If you have tried other ATM machines, please indicate the details below :			
ATM No.	Location	Successful	Unsuccessful

For Bank Use Only	
Confirm from ATM Officer is surplus/shortage is found	
Yes <input type="checkbox"/>	No <input type="checkbox"/>

Customer's Signature

* Please attach a copy of CAS (Customer Advice Slip)

1st Copy : Branch

2nd Copy : Customer

Branch Manager's Signature

GLOBAL ACCESS/VISA CUSTOMER COMPLAINT FORM

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From : _____ Branch : _____ Date : _____

Customer's Name	Card Number
Correspondance Address	Card Type
Telephone Number	VISA <input type="checkbox"/>
Residence _____ Office _____	CASH CARD <input type="checkbox"/>
Account Number/Type Accessed	OTHERS (Please specify) <input type="checkbox"/>
	GLOBAL ACCESS CARD / ETCI <input type="checkbox"/>
	ASSETVANTAGE CARD <input type="checkbox"/>
	Issuing Bank

Details of Complaint

Network of th ATM in Question			
Hongkong Bank <input type="checkbox"/>	Hang Seng Bank Ltd Bank <input type="checkbox"/>	The B. B. M. E. <input type="checkbox"/>	
Midland Bank <input type="checkbox"/>	Hongkong Bank of Canada <input type="checkbox"/>	The Egyptian British Bank <input type="checkbox"/>	
Marine Midland Bank <input type="checkbox"/>	Hongkong Bank of Malaysia B. <input type="checkbox"/>	Express Net <input type="checkbox"/>	
Wells Fargo Bank <input type="checkbox"/>	The Saudi British Bank <input type="checkbox"/>	Visa / Plus System (Please specify Bank Name) <input type="checkbox"/>	
ATM Number	Location		
Date of Transaction	Time of Transaction	Number of Times You Tried	
Type of Transaction and Further Details			
Cash Withdrawal : <input type="checkbox"/> Amount _____			
Was Money Dispensed ? <input type="checkbox"/>	Yes, Amount _____	No <input type="checkbox"/>	Balance Enquiry <input type="checkbox"/>
Was Your Account Debited ? <input type="checkbox"/>	Yes, Amount _____	No <input type="checkbox"/>	Cheque Book Request <input type="checkbox"/>
Transfer : <input type="checkbox"/> Amount _____			Statement Request <input type="checkbox"/>
Account Number of Transferee _____			
Description of Problem			
Reject Message on ATM Screen (if any)		Reject Code	
Customer Advice	Card Retained		
Yes (Please attach) * <input type="checkbox"/>	No <input type="checkbox"/>	Yes (Card Reclaimed) <input type="checkbox"/>	Card NOT Reclaimed) <input type="checkbox"/>
If you have tried other ATM machines, please indicate the details below :			
ATM No.	Location	Successful	Unsuccessful
_____	_____	_____	_____
_____	_____	_____	_____

For Bank Use Only	
Confirm from ATM Officer is surplus/shortage is found	
Yes <input type="checkbox"/>	No <input type="checkbox"/>

Customer's Signature

* Please attach a copy of CAS (Customer Advice Slip)

1st Copy : Branch

2nd Copy : Customer

Branch Manager's Signature