

## Claim form for different amounts

### What do you need to do?

- Complete the form and state the respective reason for complaint.
- In some cases, it may be necessary to submit documents as evidence (e-mails, information regarding contact with the merchant, receipts, etc.). Please enclose all of the available documents.
- Only sign the page with the relevant cause for complaint and return this to us together with the address sheet.

### Next steps

- You will receive a written confirmation of receipt and a case number from us. If you subsequently deliver additional documents for a specific case, please always state the case number.
- In certain cases, our investigations may take several months, as we need to contact the involved bank.

### Important notes

- We can only lodge a complaint to the affected company if you object to the transaction in writing within 30 days of the statement date.
- For security reasons, we do not contact our clients via e-mail and will therefore always contact you by phone or mail.
- This form cannot be used to forward objections regarding the following debit items: default interest, reminder fees, annual card fees for UBS credit cards/UBS prepaid cards or admission fees for accessing airport lounges with the Priority Pass. If you do not agree with one or more of the above mentioned debit items, please contact our Customer Services: tel. +41 44 828 35 01.
- Any disagreement with the merchant due to the current complaint, and any resulting claims, shall be settled by the cardholder directly with the merchant in accordance with the applicable General Terms & Conditions for using UBS credit and prepaid cards.



.....  
Card number

.....  
First name/Last name

**UBS Switzerland AG**  
Flughofstrasse 35  
P.O. Box  
8152 Glattbrugg  
Tel. +41 44 828 35 01

# Complaints concerning card transactions

---

**Please complete this section****Important**

I hereby confirm that the following information is complete and truthful. Furthermore, I certify that my UBS credit card/UBS prepaid card has never been lost or stolen and has always been in my possession.

.....  
Card number

.....  
Amount

.....  
Last name

.....  
Transaction date

.....  
First name

.....  
Merchant

---

I have checked my monthly statement and dispute this transaction for the following reason:

**Different amount**

I signed a receipt for an amount of. (see enclosed copy)

.....  
Amount

But my account was debited with the amount of.

.....  
Amount

---

**Signature**

This form must be signed by the cardholder personally.

.....  
Date

.....  
Signature



.....  
Card number

.....  
First name/Last name

UBS Switzerland AG  
Chargeback  
Flughofstrasse 35  
8152 Glattbrugg

## Address sheet

---

### Please complete this section

Cardholder confirmation for the disputed transaction:

.....  
Last Name

.....  
Phone number (home)

.....  
First name

.....  
Phone number (office)

.....  
Mobile phone

---

### Are these documents enclosed?

Payment slip

---