

FRAUD REPORTING FORM

Date of reporting fraud to the Bank:

Customer Name:

CRN:

Mode/Type of fraud transaction: ATM Debit Card Related Net banking Mobile Banking UPI POS ECOM

Debit Card Number (If related to Debit card):

- Debit Card was not in my custody when this fraud transaction took place
 Debit Card was in my custody when this fraud took place (Please tick the appropriate one)

I came to know about this transaction in my a/c which I have not done through SMS Alert Email Alert Bank Statement
 Call from Bank Others please specify _____

Account Number in which fraud transaction took place

Date on which Fraud transaction took place Date From: To:

Details of fraud transactions	Date of transaction	Amount of transaction	Description

Case Brief (Please explain the incident)

My Last transaction: I have used my debit card for (Any ATM, POS or Website etc.)

- I have used or registered for mobile banking before.
 I have never used or registered for mobile banking before. (Please tick the appropriate one)
- I have received call(s) where caller(s) asked me to share my last 4/6 digits of Debit Card, PIN, Expiry Date or OTP
 I have not received any call(s) seeking my last 4/6 digits of Debit Card, PIN, Expiry Date or OTP (Please tick the appropriate one)
- I have shared my mobile banking, net banking passwords/Credentials, Debit Card PIN/OTP
 I have not shared my mobile banking, net banking passwords/Credentials, Debit Card PIN/OTP with anyone (Please tick the appropriate one)
- I have used or registered for UPI before.
 I have never used or registered for UPI before. (Please tick the appropriate one)
- I have received call(s) where caller(s) asked me to download an app and do a transaction.
 I have never received call(s) where caller(s) asked me to download an app and do a transaction. (Please tick the appropriate one)
- I have clicked on a link / collect request to make payment.
 I have never clicked any link/ collect request to make payment. (Please tick the appropriate one)

DECLARATION CUM AUTHORISATION

I hereby declare that the aforesaid contents are true to the best of my knowledge and belief. I also further declare that I have not initiated any such banking transaction of such nature from my account.

I hereby agree and understand that in case bank gives shadow credit in my account towards the said transaction(s), such amount shall be under lien marked in favor of the bank for the maximum period of 90 days.

In case the claim made by me is proved false/incorrect, I authorize IndusInd Bank Ltd. to reverse or adjust the lien amount credited to my account with immediate effect thereon.

Customer Signature

FOR BANK USE ONLY

Bank Official Name, ECN No & Signature who has accepted the request:

Name: <input type="text"/>	Signature
ECN: <input type="text"/>	

Bank Official Name, ECN No & Signature who has accepted the request:

Name: <input type="text"/>	Signature	Branch Seal: 
ECN: <input type="text"/>		

CUSTOMER ACKNOWLEDGEMENT

Name of the Bank: <input type="text"/>	<input type="text"/>
Branch Name <i>(where fraud has been reported):</i> <input type="text"/>	<input type="text"/>
Branch Code <i>(where fraud has been reported):</i> <input type="text"/>	Date of reporting fraud to the Bank: <input type="text"/>
Customer CRN: <input type="text"/>	Service Request Number: <input type="text"/>
Customer Name: <input type="text"/>	<input type="text"/>

Nature of complaint	Fraud Reporting
Whether fraud reporting form duly filled and submitted by customer (Yes/No)	<input type="text"/>

Name of Employee: <input type="text"/>	Signature of Employee
ECN No: <input type="text"/>	