

Dispute Paper

Date of dispute acceptance _____
Day/Month/Year/Hour/Minute

Registration number _____

Applicant's personal information

Name, Lastname	
Identification Number	
Address	
Phone Number	
Email	

Product Name

Auto Loan		Credit Card		Call Deposit		
Customer Loan		Loan For House Repairs		Term Deposit		
Instant Lease		Mortgage		Internet Bank		
Overdraft		Current Accounts		Other (Please Specify)		

Nature of Dispute

Interest Deposits		Publicising confidential information	
Service Fees		Terms of the agreement	
Penalties and overdue fees		Advertasing, Sales, Tips	
Loan repayment before due date comissions		Transactions	
Other Fees		Related credit agreement	
Level of service		Other (Please specify)	
Information provided incorrectly			
Failure to Provide mandatory information			

Contents of the claim (If needs be provide additional information as an appendix)

How do you want to be answered on your claim (Please select only one)

In writing (please provide the address)	
Via Phone	
Via Email	
Via Internet Banking / Via website	

The provider will responde to the dispute paper if:

The application is submitted by the user (authorised person)
The required fields specified in the statement are fully filled
The claim has been filed to the specified address (Tbilisi - Politkovskaya 3, Building 9, Office 1 which is registered as mentioned by the provider.

The Claim will not be reviewed by the bank if:

The provider has already reviewed claim with the similar content
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Customer's claim refers to provider's refusal to issue credit/overdraft/Credit Card/Acceptance of deposit
The reason for the dispute is delays in providing or refusing to provide services to a customer, According to Georgian law regarding legalization of illicit revenue
Failure to state the claim in the dispute paper
The Paper is submitted by an unauthorized person

The deadline for reviewing the application starts on the day following the registration of the application and ends with 30 calendar days after the application has been registered. The response to the request is handled in the event of identification of the applicant, Otherwise the response to the claim will be sent by mail or email to the address indicated in the statement

I agree with the content of the statement and confirm it's authenticity. However I am also aware that in case of incomplete or unfounded claim, the provider reserves the right not to review my application

Customer Signature

Authorized person signature

Authorized person's name and lastname

Find useful information on the National Bank of Georgia's website at <http://www.nbg.gov.ge/cp> and hotline - 2 406 406

Details of financial monitoring and risk department - Address: Politkovskaya 3, Building 9, Office 1, Telephone +995 32 2110 979
Email: risk.management@finteno.com