

Self-Declaration Claim Form

Card number (last 4 digits on the card only)	<div style="border: 1px solid black; width: 100px; height: 20px; display: flex; justify-content: space-between;"><div style="width: 25%;"></div><div style="width: 25%;"></div><div style="width: 25%;"></div><div style="width: 25%;"></div></div>	Phone	
Card holder's full name		Birth date	
Address			
E-mail address			

Please answer the questions below (if necessary, use a separate sheet of paper)

Why are you making a claim?	
<Description>	
Specifications of the transactions you want to make a claim about. The form "Cardholder Certification, Fraud" <u>must</u> be enclosed.	Attachment <input type="checkbox"/>

Answer these questions if the transactions you are making a claim about are not your own.
If yes on question 1, *jump to question 4.*

1. Was the card in your possession when the transactions were carried out?		Yes <input type="checkbox"/> No <input type="checkbox"/>	
2. When and how did you notice the card was missing?	Date	Time of day	
<Description>			
3. How did you keep your card and PIN code?			
<Description>			
4. Is the card blocked? Yes <input type="checkbox"/> No <input type="checkbox"/>		If yes, what date was it blocked?	
5. Have you reported the issue to the police? If yes, please attach a confirmation.		Yes <input type="checkbox"/> No <input type="checkbox"/> Attachment <input type="checkbox"/>	
6. Do you have other important information in connection with this issue? (Feel free to write on a separate piece of paper.) Please attach other documentation relevant to this issue.			
<Description>			
7.	I hereby declare that I never participated in nor authorized the above mentioned transaction(s). Please stop all further charges to my account.		

This declaration must be signed, scanned, and sent to sor.reklamasjon@tietoevry.com.

Location _____ Date _____ Signature (card holder) _____