

You must complete the form electronically

## I have neither engaged in nor authorised the transactions – the card was not in my possession

Please ensure that your card is blocked before proceeding with the dispute. You can block your card by using either Danske eBanking or by calling us on +45 70 20 70 20. We are open 24 hours a day, 365 days of the year.

It is important that you complete all the fields on this form.

After completing the form, please print and sign it.

You can choose to send it by post to:

Danske Bank  
Fraud Management  
Holmens Kanal 2-12  
DK-1092 Copenhagen

Or, you can scan the signed form and send it as an attachment

- via a secure line through your eBanking, or  
- by e-mail to: [indsigelse@danskebank.dk](mailto:indsigelse@danskebank.dk)

Please be aware, that when sending by e-mail, there is a risk that unauthorised parties can read and change the contents.

After we receive your dispute, we will handle your case as soon as possible. It may also be necessary for us to contact you in connection with the handling of your case. In accordance with the card terms & conditions, a personal liability charge may be deducted.

### Cardholder's details

Name of cardholder		Date of birth
E-mail address		
Telephone No. (Daytime)		Mobile No.
Reg. No.	Account No.	Last 4 digits of the card number

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Last 4 digits of the card number \_\_\_\_\_

**Card status and transaction type**

The card has been lost/stolen

The card has never been received (Box A should not be filled in, if this field is selected)

**Detailed information (box A)**

When did you first notice that the card was lost/stolen?	Date	Time	
Was the card entrusted to another when it was lost/stolen?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
If yes, to whom was it entrusted?			
What was the purpose of entrusting the card to another?			
The card was last used:	Date	Time	Amount
Place _____			
When, where, and how was the card lost/stolen?	Date	Time	
Place _____			
Describe what happened			
How/where did you keep the card?			
How/where did you keep the PIN number?			
Have others had access to the card?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	If yes, who?
Has the PIN number ever been disclosed to others?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	If yes, who?
Did/could others have had access to the PIN number ?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	If yes, who?
Has the card previously been lost, and found again?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
If yes, when and where? _____			
When did you block the card?	Date	Time	
If the card has been lost/stolen, you have to report it to the police. Please specify the journal number of this police report. You may also attach a copy of the receipt for the police report.			
			Journal no. _____

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Cardholder name
Last 4 digits of the card number

**Dispute reason:**  
I have neither engaged in nor authorised the following transaction(s).  
Disputed transactions: One transaction per line

Date of purchase	Merchant name	Dispute amount and currency	Dispute amount in DKK

My card is lost/stolen or I have never received the card.	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
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**Customer affidavit**

I solemnly declare that the information is correct. If the case is investigated by the police, I hereby consent to the Bank providing the police with any information they may require in connection with the case.

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Date \_\_\_\_\_ Cardholder's signature \_\_\_\_\_