## **Mistaken BPAY® Payment Recall Request**



Member Details		
Member Name	Member Number	

Details of Mistaken Payment					
Date of Payment	Date Reported				
Recipient BPAY Name					
BPAY Biller Code	Customer Ref.				
Amount	Receipt Number				

Details of Intended Account						
BPAY Biller Code	Customer Ref.					
Title of Intended Account						
Intended Amount						

## Reason for Investigation Incorrect Details Entered Fraud BPAY Trace Request Scam

## Police Credit Union will conduct a full investigation of the information provided

As required, under the provisions of the ePayments code, we will conduct a full investigation of your enquiry and advise you of our findings within 21 days of lodgement of the Enquiry/Complaint form. If we are unable to complete our investigation within the 21 days we reserve the right, to extend the investigation period by up to a further 24 days. Please note, you will be notified in writing should an extension of the investigation period be required.

## Mistaken Payment Declaration by member

By lodging this request, you are declaring that you have performed a mistaken BPAY payment and acknowledge liability for the transaction.

I authorise Police Credit Union to commence the BPAY recall proceedings on my behalf with the acknowledgment that my request may be refused by the BPAY recipient.

I confirm the information provided is true and correct and authorise Police Credit Union to deduct the Funds Recall Fee, as outlined in the General Service Fees sheet, in order to commence the BPAY recall proceedings.

Member Signature Date	
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Office use only: Accepted by		Op ID:		Date:	
Forwarded to Retail Operations via:  Internal Mail		Emailed to <a href="mailto:bpaydispute@policecu.com.au">bpaydispute@policecu.com.au</a>		au	