

Step 1: Complete the form in CAPITAL LETTERS and sign off by Authorized Signatory
 Step 2: Email to cardopsmerchantpayment@UOBgroup.com with subject header in the following format as follows:
 (e.g. < MERCHANT NAME > - < 15 DIGIT MIDs > - < REQUEST TYPE > < SUBMISSION REQUEST DATE >)

- For Manual Refund: e.g. ABCD PTE LTD – MID 000001234567890 – Manual Refund DDMMYY
- For Manual Sales: e.g. ABCD PTE LTD – MID 000001234567890 – Manual Charge DDMMYY
- For Manual Settlement: e.g. ABCD PTE LTD – MID 000001234567890 – Manual Settlement DDMMYY

Please note that **ONLY ONE (1)** form per request is allowed.

MANDATORY FIELDS

REQUESTOR NAME : _____	DATE OF REQUEST : _____
MERCHANT NAME : _____ (as in ACRA)	ROC NUMBER : _____
CONTACT EMAIL : _____	CONTACT NUMBER : _____
ORIGINAL TRANSACTION UOB MID : _____	TERMINAL ID : _____

1A) Manual Refund to the Credit Cardholder

(UNI\$ will be refunded in SGD equivalent, reinstatement of UNI\$ points is not applicable)

MID to perform Manual Refund^			
Card Type*	<input type="checkbox"/> Visa/MasterCard/JCB <input type="checkbox"/> UPI	Credit Card Number (Last 4 Digits)	
Transaction Source*	<input type="checkbox"/> Retail <input type="checkbox"/> Dynamic Currency Conversion (DCC) <input type="checkbox"/> Installment Payment Plan (IPP/EPP) (Tenure: _____ months) <input type="checkbox"/> Mobile Payment (e.g. ApplePay, Samsung Pay, UOB Mighty Pay, etc) <input type="checkbox"/> E-com eNETS <input type="checkbox"/> E-com MIGS/MPGS <input type="checkbox"/> E-com CYBS		
Date of Original Transaction (DD-MM-YY)	Time of Transaction (HH-MM)	Original Transaction Approval Code	
Original Transaction Amount	\$	Original Transaction Currency (SGD, USD, etc)	
Original Transaction Amount in SGD equivalent (for DCC only)	\$		
Gross Amount to Refund Cardholder*	<input type="checkbox"/> Full <input type="checkbox"/> Partial Amount in Original Transaction: \$ _____ & Currency: _____ (Refund amount should not be more than the original transaction amount)		
For IPP Refund – to cancel existing IPP arrangement*	<input type="checkbox"/> Yes <input type="checkbox"/> No		
Attachment for Manual Refund (Mandatory)	<input type="checkbox"/> Yes, a copy of the transaction slip is provided		
Refund Deduction (If deduction fails, this refund deduction request will not be processed further)	Please choose one of the payment options* for this refund request: <input type="checkbox"/> Deduct through GIRO – bank account registered with UOB <ul style="list-style-type: none"> • If GIRO Debit Instruction (one-time setup) has not been submitted before, please complete and submit the Merchant Interbank Giro form (https://www.uob.com.sg/web-resources/personal/pdf/personal/cards/merchant-services/merchant-interbank-giro-application.pdf). Kindly note that this refund request can only be processed after GIRO arrangement has been approved, usually takes 3-4 working weeks as this is dependent on your debiting Bank processing. • If GIRO Debit Instruction has been in place, do ensure it is within withdrawal limit & there is sufficient fund balance in the bank account for processing. <input type="checkbox"/> Cheque		

*Please tick if applicable.
 We will require 5 working days to process your request, upon submission with correct details and sign-off by the Authorized Signatory registered with Merchant Team. Please take note that your request will be rejected if the form is incomplete or wrongly filled.

	Please find enclosed Cheque Number _____ of \$ _____ (Gross Refund exclude MDR), made payable to UNITED OVERSEAS BANK LTD. Mail cheque and letter to: UOB Card Operations Processing Centre (Merchant Payment) Robinson Road P.O. Box 1688 Singapore 903338
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1B) Manual Refund to the Wallet Holder

MID to perform Manual Refund^			
Card Type	<input type="checkbox"/> WeChat Pay <input type="checkbox"/> Alipay		
Date of Original Transaction (DD-MM-YY)	Time of Transaction (HH-MM)		Original Transaction Approval Code
Original Transaction Amount	\$ _____		
Merchant Order Number (Applicable for WeChat Pay only)	WeChat Order Number (Applicable for WeChat Pay only)		
Transaction ID (for Alipay only)			
Gross Amount to Refund Cardholder*	<input type="checkbox"/> Full <input type="checkbox"/> Partial Amount in Original Transaction: \$ _____ in SGD (Refund amount should not be more than the original transaction amount)		
Refund Deduction (If deduction fails, this refund deduction request will not be processed further)	Please choose one of the payment options* for this refund request: <input type="checkbox"/> Deduct through GIRO – bank account registered with UOB <ul style="list-style-type: none"> If GIRO Debit Instruction (one-time setup) has not been submitted before, please complete and submit the Merchant Interbank Giro form (https://www.uob.com.sg/web-resources/personal/pdf/personal/cards/merchant-services/merchant-interbank-giro-application.pdf). Kindly note that this refund request can only be processed after GIRO arrangement has been approved, usually takes 3-4 working weeks as this is dependent on your debiting Bank processing. If GIRO Debit Instruction has been in place, do ensure it is within withdrawal limit & there is sufficient fund balance in the bank account for processing. <input type="checkbox"/> Cheque Please find enclosed Cheque Number _____ of \$ _____ (Gross Refund exclude MDR), made payable to UNITED OVERSEAS BANK LTD. Mail cheque and letter to: UOB Card Operations Processing Centre (Merchant Payment) Robinson Road P.O. Box 1688 Singapore 903338		

2) Manual Charge to the following Credit Cardholder

MID to perform Manual Charge			
Card Type*	<input type="checkbox"/> Visa/MasterCard/JCB <input type="checkbox"/> UPI		
Credit Card Number (last 4 digits)	Card Expiry Date (MM/YY)		
Transaction Source*	<input type="checkbox"/> Retail <input type="checkbox"/> Dynamic Currency Conversion (DCC) <input type="checkbox"/> Installment Payment Plan (IPP/EPP) (Tenure: _____ months) <input type="checkbox"/> Mobile Payment (e.g. ApplePay, Samsung Pay, UOB Mighty Pay, etc) <input type="checkbox"/> E-com eNETS <input type="checkbox"/> E-com MIGS/MPGS <input type="checkbox"/> E-com CYBS		

*Please tick if applicable.

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Transaction Amount to Charge	\$ _____	Transaction Currency (SGD, USD, etc)	
Reasons for Manual Charge*	<input type="checkbox"/> Undercharge <input type="checkbox"/> Terminal Error <input type="checkbox"/> Others (pls specify): _____		
Attachment for Manual Charge (Mandatory)	Yes, I have included the following: <input type="checkbox"/> Credit Card Slip <input type="checkbox"/> In-house receipt / Itemized View <input type="checkbox"/> Tips Adjustment		

3) Manual Settlement

MID to perform Manual Settlement	_____		
Date of Original Transaction (DD-MM-YY)		Time of Transaction (HH-MM)	
Transaction Source*	<input type="checkbox"/> Retail <input type="checkbox"/> Dynamic Currency Conversion (DCC) <input type="checkbox"/> Installment Payment Plan (IPP/EPP) (Tenure: _____ months) <input type="checkbox"/> Mobile Payment (e.g. ApplePay, Samsung Pay, UOB Mighty Pay, etc) <input type="checkbox"/> E-com eNETS <input type="checkbox"/> E-com MIGS/MPGS <input type="checkbox"/> E-com CYBS		
Reasons for Manual Settlement*	<input type="checkbox"/> As advised by terminal vendor during Fault Call <input type="checkbox"/> Others (pls specify): _____		
Attachment for Manual Settlement (Mandatory)	Yes, I have included the following: <input type="checkbox"/> All Credit Card Slip(s) <input type="checkbox"/> Fault Call Service Report from terminal vendor <input type="checkbox"/> Settlement report indicating settlement failed <input type="checkbox"/> Excel sheet showing with clear indications of tips amount to be charged to each transaction (For applicable merchants only)		

For manual charge or manual settlement, I understand that as the merchant, we would be fully liable should any chargeback or dispute arise from this manual charge/settlement to the cardholder(s). I am fully aware that for late presentment cases, UOB may hold payment for 6 months.

All representations made by, and undertakings and indemnities given by the Merchant to the Bank in the Indemnity For Taking and Accepting Instructions by Facsimile, Telex and Email are deemed to be repeated by the Merchant and shall apply to this Manual Refund & Manual Sales Adjustment Form.

SIGNATURE OF AUTHORIZED SIGNATURE

NAME

COMPANY STAMP

FOR BANK USE ONLY

Received By : _____

Received Date : _____

Processed Date : _____

*Please tick if applicable.

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