



Doctor/Practice: \_\_\_\_\_

Phone/Email: \_\_\_\_\_

**Restorative**

- PORCELAIN FUSED TO:
  - CERAMIC
  - ZIRCONIA
  - SEMI-PRECIOUS
  - FULL CAST GOLD
- RADIANT ZIRCONIA  
(High Translucency)
- RESILIENT ZIRCONIA  
(High Strength)
- ALL-CERAMIC
- DIAGNOSTIC/TREATMENT PLAN

**Implant**

- TITANIUM ABUTMENT
  - Screw-Retained
  - Cement-Retained
- ALL-ON-X FRAME
- ZIRCONIA ABUTMENT
- TITANIUM BAR

**Prosthetic**

- Partial Dentures:**
  - FLEXIBLE
    - Tooth Try-In
    - Complete
  - CAST
    - Frame Only
    - Tooth Try-In
    - Complete
  - HARD ACRYLIC
    - 1-2 Tooth Flipper
    - 3+ Teeth w/ Clasps
      - Tooth Try-In
      - Complete
- Dentures:**
  - WAX/SETUP TRY-IN
  - RESET
  - PROCESS/FINISH  
(Premium Standard)
- Additional Selections:**
  - STIPPLING
    - Light  Anatomical  None
  - FESTOONING
    - Light  Anatomical  None
  - ECONOMY PROCESS/FINISH  
(No Stipple or Festoon)

TOOTH BRAND/MOULD: \_\_\_\_\_

- MID-GRADE  PREMIUM

REQUESTED RETURN
PATIENT APPOINTMENT

LABORATORY USE ONLY
_____ _____ _____ _____ _____ _____ _____ _____ _____ _____

Patient:  M  F \_\_\_\_\_ Age: \_\_\_\_\_

**Shade** \_\_\_\_\_ **Instructions:** \_\_\_\_\_

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Doctor's Signature\*: \_\_\_\_\_ \*Net 15

License Number: \_\_\_\_\_

Date: \_\_\_\_\_

\*Terms & Conditions are listed on the back



# Terms & Conditions

**This signature evidences a contract for the sale and delivery of the specially-manufactured goods mentioned herein, and subject to the following Terms and Conditions:**

1. *Client agrees to pay in full the stated price of all goods and services plus any late payment penalties, plus all costs of collection including, but not limited, to attorney's fees, legal expenses, lost time, and labor hours. All disputes shall be governed in all respects by Tennessee law, and client agrees to submit to the exclusive jurisdiction of, and venue in Carter County, State of Tennessee in any dispute, with Harmony Dental Creations to recover attorney's fees, court costs, and other expenses, including actual expert witness fees, if any, in addition to any other relief to which Harmony Dental Creations may be entitled.*
2. *Net 15 days. All statements must be paid in full by the statement payment date. A finance charge of 2.5% per month will be charged on all accounts unpaid after the statement payment date. All clients are required to submit credit card authorization and choose the 1<sup>st</sup> or 15<sup>th</sup> of each month for statement payment date. Submitting these details can be done on the phone with Harmony Dental Creations, or by logging into the secure online portal. Harmony Dental Creations does NOT retain credit card information. The only information retained is the last four (4) digits of the card. All cases and items sent to client, or kept within Harmony Dental Creations, remain the property of Harmony Dental Creations until the account is paid in full.*
3. *Each work order or work authorization filled, or appliance fabricated, constitutes a complete and separate transaction to be invoiced and collected as such. Acceptance of new orders by Harmony Dental Creations shall not represent any accord and/or satisfaction, and shall not relieve client of any indebtedness to Harmony Dental Creations.*
4. *Harmony Dental Creations may at any time with or without prior notice, require a deposit or cash on delivery (C.O.D.) for goods and/or services rendered.*
5. *Any use, sale, transfer, modification of the appliance or failure to reasonably notify and return the appliance within 15 days to Harmony Dental Creations shall constitute acceptance by the client.*
6. *Any defects in returned goods will be settled on a case-by-case basis in accordance with the terms and conditions of Harmony Dental Creation's warranty.*
7. *The client must examine all appliances and determine their fitness for any intended usage. THERE ARE NO EXPRESS WARRANTIES AND NO IMPLIED WARRANTIES OF FITNESS FOR A PARTICULAR PURPOSE GIVEN BY HARMONY DENTAL CREATIONS.*
8. *This aforementioned transaction shall be governed by the laws of Tennessee. By signing and/or sending this work order form (or any substitute thereof), client agrees to all terms and conditions herein.*
9. *Harmony Dental Creations is not liable for any incidental or consequential damages, including inconvenience, lost wages, chair time, or pain and suffering of client or patient(s).*
10. *Harmony Dental Creations reserves the right to change terms and conditions at any time, with or without notice. This writing evidences the complete and final expression of the agreement.*

## ENCLOSURES:

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423-518-1000

📍 308 W. G St., Elizabethton, TN 37643

[WWW.HARMONYDENTALCREATIONS.COM](http://WWW.HARMONYDENTALCREATIONS.COM)

