

Terms and Conditions

By the Dentist submitting this form ("Agreement") to Perfect Smile Dental Ceramics, Inc. (Perfect Smile) the dentist agrees to a contract for the sale and delivery of the specially manufactured goods herein ("Product"). This Agreement is subject to the following terms and conditions.

1. Payment is due in full after receipt of goods. Dentist agrees to pay in full the stated price of product plus any late payment penalties plus all cost of collection, including but not limited to, attorneys fees if any. Dentist further agrees to pay a late penalty of 1.5% per month charged upon unpaid balance. Such late penalty shall commence 30 days after receipt of monthly statement. In the event that any order submitted by Dentist is cancelled for any reason before shipment, Dentist shall pay any loss or damage to Perfect Smile Dental Ceramics, Inc.
2. Dentist has the right to inspect Product prior to acceptance in a reasonable time and reasonable manner. Failure to reasonably notify and return Product within 10 business days after receipt of Product to Perfect Smile shall constitute acceptance. Other forms of acceptance include, but are not limited to cementing Product in the mouth or requesting a change of shade, preparation, bites or design modification of any sort.
3. Where Dentist rejects nonconforming Product and such nonconformance is the fault of Dentist, Dentist must give Perfect Smile the opportunity to provide a conforming tender within a reasonable time and Dentist bear the burden of all related costs, including but not limited to the costs of Product and shipment. Where Dentist rejects nonconforming Product and such nonconformance is the fault of Perfect Smile, Dentist must give Perfect Smile the opportunity to provide a conforming tender within a reasonable time at the original contract price.
4. Should Perfect Smile fail to provide a conforming Product in a reasonable time, Dentist's remedies are limited to the return of the goods and repayment of the contract price or to repair and replacement of nonconforming Product by Perfect Smile Dental.
5. Where Dentist requests remanufacture of a Product, Dentist agrees to resubmit all original goods including but not limited to original impressions, models and restoration(s). Perfect Smile must have original goods to assess possible restoration replacement or repair cost to Dentist and to determine if original Product is repairable or necessitates remanufacture.
6. Dentist must thoroughly and carefully clean all blood and saliva from all materials used in the mouth, and disinfect all of these items before sending to laboratory.

Additional fee will be added to those cases depending on the current market price for metal

Time Schedule

10 Business Days

Rush Schedule

All Rush Cases Must be Pre-Approved

6 days rush charge – \$25/per unit

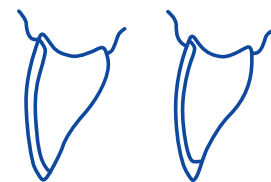
5 day rush charge – \$25/per unit

4 day rush charge – \$50/per unit

24 hour rush – Call Lab

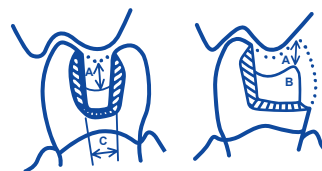
Preparation Guidelines for All Ceramic/Composite

A. 0.7 to 1.0mm labial reduction



Porcelain Laminate

- A. 1.5 – 2.0mm reduction.
- B. Round all sharp line angles.
- C. Proximal and Occlusal walls should have 6–8 degrees taper.



Inlay/Onlay

Labial
Lingual = 1.0 – 1.5mm
Interproximal



Metal - Free Crown

FOR OFFICE USE ONLY

PERFECT SMILE DENTAL CERAMICS QUALITY CONTROL CHECK LIST

DATE	NAME	
	MODEL WORK	
	ARTICULATION	
	DIE TRIM	
	WAX UP	
	METAL FINISH	
	OPAQUE	
	PORCELAIN MARGIN	
	BUILD UP	
	GLAZE	
	POLISH	
	REPAIR	
	*Quality Control Check *Microscope Check	
	ARTICULATION	
	MORPHOLOGY	
	OCCLUSION	
	CONTACT	
	METAL - FIT	
	MARGINS	
	PORCELAIN MARGIN	
	GLAZE	

***Signature _____