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"PATIENT'S FINANCIAL AGREEMENT"

Dear Patient, Parent or Guardian:

It is the policy of our office that payment in FULL be received at the time of service. If you have dental insurance, your DEDUCTIBLE and CO-PAYMENT is due when service is rendered.

Treatment claims will be submitted to your insurance company ONCE according to the coverage information given to us by you. However, if your insurance company fails to respond to claims within 4-6 weeks, you will be responsible for your full balance. When payment is received from your insurance company, it will be credited to your account.

An interest charge of 1.5% will be charged to your account after 35 days of service rendered unless other arrangements have been made.

An optional monthly payment plan is available after a treatment plan is devised. Interest charge of 1.5% will automatically be charged to your account monthly. There will be no penalties if accounts are paid before the agreed upon payment plan time.

Accounts are due as professional services progresses, regardless of insurance activity or inactivity.

I have read the above policy and hereby agree to follow the above policy.

Signature

Date