

Phone: (561) 508 - 4453 info@pbdentlab.com

Prescription				
	SH	HADE		
Dr. Signature				
Licence No				

Address: _ Phone: _			
Patient Info Name: _	ormation:		
Sex M	] F 🗌	,	Age:
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	32 31	1.00	

## Terms & Policy:

By signin or sending this RX slip (or a sustitute there for) to PB LAB. I agree to abide by all the following terms and policies.

PB LAB is not liable for incidental or concequential damages. Including inconvenience, lost wages, chair time, or pain and suffering. All statements must be paid in full the 15th of the month in which incur 2% finance charge and the account will be placed on C.O.D terms. All cases will be billed and payable in stages.

## Warranty

What is Covered. Subject to the terms and conditions set forth below, PB LAB offers a ONE- year warranty on fixed and removable restorations as follows: work is guaranteed to be free of defects due to materials and workmanship and the appliance is guaranteed to fit the provided model and to be constructed to the design requested on the prescription form. The warranty runs from date a restoration request is received by PB LAB.

No warranty on immediate dentures /partials.

Exclusions. The following shall not be covered by PB LAB warranty: (i) cost refunds for custom-made restorations; (ii) costs incurred for removal or insertion; (iii) repairs resulting from accident, neglect, abuse, failure of supportive tooth structure or tissue structures, improper adjustment or dental hygiene; or (iv) restorations partially fabricated or completely fabricated by any lab other than PB LAB.

How the Warranty Works. If during the applicable warranty period the client experience any problems with its restoration that are covered by the warranty as described herein, the client may elect to receive as follows: (i) Credit - within 30 days of request by client, a credit will be issued and applied to client's account; or (ii) Remake / Repair during the warranty period, PB LAB will remake or repair the restoration provided (lvf the client elects to change the materials for such restoration, the original cost of the restaration will be credited and the new costs invoiced).

Conditions. In order for client to receive the benefits of the warranty, client agree as follows: (i) client must provide PB LAB with proof- of- purchase, including an invoice and patient name; (ii) the original dental restoration (including any damaged pieces, model work) must be return; (iii) the restoration must be inserted by a licensed, practicing dentist; and (iv) if PB LAB request a new impresion, but is instructured by client to proceed without the new inpresion, the warranty shall be null and void and any further remakes will be completed at full cost.