

3246 W. Grant Line Rd, Tracy ,Ca 95304 www.theelitedental.com Ph: 209 213 7808 Fax: 209 213 7812 info@theelitedental.com

## **Office Financial Policies**

**Debit / Credit Cards** – We accept Visa, Mastercard, American Express, Discover along with Apple Pay and Samsung Pay and all debit cards.

Cash – Always welcome

**Payment Plans** – Available through Lending Club, no interest financing upon approval of credit application.

**Cheques** – No personal cheques accepted.

**Insurance** – Patient Portion (copy) will be estimated and due at the time services are rendered. As a courtesy to our patients, we will submit all necessary information and bill your dental insurance company. You are ultimately responsible for your bill regardless of insurance coverage. Please take the time to understand your policy.

**Emergencies** – New patients will be seen on a cash basis unless insurance coverage can be verified.

**Cancellations** – Please provide us with no less than 48 Hour Notice if you are unable to keep your appointment. If less than 48 hours, you will be subject to a \$25.00 late cancellation fee.

**Collections** – Any delinquent account sent to collection will incur a 35% fee to cover collections.

I have reviewed and understood the above financial policies.

Patient / Guardian Signature:		Date:
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