

# Credit Account Application

Head Office 02 97892701

CLIENT DETAILS					
Full or Legal Name:			ACN: ABN:		
Trading Name: if different to above			AHPRA #		
Phone:			Email:		
Practice Address:					
Phone & Email for Accounts and Technicians					
Phone for Technicians:	Email for		or Technicians	5:	
Phone for Accounts:	Emai		il for Accounts	Ď:	
	•				
Dentists to be invoiced under same account					
Full or Legal Name:		AHPRA#		#	
Full or Legal Name:			AHPRA 7	#	
Full or Legal Name:			AHPRA 7	#	
Full or Legal Name:			AHPRA 7	#	
Full or Legal Name:			AHPRA 7	¥	

## TERMS OF TRADE

- 1. All invoices are to be paid 30 days from the date of the invoice.
- 2. Claims arising from invoices must be made within fourteen days.
- 3.By submitting this application, I confirm that I hold a valid APRAH registration.
- 4.By submitting this application, you are taken to have read and accepted the terms and conditions annexed herewith.
- 5. If signed by owner/principal dentist you assume responsibily for all dentists listed on this application.

Authorisation			
Signature			
Position			
Date			

### VTS DENTAL LAB PTY LTD - TERMS & CONDITIONS

These general agreed terms apply to all transactions between us. Other documents relating to our transactions will include any specific terms and conditions.

Price means our fixed and published price, or the amount agreed between us in writting or the amount established by a course of dealing between us. The price unless otherwise agreed does not include delivery costs.

The observation of agreed time frames is of primary importance, in particular the due date for payment of invoice.

If you must make a payment on or by a day that is not a business day you must make the payment on or by the next business day. If you are in default under our agreement, we may send you a default notice. The notice will tell you what the default is and what you are required to do to correct the default. You will have 14 business days to rectify the default.

If you do not comply with the default notice you become immediately liable to pay us all money owing with interest on that amount from the due date until payment at the rate of 7.5% per annum.

You also agree to pay on default all costs and expenses incurred in exercising our rights of recovery.

Unless otherwise agreed risk passes to you at the time, we ship your order from our ordinary place of business to your specified location. You assume all responsibility for filing claims for damage against the carriers and other agents. You must insure the goods against loss or damage until payment has been made to us.

You represent and warrant to us that all information and representations that you, or any person acting on your behalf has given in connection with our transactions are true and correct and that you have not failed to disclose to us anything relevant to our decision to have dealings with you and that no court proceedings or dispute is current that may have an adverse effect on performing your obligations under this agreement. Your right, as against us to retain or dispose of the goods or services delivered or supplied is conditional upon you honouring our payment arrangements.

If you fail to make payment within 30 days of the invoice and wish for your account to remain open with us, we will impose restrictions on your account such as witholding goods and demanding payment within 14 days of the invoice date to offset risk.

On default in payment and failure to make payment within 2 months of the invoice date, we will use debt collection agency to recover costs. Inclusive of costs is a penalty interest rate of 7.5% per annum, accumulated daily until the invoice is paid. You also agree to indemnify and hold us harmless for all reasonable costs and expenses of recovery of the goods and losses.

#### VTS Dental Lab Pty Ltd - Remake Policy

Remakes are free of charge if VTS is at fault and will be prioritised.

Failure to provide all components of the original case back will result in a full charge of the item.

We require all items to be returned in order to assess the case and why there is an issue with the product, this includes but is not limited to the Model and the prosthetic.

If a Remake is cancelled by the client the full charge of the original prosthetic will still be charged in full.

All remakes must be submitted with a reason for remake and must be approved by a manager and technician prior to commencement.

Customer Care representatives can only advise ETAs once the case has arrived, been approved and commenced production. Remakes will be charged in full if we contact you in regards to the design, die, margin, bite or impression for a case and you decline recommendation, approve and or ask us to proceed.

Delivery fees may apply for any remakes that client is liable for.

Any remakes due to misinformation or incomplete data will be billed to the client for example, shade change, incorrect bite provided or wrong tooth written on a request.

If requested a new scan or impression, bite registration will need to be provided.

Clients will be billed for remakes/adjustments if the original prosthetic fits the original model or if the operator changes (or adds to) the instructions, item, material, design, shade, a new impression, prep or directly adjacent and occluding teeth are altered.

When requesting Design Approvals; Once you approve the design you will be liable for any changes or additions after the design has been approved.

Cobalt Chrome Framework needs to be accompanied by a design request and approval in order to qualify for VTS remake liability. Chrome Cobalt Framework and Acrylic processing needs to have a set up stage in order to qualify for remake, direct finish on Cobalt Chrome Framework is not advised and remakes will not be covered by VTS.

First denture setup retry is free, second charged at 50% and if any further required full price will be charged each time.

If you request "No Model" in order to save costs we are unable to assess fit accurately and will not accept liability for any items provided with this request..

Remake requests must be submitted in writing to info@vtsdental.com.au for approval with all supporting information.

Customer care, Technicians and accounts team will not be able to waive invoices or discuss cases with you until the request is submitted via email and the case is returned in full.

All remake cases are reviewed by a manager and technician to assess why there is a problem, once the issue has been identified an answer will be provided by email.

Any remake that is submitted will be charged in full if this process is not adhered to.

#### VTS Dental Lab Pty Ltd - Cancellation Policy

Please thoroughly read our cancellation policy below;

If you decide to cancel a case after submitting it to VTS Dental Lab the full or partial fee will be charged depending on the stage of production. This varies greatly depending on the type of job ordered and when it is cancelled. If production has not been started there will be no charge for the case, please keep in mind production will start within 24 hours of being received.

If a Remake is cancelled by the client the full charge of the original prosthetic will still be charged in full.

I hope you understand if we cancel jobs after they have been started and/or finalised we need to charge the client as we have already used our time and products to make the case.

If you need to cancel a case you must submit the request in writing to the operations manager at info@vtsdental.com.au using our reference for the case in the title [CASE ID & NAME]

If there are any physical items that have been sent to our office which you need returned, delivery charges will apply.

## VTS Dental Lab Pty Ltd - Invoicing Terms & Conditions

Adjustments to accounts will only be considered if requested within 14 days of the invoice being issued. This means that if you have any concerns or issues with your purchase, you must notify VTS Dental via email <a href="mailto:info@vtsdental.com.au">info@vtsdental.com.au</a> as soon as possible in order to be eligible for a replacement product or service. After this period, such requests may not be entertained. It's important to adhere to this time limit to ensure your eligibility for any potential resolutions. Please ensure all supporting documentation and photos are attached to your email to support your enquiry.

#### VTS Dental Lab Pty Ltd - Warranty Policy

If you need to claim warranty on an item please ensure your request is provided by email with all supporting information, including a photo, prior to submitting the case. If you submit the claim and case at the same time please note this on the labsheet to ensure you do not receive any unnecessary invoices.

Warranty claims are only eligible for replacement of the exact same item, If you believe the case requires a different material or item type this will not be covered by VTS and a new order should be placed.

All warranty claims must be submitted with supporting information through email to info@vtsdental.com.au