



DENTAL LABS
 1800 9th Avenue North
 St Petersburg, FL 33713
 1.866.561.9777
 Fax 727.573.1151
 www.sundentallabs.com

Doctor's Name/Account Number or Referring Dental Lab _____

Address _____

City _____ State _____ Zip _____

Phone _____ Fax _____

E-mail _____

Patient's Name _____

Date of RX ____/____/____ Requested Return Date ____/____/____

LAB USE

IMPRESSION WAXUP DENTURE CROWN
 ARTICULATOR BITE FRAMEWRK PYMT
 MODELS BITE BLK PARTIAL CASES
 Postage REGULAR OVERNIGHT

FIXED RESTORATIONS

Shade _____

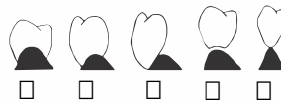
Occlusal Staining

Tooth Number (s) _____

Restoration

- Crown Inlay/Onlay
- Veneer Post & Core
- Bridge

Pontic Design



Design Details

- 360° metal margin _____ mm
- Porcelain Butt Margin*
- Metal Lingual Collar
- Other _____
- 3/4 Metal Occlusal*
- Metal Lingual*
- Metal Occlusal*
- Diagnostic Wax up*

*Additional Charge

ALL-CERAMIC

COMPOSITES/ TEMP

- SunCeram Translucent Zirconia Gradia
- Suntech Full Zirconia Suntech Temporary Crown
- Suntech Layered Zirconia
- Suntech Zirconia Coping Only
- e.max Pressed

PFM CROWNS

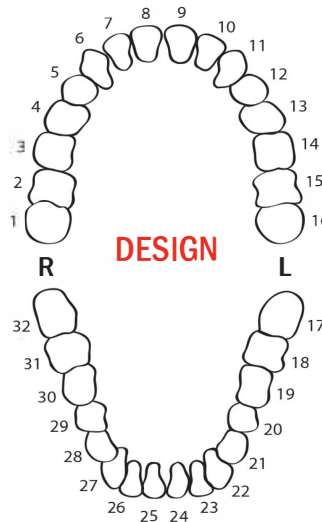
FULL CAST

- Non-Precious Non-Precious
- Semi-Precious Semi-Precious White Gold
- High Noble White Gold Semi-Precious Yellow Gold
- High Noble Yellow Gold High Noble White Gold
- Captek High Noble Yellow Gold
- Cast Post & Core
- Y+ 2% Gold

IMPLANT ABUTMENTS

- Stock Titanium
 - Custom Milled Zirconia w/Ti insert - Hybrid
 - Hader Bar
 - Cast Overdenture Frame
 - Screw Retained
- Implant System _____
 Diameter _____

of Clips or Locators _____



If an adjustment is needed:

- Adjust opposing
- Adjust abutment
- Call the office

DOCTOR SIGNATURE _____

License# _____

**REQUIRED
 REQUIRED**

REMOVABLE RESTORATIONS

Check all that apply Other _____

- Upper Lower Try-in Finish Cusil Style
- Denture Immediate/Surgical Denture Bite Block
- Extract Tooth# _____ Extract All Extract Now Extract After Try-In

Teeth (Stock teeth used if no option is selected)

Tooth Shade _____ IPN Portrait* Gold Open Face* Full Gold*

Sunflex Partials

Sunflex Shade

Clasp Type

- Sunflex Light Pink Cast* Wire*
- Sunflex Cast Frame Combo Pink Flexible*
- Sunflex Vitallium 2000+ Frame Combo Medium Meharry Sunclear*
(Can NOT combine SunClear clasps with SunFlex)
- Sunflex Unilateral (Maximum 2 teeth) Dark Meharry

Acrylic Partials

Acrylic Shade

Reinforcement

- Suncast Frame w/Acrylic Lucitone 199*
- Vitallium 2000+ w/Acrylic Pink
- Sunclear Frame w/Acrylic Light Pink
- Flipper (1 Tooth All Acrylic) Light Meharry
- Acrylic Partial (No Frame) (Wrought Wire Clasps) Medium Meharry
- Dark Meharry

Metal Frameworks

- Suncast Framework Only
- Vitallium 2000+ Framework Only

Sunclear Frameworks

- Framework Only

Valplast Partials

- Valplast
- Valplast Cast Combo
- Valplast Vitallium 2000+ Combo

Design

- Horseshoe Palate
- AP Open Palate
- Full Palatal Metal Coverage
- Palatal Strap
- Metal Occlusion
- Rests
- Lingual Apron
- Precision Attachments*
- Lingual Bar
(Best design is fabricated if no option is selected)

Attachments* ERA PD Hader Bar Other _____

OTHER

Repair

**Night Guards/
 Bite Splints**

Other*

- Reline Rebase
- Basic Repair
- Soft Liner
- Add Tooth # _____
- Soft Hard
- Hard/Soft 2mm
- Hard/Soft 3mm
- Surgical Stent
- Base Plate/Bite Rim
- Custom Tray
- Duplicate Model
- Epoxy Model
- Patient Name in Denture

*Additional Charge

Sun Dental Labs Terms & Policies

By signing or sending this Rx Form (or a substitute thereof) to Sun Dental Labs (SDL) I agree to abide by all the following terms and policies. SDL is not liable for incidental or consequential damages, including inconvenience, lost wages, chair time or pain and suffering.

Terms

All statements must be paid in full by the 15th of the month in which the statement is prepared. Amounts not paid will incur a 1.5% finance charge. If not paid by the end of the following month, all cases in progress will be put on hold and billed for accordingly.

All cases and items sent remain the property of SDL until account is paid in full. A \$35.00 minimum will be charged on all returned checks. All disputes shall be governed by Florida Law with venue in Pinellas County, with the prevailing party to recover all fees and expenses.

Remake & Warranty Policy

The cost for fabricating custom made dental appliances can not be refunded. A credit may be issued by SDL directly to a customer's account when cases do not meet SDL's standards for quality, function and aesthetics. Any credit balance on a SDL account must be used for lab services within 60 days from the date of issue or it will expire.

Immediate partials and dentures as well as veneers are ineligible for remake credit.

Remake Policy

Eligible remakes will be done at no charge if received within 60 days of invoice date. Original model(s) and dental restoration(s) must be returned for credit consideration.

New case will be billed if remake is required due to any of the following:

1. There is a shade or product change different from the original request
2. Lab questioned die, margin, impression or bite and was advised to complete case
3. Lab requested a try-in, customer declined and asked for a completed case
4. Abutment required reduction due to undercuts/clearance and/or the teeth were re-prepped
5. The partial denture fits the master cast

***** All warranty terms and conditions are subject to change without notice.**

Warranty is for two years from the date of delivery. Limited 60 day warranty on Orthodontic appliances, nightguards, and any repairs. This warranty is in lieu of all other warranties, whether expressed or implied and may not be modified by any agent, employee, representative or distributor of Sun Dental Labs, LLC.

IMPORTANT PRICING TERMS & CONDITIONS

All prices are quoted/billed per stage. Some products are subject to additional fees, e.g. bridge connectors, additional implant parts, multiple stages, and metal surcharges.

Fabrication starts the day SDL receives the case. Cases cancelled after fabrication is initiated will remain billed at full cost.

Please visit www.sudentallabs.com for more detailed warranty information.

Our Turnaround Times*

Full Zirconia Single Unit Crowns	7 days in lab
Layered Zirconia Crowns, Zirconia Bridges - Layered or Full	9 days in lab
CAD Zirconia Copings (from prepared model or impression), bite rims, custom trays, duplicate models	3 days in lab
Acrylic repairs/relines, add wire clasps to acrylic partials, night guards	7 days in lab
Removable restorations, all flexible partial repairs, all other crowns and bridges, and implant cases	9 days fabrication

*Working times are **NOT** guaranteed and do **NOT** include weekends or holidays..

*Any cases with no due date listed may be subject to up to 2 extra production days.

Shipping

The charge to ship using our label is \$12.50 per box. You may put as many cases as you wish into the box. Price is subject to change without notice.

If using SDL shipping labels, please call respective carrier for pick-up. SDL provides a maximum of \$100.00 insurance for the contents of the package when using our label.

You may also schedule a carrier pick up and create a shipping label using SunAccount.

US Overnight Shipping \$19.50

****Mandatory- PLEASE INCLUDE Licensed Dentist SIGNATURE and LICENSE NUMBER ON Rx****