Wada Precision Dental Laboratories U.S.A. Co., Ltd.

				Office Address	
Removable RX				Phone	When is a good time to call you for question?
Doctor:	Office:			E-mail :	□Telephone □E-mail
Patient:	M F Age. Due Date	/	:	МЕМО	
<ul> <li>☑Please check the corresponding item:</li> <li>☆ DENTURE TYPE</li> <li>□ Complete Denture</li> <li>□ Partial Denture</li> <li>□ Flipper</li> </ul>	•	ework	<b>REPAIR</b> Fracture Rebase Reline Add Teeth		
♦ MATERIAL □Acrylic Resin □Thermoplastic Resin	<ul> <li>CUSTOM TRAY &amp; BITE PLATE</li> <li>Custom Tray</li> <li>Base Plate &amp; Bite Rim</li> <li>Bite Rim with Metal Frame Work</li> <li>Base Plate Only</li> </ul>	□ F	Economy Regular Premium «Extra Charge		al Laboratories U.S.A. Terms And Conditions
CASE DESIGN		★CASE DES Major Connector ★UPPER	IGN Lab Select	not fitting in the patients mout WADA Precision Dental Labora charge. The warranty period for deliver the price will be charged for re	master models, any redo's because complete, partial, etc th properly, but does fit the master models is not considered tories U.S.A.'s mistake and will not be reconstructed free of red products is one year from the date of delivery. 100% of emanufacturing of products that have passed this period. efore the appropriate work schedule time frame will be
<sup>3</sup> <sup>2</sup> UPPER	□Platal Plate □Horseshoe □Closed Horseshoe □Full ★LOWER		considered rush and are subjec ☆All cases come with one guarar for each appliance. Any furthe	ct to minimum \$39.00 rush charge. nteed free of charge try-in which is included in the total price r try-in are subject to \$35.00 each.	
LOWER		Lingual plate	 Tooth#	Dental Laboratories U.S.A. ☆If the responsibility is unknown determined after consultation	or impressions will not be guaranteed by WADA Precision n, or if both parties are responsible, the redo fee will be with both parties. However, we will separately charge ee and material fee such as attachments required for redo.
$\begin{array}{cccccccccccccccccccccccccccccccccccc$		□ Mesial □ Distal □ Lingual Rest			n Dental Laboratories U.S.A. Co., Ltd.
27 26 25 24 23 27 26 25 24 23	Clasp Akers	Tooth#		Road Farmers Branch, Texas 75244	
Dentist Signature		RPI		• •	00)000-0000 Fax(000)000-0000 ttps://wadapdlusa.com
Dentist License No.			i	11	