

DI LORETO DENTAL CARE, PC

20690 Vernier Rd, Harper Woods, MI 48225 PH: 313-884-3050

Patient Name _____ Date _____

The investment for dental treatment \$ _____
Less estimated Insurance* \$ _____
Patient Responsibility \$ _____

Dental Treatment is an excellent investment in an individual's medical and psychological well-being. Financial considerations should not be an obstacle to obtaining this important health service. Being sensitive to the fact that people have different needs in fulfilling their financial obligations we are providing the following payment options.

Payment Options

☐ **Flexible Monthly Payment Options (Dental Fee Plan)**

- No initial Payment
- Payment plans up to 60 months with monthly payments as low as \$ _____ which includes a low fixed rate
- Additional payment plans are available
- Prepayments can be made anytime without penalty
- Fast, confidential service by phone (800 204-3332), or on-line at DFP's **secure** Web Site www.dentalfeeplan.com

☐ **Interest Free Option (Dental Fee Plan)**

- Multiple Interest Free Terms available
- Minimums as low as \$300
- No interest charges if paid within the specified time period
- Retroactive finance charge of 19.99% applies if treatment fee is not paid during the Interest Free Period. *Please note the required minimum monthly payment will be based on the terms of your loan.*
- Fast, confidential service by phone (800 204-3332), or on-line at DFP's **secure** Web Site www.dentalfeeplan.com

☐ **Care Credit**

- Credit card for health care costs
- Interest free payment plans up to 12 months with payments as low as \$ _____
- Interest retroactive at _____% of a payment is missed or not paid in full within the Interest Free period.

☐ **Payment in Full**

Payment in full is required when treatment begins. For your convenience, we accept **Visa, MasterCard, and Discover**, as well as **cash or check** for in house payments.

Patient Signature _____ Date _____

*** If for any reason the estimated amount is not paid by your insurance company, it becomes your responsibility**