1-866-545-6190 • www.streamlinedental.com

STREAMLINE DENTAL

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REMOVABLE RX

REPAIRS	☐1 or 2 Teeth or Fracture ☐Add 3+ Teeth ☐Reline ☐*Add WW Clasp* ☐*Flexi Clasp*
FLIPPERS	☐Acrylic 1 Tooth ☐Acrylic 2-4 Teeth ☐*Add WW Clasp* ☐*Flexi Clasp* ☐Flexi 1 Tooth ☐Flexi 2-4 Teeth
FLEXI PARTIALS	☐Custom tray ☐Bite Block ☐Wax Setup ☐Flexi Finish
RPD FRAMES	☐Custom tray ☐Standard Framework ☐Vitallium 2000® Framework ☐Wax Setup ☐Acrylic Finish ☐Lucitone 199® Finish ☐*Flexi Clasp*
ACRYLIC DENTURES	☐Custom tray ☐Bite Block ☐Wax Setup ☐Acrylic Finish ☐Lucitone 199® Finish ☐*Add WW Clasp* ☐*Flexi Clasp* ☐*Mesh Reinforcement* ☐*Add Name in Denture*
GUARDS	☐Comfort Hard/Soft ☐Hard ☐Soft ☐Bleaching Tray *Select:* ☐*Upper* ☐*Lower*

Rx

TOOTH TYPE: ☐Lab Stock ☐Premium Mondial ☐Premium Other _____

TOOTH SHADE: _____ **GINGIVAL SHADE:** ☐Std Pink* ☐Lt Pink ☐Lt/Dark Pink ☐Dark Pink

Signature:_____ **Date:**_____ **Lic #**_____

For Streamline Dental Use Only

Doctor Name and Address

Tel:

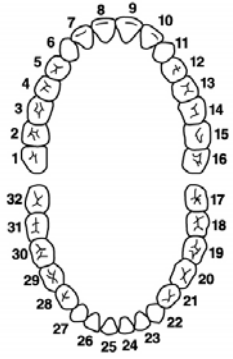
Email*/Fax:

Patient: _____
First Last No.

Due By 5pm On: _____

☐Rush Same Day ☐Rush Next Day

Please send: ☐Rx ☐Bags/Boxes ☐Shipping Labels



Client agrees to be bound by terms and conditions and remake policy as listed on www.streamlinedental.com. Terms: Net 30 days or as stated on invoice. 2% service charge on past due balance. ©2015 Streamline Dental