



Financial Policy

Thank you for choosing Cat's Corner Veterinary Hospital to care for your cat. Our primary mission is to deliver the highest quality and most compassionate veterinary care possible. Furthermore, we are committed to making the cost of optimal care as easy and manageable for our clients as possible by offering different payment options. Cat's Corner Veterinary Hospital, LLC requires payment in full at the end of your cat's visit and/or at time of discharge. We only ask that you understand your responsibility and for the payment of your account balance.

Our basic financial policy is the following:

Full Payment is Due at the Time of Service

- >We accept cash, check (unless you have previously written a returned check), money order, Visa, Mastercard, Discover, and Care Credit.
- >If you have pet insurance, we are happy to provide you with the necessary documentation to submit a claim to your pet insurance company. You are still required to pay in full at the time of service, then obtain reimbursement from your pet insurance company; we do not accept payment from the insurance company.
- >If you cannot afford to pay for the care or treatment your cat needs you can apply for Care Credit.
- >Vet Billing is a final option for payment planning and requires a satisfactory soft credit check. Vet Billing is only offered if you already have Care Credit and are unable to use it, or are denied for Care Credit.
- >Same-day appointment cancellations or no shows will carry a \$65.00 fee and will be applied directly to your account.
- >Surgeries cancelled with less than 48 hours in advance or will carry a \$100.00 fee that will be applied to your account.
- >Dental procedures will require a deposit equal to 20% of the procedures total value plan. This deposit is non-refundable if the procedure is cancelled within less than 48 hours of the appointment.
- >Patients hospitalized for any reason require a 75% deposit before you leave them with us for treatment.

Your Obligation

All clients are responsible for full payment at the time of service unless specific arrangements are made prior to the start of your cat's treatment. You are responsible for payment regardless, even if a final bill is not completed at time of your visit; this includes unforeseen, add-on and overlooked charges.

Client Responsibility & Additional Terms

Accounts unpaid after 30 days from day of service are subject to a delinquent fee of \$25.00. Furthermore the unpaid balance is subject to a 1.5% monthly (18% annual) finance charge. If we have to submit your unpaid account to a collections process you will be responsible for all charges our practice incurs; including late fees, finance fees, collection cost, staff costs, court filing fees and reasonable attorney's fees. Any returned checks or credit card payments will carry an additional \$40.00 service charge.

Thank you for understanding our Financial Policy.

Please let us know if you have any questions or concerns before signing.

I have read the Financial Policy. I understand and agree to the terms of Cat's Corner Veterinary Hospital, LLC.

A picture ID is also required with your signature if we have not already verified it in the past.

Client/Pet Owner Name

Pet(s) Name(s)

Client Account #



Client/Pet Owner Signature

Date

Employee Initials