



27 Hartford Turnpike, Vernon, CT 06066
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FINANCIAL POLICY

Thank you for choosing Town and Country Veterinary Associates for your pet's healthcare. We strive to provide the highest level of veterinary care available to your pet. We realize that costs are a factor in caring for your pet. This page will outline our financial policy, which includes several different payment options. Please be aware that payment in full is expected at the time of services.

Payment Options:

We accept

- Cash
- MasterCard, Visa, American Express and Discover
- CareCredit
 - A CareCredit account offers convenient monthly payments, with no minimum amount. Additionally, the amount may be interest free for up to six months.

Deposits

For some treatment or hospitalization, a deposit may be required. The amount of the deposit can range from 25% - 50% of the total estimated bill and is due at the time services are begun.

Additional Information

Town and Country Veterinary Associates charges \$30.00 for all returned checks. We do not resubmit returned checks. If your check is returned for insufficient funds, payment must immediately be made by cash or credit card. No exceptions.

Town and Country Veterinary Associates will charge a \$68.00 deposit fee to every new client per pet. New clients who cancel less than 24 hours prior to scheduled appointment or are late, will forfeit their deposit. Any client who misses more than two appointments in one calendar year will be required to pay a \$68 fee per pet prior to making a new appointment.

For clients with Pet Insurance, we are happy to help provide the necessary documentation to you to file a claim. If you have more than two claim forms that needs supporting paperwork, you must arrange with office staff to have the paperwork prepared and allow us up to 5 business days to gather the information. Additional time may be necessary depending on the amount of documentation needed.

By signing below, you acknowledge your understanding of our policy and agree to its terms. This form must be signed and returned **prior** to the first appointment.

Client/Owner Signature

Date

Client/Owner Printed Name

Pet(s) Name

Account Number (office use only)