

DENTAL PROSTHETIC WORK AUTHORIZATION FORM

**DIVIC**

Old Dominion Dental Corp.  
2510 Waco Street  
Henrico, VA 23294  
804-285-0777

Patient or Case Number

Date

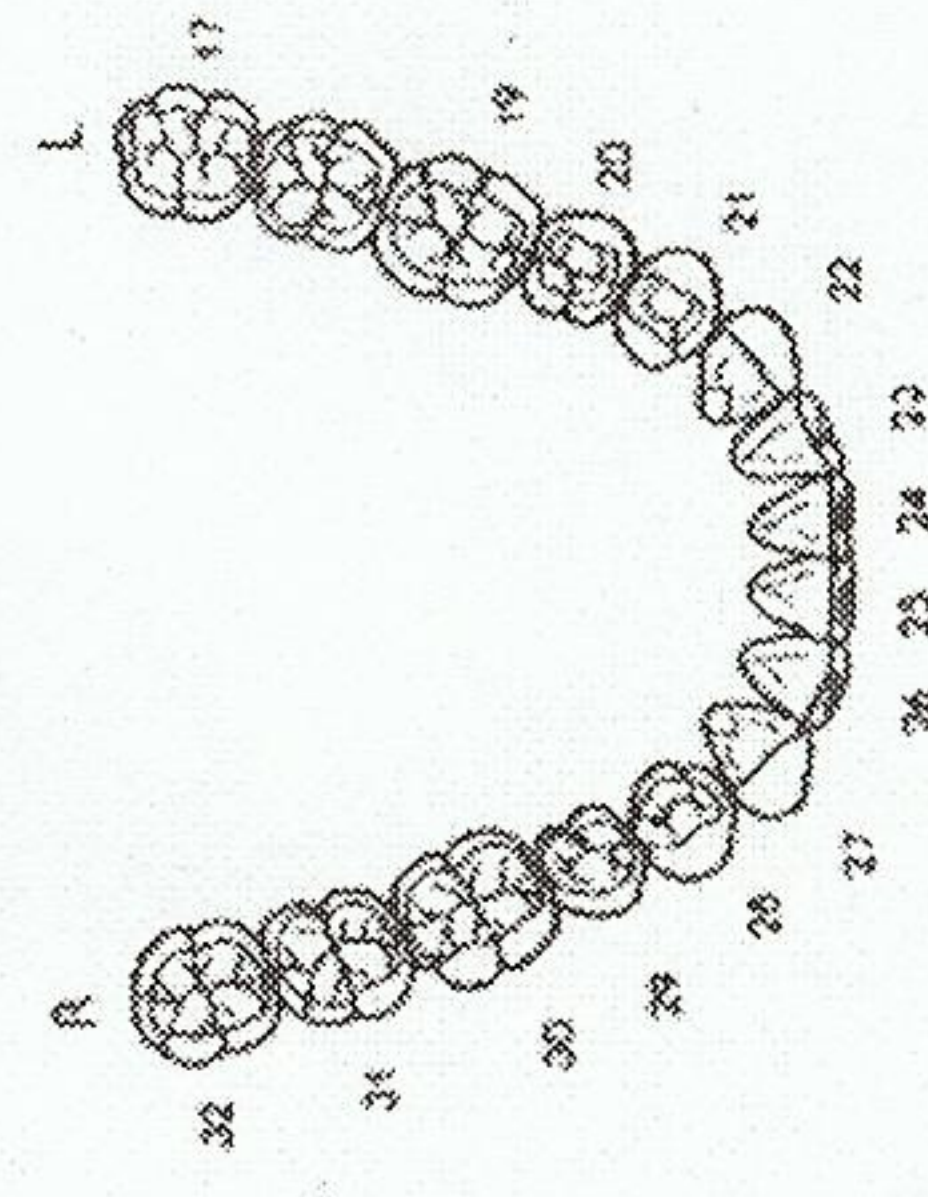
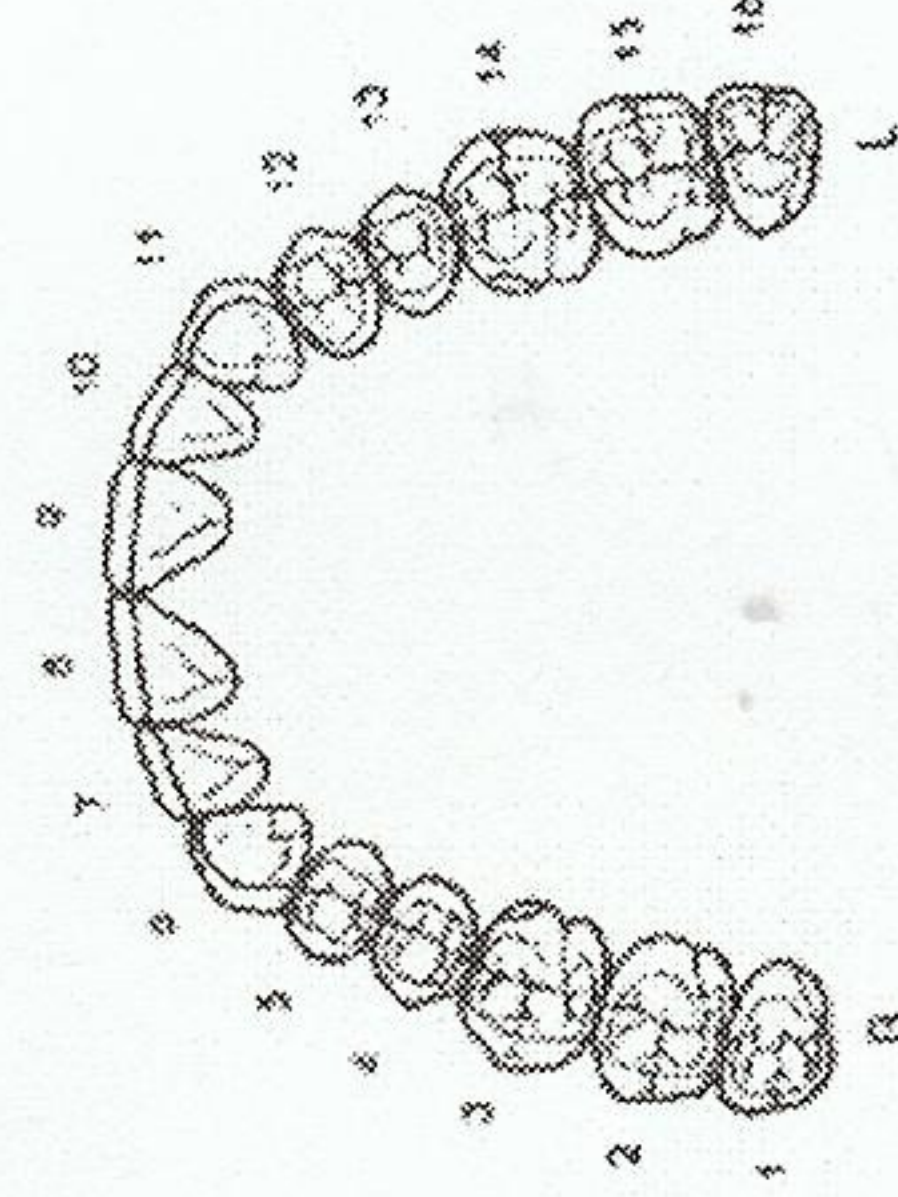
Shipping Method  UPS Ground (free with Lava or \$70+ orders)  NEXT-DAY (extra charge)  NEXT-DAY AM (extra charge)

Payment  Check enclosed  Credit Card (call to give info)  Other

Included items w/case (models, etc.)

(Please list the services you need and include any specific instructions.)

Shade



Lava Zirconium Frameworks - CAD/BLU digital patterns - casting - finishing - polishing - porcelain - implants - veneers - full cast crowns

Lab Name:

Phone Number:

(New Customers fill out below please)

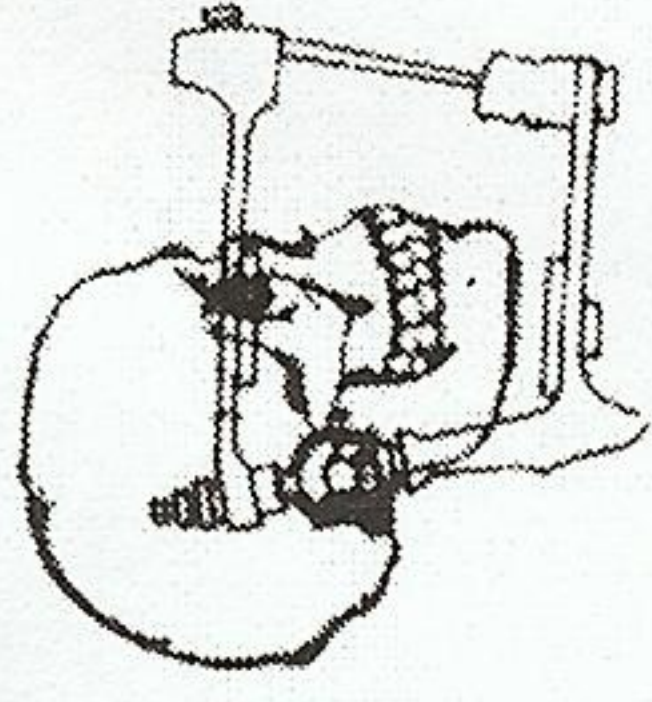
Address

City

State

Zip

Email



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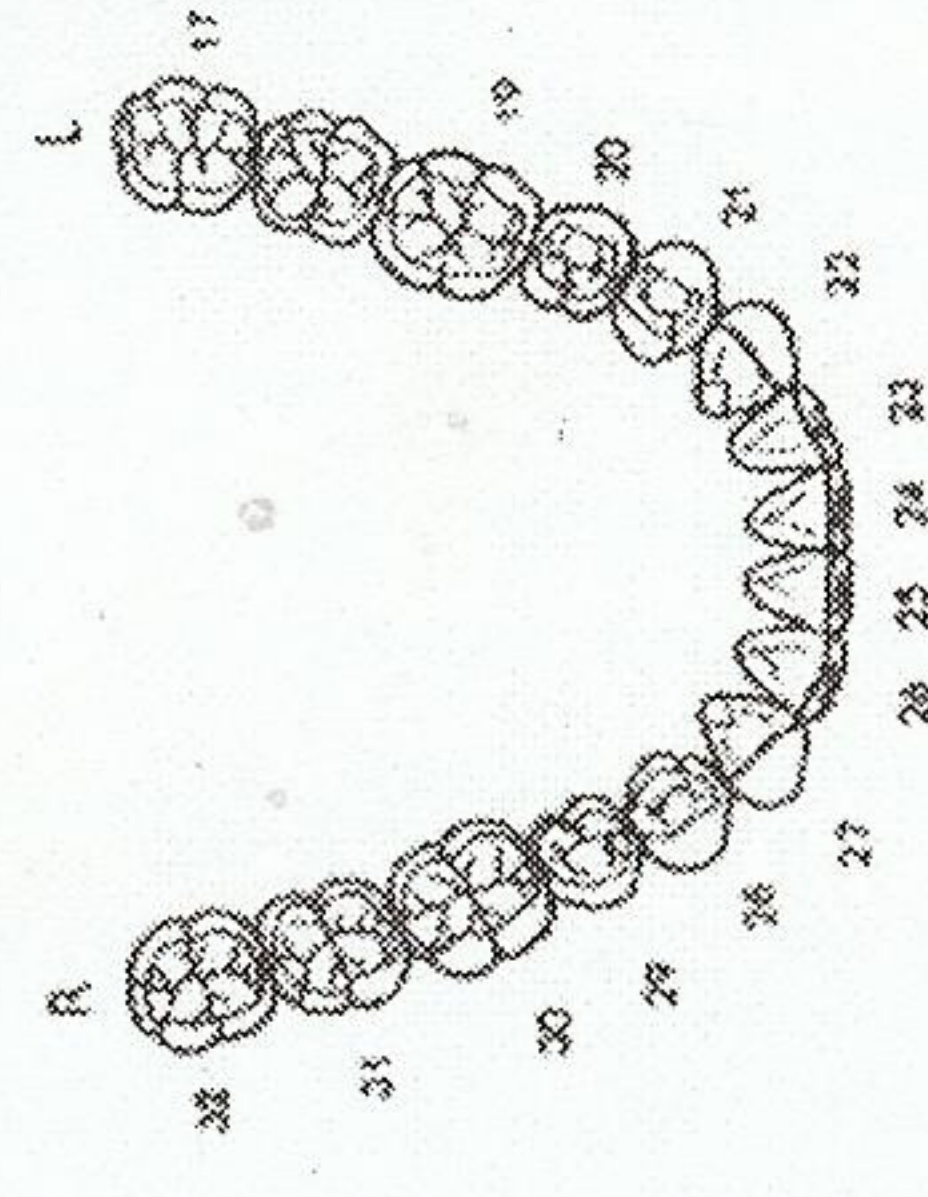
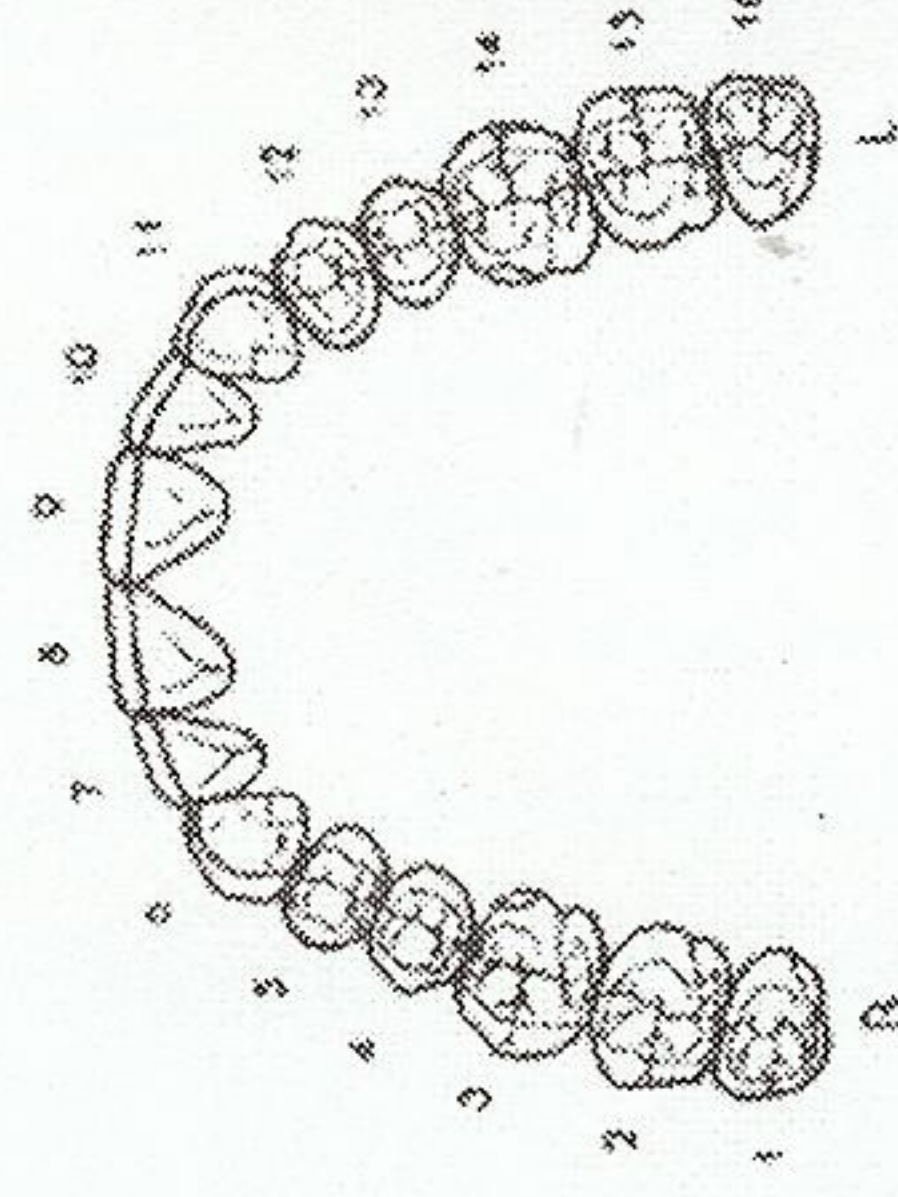
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