

FINANCIAL POLICY

As a small business, Blackstone Animal Clinic does not offer billing of accounts. Payment in full is expected at time of service or discharge. We accept VISA/MasterCard, Discover, cash and personal checks with proper identification.

If your pet has to stay at the hospital for any reason and someone other than yourself will be picking him/her up, you will need to prepay for the requested services or send the payment with the person picking up your pet. You will not be billed.

We realize that emergencies do occur. In the event of an emergency, payment plans may be arranged. This is reviewed and denied or approved on an individual basis. If you seek to make payment arrangements, **this must be done before the services are performed.**

In the event that payment arrangements are established, payments are due by the last day of each month. Any account that does not reflect a monthly payment will automatically be charged a \$30.00 service fee in addition to the finance charge calculated on the unpaid finance. This service fee will be charged for each and every missed payment. We can keep a VISA, MasterCard, Discover or Debit card number on file and automatically deduct your monthly payment for your convenience.

Accounts that reflect two or more missed monthly payments will be referred for legal action. No further credit will be extended to the account.

All accounts with outstanding balances must be paid in full before any additional services are provided.

In the event a check given in payment is returned unpaid for any reason, a \$40.00 returned check fee will be added to the account. In addition, if payment is not made on the returned check, the account will be referred to our attorney for legal action. If civil action is taken, additional fees of up to \$250.00 could be recovered along with interest from the date of the check, cost of mailing, attorney's fees and court costs.

A service charge of 1.5% of the balance will be added to any unpaid balance monthly. (Annual finance rate 18 %.) If this account is referred to an agency for collection I agree to pay all costs of collection including but not limited to thirty three and one third percent (33 1/3%) agencies fees on the balance owed in addition to all court costs.

Signature _____ Date _____