

**Eggleston Equine, LLC**  
483 Center Road  
Woodstock, CT  
06281



**(860) 942-3365**  
Fax: (888) 276-0555  
dr@egglestonequine.com  
www.egglestonequine.com

## **Veterinary Service Agreement**

### **Client Information**

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Mobile Phone #: \_\_\_\_\_  
Email Address: \_\_\_\_\_

### **Financial Policy**

1. Payment is due in full within 21 days from the date of invoice. An invoice for your appointment will be generated by Eggleston Equine and will be sent to you by email (unless otherwise requested to be sent via US mail). Payment may be made via check, credit card (Visa, MasterCard, American Express or Discover), or cash.

You must place a credit card on file with Eggleston Equine. (Credit cards are not stored by us, but by our PCI compliant credit card processor.) This credit card will be charged for your account balance in full, if payment is not received within 21 days from the date of invoice.

In cases where medication is being dispensed to you, we will require payment at the time that medication is dispensed.

2. If you are a first-time client of Eggleston Equine (i.e., a client with no financial history with us within the past year), you must make payment in full at the time service is rendered either by credit card or cash. Once you have established a financial history with Eggleston Equine, by being a client for 12 months' time **and** having paid 6 or more invoices, the above 21-day terms will apply.

3. This contract shall apply to all veterinary services provided by Eggleston Equine, LLC to any and all horses on my behalf.

4. Most inventory items, services, and procedures that are provided by Eggleston Equine, LLC have set fees associated with them. We will provide an estimate of the expected cost of an appointment at your request. Veterinary examination and consultation time is billed at the prorated rate of \$250/hour. Certain types of examination and consultation can vary considerably, in terms of time spent and therefore cost.

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5. Late charges shall be applied to all overdue accounts at the rate of 1% monthly.
6. As a courtesy to our clients with equine health insurance, we can assist you in filing your insurance claim, at your request and if you provide complete insurance information to us. In cases where you open a claim with your insurance company and are submitting invoices for veterinary expenses to your insurance, the payment terms outlined in bullet point number 1 above still apply. Payment is still due within 21 days of invoice, regardless of whether you have been reimbursed for that invoice by your insurance company.
7. You represent that you are presently able to comply with the payment terms contained herein. If you should become unable to make payment according to the terms outlined above, or if you suffer financial hardship or burden, you will contact Eggleston Equine, LLC. In the event of financial hardship or burden, payment arrangements can be made through our administrative staff, subject to the approval of that administrative staff.
8. There will be a \$45.00 charge for all returned checks.
9. Unfortunately, there are times when a past due account is ignored by a client, and we need to seek resolution of the debt via a third party. A third-party resolution of an unpaid debt may include submitting the account to a collection's agency, small claims court, or other legal recourse. In cases where we are forced to take such steps to collect an unpaid balance from you, we shall have the right to collect all reasonable costs associated, including necessary disbursements, attorneys' fee and court fees. If it is necessary for Eggleston Equine to commence legal action in order to collect an unpaid balance from you, you consent to the personal jurisdiction of the courts of the State of Connecticut over you. I understand and agree with the terms stated above.

- I already have a credit card on file with Eggleston Equine, LLC. I authorize Eggleston to process the card, in the event of an appointment, per the terms above.
- I will call Eggleston Equine, LLC to put a credit card on file. I authorize Eggleston to process this card, in the event of an appointment, per the terms above.

Signature:

Full Name:

Date: