

Payment Agreement Contract
with
Crater Road Veterinary Hospital
464 South Crater Road
Petersburg, Virginia 23803
804-733-8202

ALL FEES ARE DUE AT TIME OF SERVICE

We gladly accept:

Cash Check MasterCard Visa Discover Care Credit
Debit Cards

Crater Road Veterinary Hospital reserves the right to accept or deny payment arrangements, to include hold checks for an established client. In an emergency situation, and if payment arrangements are approved by the Doctor, you agree to:

Pay your bill, by the date and terms specified by you and the Doctor;

OR

if arrangements are not upheld or your check is returned for any reason and the balance becomes sixty days past due, your account will be turned over to our collection agency or attorney for collections. You agree to be responsible for all attorney fees at 33 1/3% (thirty three and one-third percent), plus cost and any additional collection fees. You also agree to interest rate charges of 18% (eighteen percent) per year (annum).

I have read the above information and agree to all terms:

Client Signature: _____ Client # _____

Date: _____