

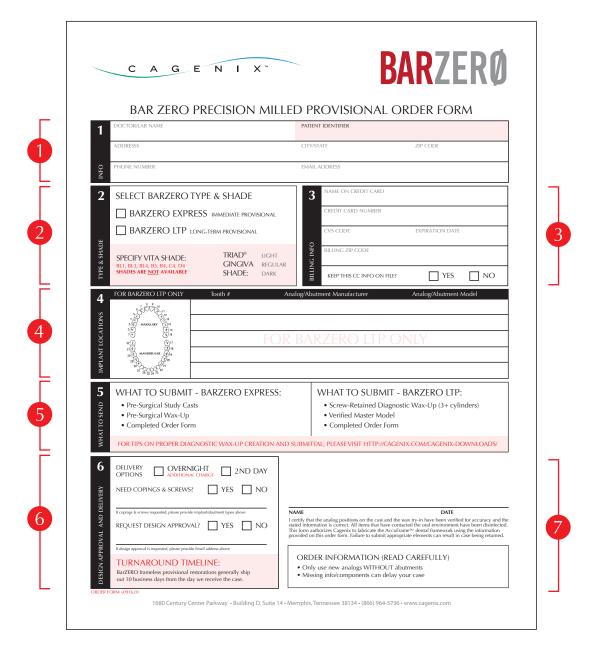


BAR ZERO PRECISION MILLED PROVISIONAL ORDER FORM

_	DOCTOR/LAB NAME		PATIENT IDENTIFIER			
	ADDRESSS		CITY/STATE ZIP CODE			
INFO	PHONE NUMBER			EMAIL ADDRESS		
2	SELECT BARZERO TYPE & SHADE		3 NAM	ie on credit card		
IYPE & SHADE	☐ BARZERO EXPRESS IMMEDIATE PROVISIONAL		CREI	DIT CARD NUMBER		
	☐ BARZERO LTP LONG-TERM PROVISIONAL		CVS	CODE EXPIRATION DATE		
	SPECIFY VITA SHADE: BL1, BL3, BL4, B3, B4, C4, D4 SHADES ARE NOT AVAILABLE	TRIAD® light GINGIVA regular SHADE: dark	25	NG ZIP CODE		
Ţ	311 323 7 11 2 3 7 11 2 3 2 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3			P THIS CC INFO ON FILE? YES	∐ NO	
4	FOR BARZERO LTP ONLY	Tooth # An	nalog/Abutment <i>N</i>	Aanufacturer Analog/Abutment N	1odel	
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_	26 25 24 23			WHAT TO SURMIT RAPZERO LTD:		
	WHAT TO SURMIT -	BARZERO EXPRESS.	\/\/H	AT TO SURMIT - RARZERO LTP.		
5	WHAT TO SUBMIT - • Pre-Surgical Study Casts	BARZERO EXPRESS:		AT TO SUBMIT - BARZERO LTP: rew-Retained Diagnostic Wax-Up (3+ cylir	nders)	
5	Pre-Surgical Study CastsPre-Surgical Wax-Up	BARZERO EXPRESS:	• So	crew-Retained Diagnostic Wax-Up (3+ cylin prified Master Model	nders)	
TO SEND 6	Pre-Surgical Study CastsPre-Surgical Wax-UpCompleted Order Form		• So • Ve • Co	rew-Retained Diagnostic Wax-Up (3+ cylir erified Master Model ompleted Order Form		
5	Pre-Surgical Study CastsPre-Surgical Wax-UpCompleted Order Form		• So • Ve • Co	crew-Retained Diagnostic Wax-Up (3+ cylin prified Master Model		
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ORDER FORM v0916.01

Completing the Cagenix BarZero Order Form



- Enter your patient & practice info
- Select BarZero restoration type
 - Select Express or LTP option
 - Enter relevant shade information
- 3 Enter your billing information
- 4 Provide implant locations/types
 For BarZero LTP cases only

- List of items to submit for each BarZero product type
- 6 Shipping and approval options
 - Default shipping is FedEx 2nd Day
 - Overnight FedEx shipping available
 - 3D CAD design approval on request
- Review requested components, then sign and date the form