

Lab: Date:

Address:

City: Prov.: Postal: Phone:

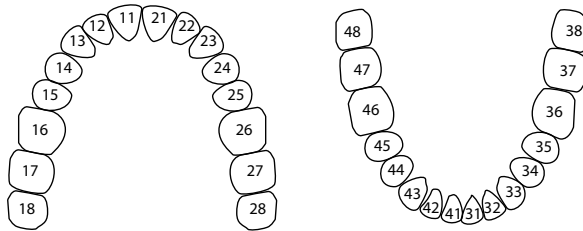
Account #:

Material: Cynoprod Zirconia

Case ID: Patient Name:

Enclosed with Case:

- Working Model
- Opposing Model
- Study Model
- Bite
- Die
- Impression



Design Parameters: (*=recommended)

Coping Minimum Thickness:

Anterior: *0,5mm (0,4 to 2mm)

Posterior: *0,5mm (0,5 to 2mm)



Hygienic Pontic

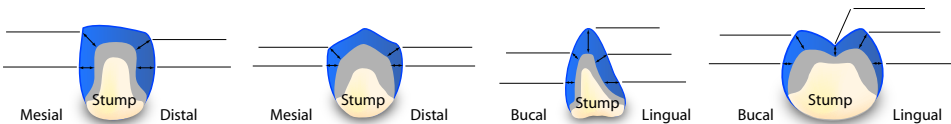


Large Gingival Contact



Punctual Gingival Contact

For anatomical copings, please specify the porcelain space required.



If no information is provided, porcelain space will be 1.5mm

Shipping & Payment:

- Check Enclosed Check #: Amount:
- Card on File Card #: Exp:
- New Credit Card Signature:

Notes / Special Instructions:

Please indicate any particular specifications for each tooth #:

Cynoprod warranties the structural integrity of its zirconia substructure. This warranty does not include the esthetic design.

Signature: Date:

Please send this form with removable pinned and separated model, opposing and bite registration (bridge case only), as needed, to:

Cynoprod inc.
9710 Transcanada Highway,
St-Laurent, QC, H4S 1V9, Canada.

*If any questions, please call us at 514-798-0919 xt 394 (Technical Support)
514-798-0919 xt 376 (Customer Service)*