



Lifetime Guarantee

Our guarantee is unique among all dentists in the state of Virginia, and provides you with the peace of mind that comes from knowing we honor our commitments in writing. We want to spell out the specifics so you can view them freely and realize there are no gimmicks. Our chief desire is to foster lifelong relationships, and Dr. Hawkins believes the best way to do that is to prove his loyalty to you by standing behind his dentistry.

The guarantee applies to recommended fillings, permanent crowns and bridges and veneers. It protects you against breakage, debonding (becoming loose or falling out), and even decaying under the restoration! If such should occur, Dr. Hawkins will repair or replace the restoration free of charge for the rest of his career (estimated to be 25 years as of 2010, the time of this writing).

In order to maintain the guarantee, only two conditions apply:

1. First, any decay you have must be removed within two months of its diagnosis. Decay easily spreads from tooth to tooth, so your path to optimal health requires a continual and comprehensive approach to ensure success.
2. Second, you must return for your recommended hygiene visits (usually 6 months) within a 30-day grace period. This allows us to detect small problems before they progress to larger ones.

The only exception is a different procedure on the same tooth. In other words, the work performed is guaranteed, but the entire tooth is not. For instance, if you have a small filling that does not compromise the integrity of the tooth, and you later break the tooth such that it needs a crown, that procedure is not covered. Likewise, if you have a filling in one area of a tooth and later develop decay in an different area of the same tooth, that is not covered.

Also, if Dr. Hawkins recommends an occlusal guard/nightguard to protect the work, the patient must obtain it from Dr. Hawkins.

Only work performed by Dr. Hawkins is eligible for the guarantee and any replacements or repairs must be performed by him.

Patient signature _____

Date _____