

Billing Address:



Date:	_	
Full Name:		
Address:		
		Phone
Number:	Email Address:	
Subject: Permission to Collections Policy	Store Credit Card Info	rmation, Late Payments, and
Equine Reproduction, equines, and we appr	we are committed to reciate your trust in calintain the quality of calintain	d equine(s) in good health. At Fen Vet providing the best possible care for us. To ensure smooth processing of our services, we kindly request your t policies.
1. Permission to Store (Credit Card Information	ո։
to securely store your cr compliance with the h	redit card information of ighest industry standar for the purpose of proc	nsactions, we request your permission n file. This information will be stored in rds for data security. Your credit card essing payments for services provided on.
Please provide the follo	wing credit card inform	ation for our records:
Credit Card Type:		
Credit Card Number:		-
Expiration Date:		
CVV Code:		
Cardholder Name:		





- **2. Payment Policy:** To better serve you and ensure clarity in our billing practices, we have established the following payment terms:
 - Payment will be collected at the **end of the month**, when your horse is **discharged**, or when your account reaches **\$5,000**, whichever comes first.
 - Accounts will not be permitted to exceed \$5,000. We reserve the right to discontinue any additional treatment until the account is paid in full and brought current.
- **3. Late Payments and Collections Policy:** We kindly request all payments to be made as per the date stated on the invoice. Payments not received by the due date are subject to a late payment interest rate of **2% per month** (24% annually) on the outstanding balance. This interest will be calculated from the due date until the payment is fully received.

Delinquent Accounts: Delinquent accounts may be referred to a third-party collections agency. In such cases, you, as the account holder, will be responsible for all collections fees incurred by Fen Vet Equine Reproduction in the process of recovering the outstanding balance. We assure you that this step will be taken only after all reasonable attempts to resolve the matter directly with you have been exhausted.

By providing your credit card information, you acknowledge and agree to the terms and conditions outlined in this letter. Your cooperation in adhering to our payment policies is greatly appreciated and ensures the continued provision of high-quality veterinary care to your equine(s).

If you have any questions or concerns regarding this policy, please do not hesitate to contact our billing department at **403-917-0443** or **Repro@fenvet.com**.

Thank you for choosing Fen Vet Equine Reproduction. We look forward to continuing to serve you and your equine partners with exceptional care.

Sincerely,

Fen Vet Equine Reproduction Team

Fen Vet Equine Reproduction repro@fenvet.com
403 917 0443