



**3 Tier Network Level Change Authorization
for General Dentists
100, 200, and 300 Networks**

Current Level (check one only)

- 100
- 200
- 300

New Level (check one only)

- 100
- 200
- 300

This authorization changes the 3 Tier Network selection for the practice indicated below and applies to all General Dentists associated with this practice. The person signing this Agreement on behalf of the practice warrants that he/she has been duly authorized and empowered to execute this change.

Practice or Group Name

TIN

Dentist Name (Please print)

Phone

Signature

Address

Date

City, State and Zip

Please mail this form to:

Dental Services
P.O. Box 9069
Oxnard, CA 93031-9069

Or

Fax to: 805-383-1792

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