

## **General Terms and Conditions (GTC)**

These General Terms and Conditions (hereinafter “GTC”) set out the uniform terms governing the provision and use of services by Dr. Sápi Dent Kft. Dental Clinic (“Service Provider”) and regulate the legal relationship between the Service Provider and the patient or customer (“Client”). They define the conditions for billing, payment, and other general contractual provisions.

### **1. Service Provider Details**

Name: Dr. Sápi Dent Kft.  
Registered office: 1016 Budapest, Zsolt utca 9. ground floor 7.  
Tax number: 27849671-1-41  
Company registration number: 01-09-400464  
Phone: +36 70 200 5600  
Email: adrienn.drsapi@gmail.com

### **2. Purpose of the GTC**

The purpose of this document is to regulate the terms under which the Service Provider offers dental outpatient care and related services, and to specify the mutual rights and obligations of the parties.

### **3. Subject of the Contract**

The Client receives private (fee-based) dental care services from the Service Provider under the conditions specified herein. The detailed content of the service is defined by this GTC and its inseparable annexes, including the Consent Forms, Medical History Sheet, and Treatment Sheet (collectively, the “Contract”).

### **4. Formation and Duration of the Contract**

The Contract enters into force on the day the Client signs the Medical History Sheet prior to the first consultation and treatment plan, or when treatment commences in accordance with an accepted

quotation.

Unless otherwise agreed, the Contract is concluded for an indefinite term, covering each treatment, material, and subcontracted service under the same conditions.

## 5. Service Fees

The Service Provider informs Clients about service and material costs via the public price list displayed on its website and in the clinic.

The first consultation and treatment plan preparation are subject to fees as per the price list.

If no dental laboratory materials are used, fees are payable after each completed session. For laboratory-related work, 50% of the fee is payable in advance, with the remainder due upon completion.

Quotations are valid for 30 days; thereafter, prices may change.

During ongoing treatment, fees may also be adjusted for professional reasons.

## 6. Payment Terms

Invoices specify the payment deadline and method. Late payments incur default interest equal to twice

the prevailing central bank base rate.

If the Client uses health insurance or private fund coverage, this must be reported prior to treatment.

The Service Provider only accepts payment from partnered insurers or funds.

## 7. Cancellation Policy

Cancellations are accepted free of charge up to one business day before the scheduled appointment,

either in writing (via email) or verbally (by phone).

Late or missed cancellations incur a cancellation fee of HUF 10,000 per occasion.

## 8. Warranty (Guarantee)

Warranty is valid only with proper oral hygiene and annual check-ups documented by the Service Provider.

To maintain warranty, the Client must:

- Attend at least one oral hygiene follow-up each year,

- Attend all prescribed control appointments,
- Follow maintenance and hygiene instructions, and
- Use prostheses as intended and not subject them to abnormal forces.

Warranty periods:

- Fixed restorations (crowns, bridges): 1 year
- Removable dentures: 1 year
- Implants (structural elements): 2 years
- Fillings: 6 months
- Removable orthodontic appliances (material defects): 12 months
- Fixed orthodontic appliances (material defects): 24 months

The warranty does not cover temporary solutions, subsequent root canal treatments of crowned teeth, natural biological reactions, misuse, poor hygiene, or consequences of smoking. The Service Provider excludes liability for purely aesthetic dissatisfaction if medical outcomes meet professional standards.

## 9. Exclusion of Warranty

The warranty becomes void in cases of:

- Missed annual check-ups or poor hygiene
- Implant loss due to infection or negligence
- Mechanical or chemical damage to dentures
- Excessive force on prostheses
- Improper nutrition or harmful habits
- Illnesses or accidents affecting oral structures
- Psychological or mental disorders affecting treatment compliance

## 10. Liability

The Service Provider may use subcontractors for dental, laboratory, or specialist work and assumes full liability for their performance as if performed by itself. Damages caused by the Service Provider are compensated according to the Hungarian Civil Code.

## 11. Complaints

Clients may submit written complaints regarding service quality within the warranty period to:

Dr. Sápi Dent Kft.

Address: 1016 Budapest, Zsolt utca 9. ground floor 7.

Phone: +36 70 200 5600

Email: [adrienn.drsapi@gmail.com](mailto:adrienn.drsapi@gmail.com)

Complaints must be submitted promptly after discovery. The Client must attend an examination and provide

the disputed dental work for inspection.

The Service Provider will assess the complaint within 3 working days and, if justified, perform repairs

or replacements within 14 working days.

Dated: 29 January 2025

Dr. Adrienn Sápi

Head of Clinic