

Smile Solutions by Emmi Dental Associates- Record Release

1601 Milltown Rd. Suite 25

Wilmington, De 19808

302-999-8113 Phone

302-999-1441 fax

I, _____ grant permission to have my dental records transferred from Smile Solutions to:

Name and Date of birth of persons transferring:

Reason for transferring:

Signature

Date

Please allow 48 hours from date returned for records to be forwarded. We will be happy to forward your most recent radiographs that are less than 5yrs old