



**Adirondack Staffing Solutions, LLC**  
Dental Office Agreement

**THIS IS A LEGALLY BINDING CONTRACT. IF NOT FULLY UNDERSTOOD, CONSULTING WITH AN ATTORNEY BEFORE SIGNING IS RECOMMENDED.**

This Dental Office Agreement is made on \_\_\_\_\_ by and between (Corporation Name) \_\_\_\_\_ (hereinafter referred to as "Client") and Adirondack Staffing Solutions, LLC, a limited liability company organized and existing under the laws of the State of New York, whose principal place of business is 113 Saratoga Rd, Ste 108, Glenville, NY 12302 (hereinafter referred to as "Agency"):

Whereas, Agency, operates an employment agency placing dental personnel including but not limited to Dental Assistants, Dental Hygienists, Dental Receptionists, Office Managers, and Dentists (hereinafter referred to as "Candidate") on a temporary or permanent, part-time or full-time basis; both parties agree as follows:

1. **Covenant of Hiring of Candidates:** Client has arranged for temporary, permanent and/or contract placement through Agency. In the event that Client wishes to offer any additional temporary, permanent or contract placement to any Candidate, referred to it by the Agency, within one year (twelve months) from the most recent date of Candidate's placement with Client; Client shall not directly or indirectly, employ or otherwise engage the services of Candidate. The Client agrees to do so only through the Agency and to pay directly to the Agency the applicable regular fees, outlined in section 2. And section 3. for any and all such services provided by said Candidate.
  - a. **Third Party Applications of Candidates with Client:** In the event that a referred Candidate applies to Client directly, after being referred by the Agency, (walk in, phone call, fax, email, text to the office or any of its employees) or through a third-party software, such as Indeed, Zip Recruiter, Craigslist, Facebook, Another Staffing or Recruiting Agency, or any of the comparable mediums; The Client agrees to do so only through the Agency, as outlined in Section 1. and to pay directly to the Agency the applicable regular fees, outlined in section 2. and section 3. for any and all such services provided by said Candidate. Client acknowledges and agrees that Agency shall retain the right to obtain injunctive relief against Client to enforce this covenant not to hire, either in lieu of or in addition to, recovery of liquidated damages outlined in section 1. B.
  - b. **Damages Non-Dentist Candidate:** In the event that Client violates the term, outlined in Section 1., Client agrees to pay to the Agency immediately, to compensate the Agency for lost income and reimbursement for hiring, employment, and marketing a sum of \$3620.00 (Formula: Damages \$1800.00 dollars for Placement fee, \$1500.00 dollars for 10% of Yearly Advertising costs, \$320.00 for labor cost (\$40 per hour x 8 hours).
  - c. **Damages Dentist Candidate:** In the event that Client violates the term, outlined in Section 1., Client agrees to pay to the Agency immediately, to compensate the Agency for lost income and reimbursement for hiring, employment, and marketing a sum of \$8620.00 (Formula: Damages \$6800.00 dollars for Placement fee, \$1500.00 dollars for 10% of Yearly Advertising costs , \$320.00 for labor cost (\$40 per hour x 8 hours).
  - d. **Hold Harmless in the event of Client's breach of contract:** To the extent permitted by law, CLIENT will defend, indemnify, and hold STAFFING FIRM and its parent, subsidiaries, directors, officers, agents, representatives, and employees harmless from all claims, losses, and liabilities

(including reasonable attorneys' fees) to the extent caused by CLIENT's breach of this Agreement; its failure to discharge its duties and responsibilities set forth in section 1.; or the negligence, gross negligence, or willful misconduct of CLIENT or CLIENT's officers, employees, or authorized agents in the discharge of those duties and responsibilities.

2. **Scope of Work:** The Client agrees to supervise and prohibit Candidate from performing services outside of their job description. The Client agrees that Agency shall not be liable for any claims or losses arising from the Candidate performing services at the Client's Location, including but not limited to any special damages to equipment, patients, incidentals, indirect or consequential. The Client agrees to indemnify and hold Agency harmless from any third-party claim resulting from any acts or omissions of Candidate pursuant to this agreement.
3. **Temporary Placement Fee:** For temporary placement of dental assistants, hygienists, or office support we directly bill your office a rate of \$7.00 per hour. In the event that a shift that is four (4) hours or less, it will not be billed hourly, rather a flat fee of \$35.00 will be considered the fee for placement. We have a wide range of candidates for your office with a variety of skill sets and salary requirements and we understand that every office and doctor have different expectations in personnel.
  - a. **Temporary placement fee for Agency Employees:** Agency will be considered the "Employer of referred Candidate". Agency agrees to pay Candidate agreed upon rate and handle all aspects of payroll, as the Candidates employer, including but not limited to preparation of payroll checks and direct deposits, prepare and file all required state and federal tax forms and withholdings, social security, unemployment and Medicare taxes, FMLA, cover the candidate for Workers' compensation and unemployment insurance. The current payroll surcharge is 25% of the agreed hourly rate of the hours worked for the Candidate's placement. Client must guarantee four (4) hour minimum for each placement. Placements must be cancelled 24 business hours (8am-5pm) in order to avoid mandatory payment to both the Candidate (4 hours) and the Agency (\$40) 25% payroll surcharge
4. **Payment for Temporary Placement:** All Clients are required to have either a credit/debit card on file or an ACH method of payment to be utilized for temporary staffing. All time sheets must be approved by Client by 5pm on the first Friday after a shift has been completed. Invoices will be run at the conclusion of the week on either Friday or the upcoming Monday.
  - a. **Disputes:** In the event that a time sheet is not accurate and it was processed for payment, you may request for modification of said invoice. Please provide request in writing, via email or text, and the invoice will be modified and a refund or credit will be processed.
  - b. **Storing of sensitive information:** We do not store your sensitive credit/debit card or ACH information in our office or anywhere other than the platform. Your information is stored on a secure payment processor online vault within the platform. This vault is a secure clearinghouse that meets the industry standards set forth by the Payment Card Industry Data Security Standard (PCI-DSS) and is certified at the highest level attainable. Once you enter your information into the platform, your information is securely encrypted and we do not have access to view or edit the information. Our staff are only able to see the last 4 digits of your credit card/account number – just as any online retailer does.
5. **Permanent Placement Fee:** The Permanent placement of Candidates fee is as follows:
  - Dental Assistants & Office Support Candidates: Permanent placement fee of \$1200.00
  - Dental Hygienists Candidates (Full Time 3+ days/week): Permanent placement fee of \$2400.00
  - Dental Hygienists Candidates (Part Time 1 day/week): Permanent placement fee of \$1300.00
  - Dental Hygienists Candidates (Part Time 2 days/week): Permanent placement fee of \$1800.00
  - General Dentist Candidates (Part Time 1-2 days/week): Permanent placement fee of \$7800.00
  - General Dentist Candidates (Full Time 3+ days/week). permanent placement fee of \$9800.00
  - Dental Specialist Candidates (Part Time 1-3 days/month): Permanent placement fee of \$6800.00
  - Dental Specialist Candidates (Part Time 1-2 days/week): Permanent placement fee of \$12500.00

- Dental Specialist Candidates (Full Time 3+ days/week). permanent placement fee of \$18000.00
6. **Permanent Placement Fee Payment Structure for Full Time Candidate Placement:** Our payment structure allows for the employer to get to know the potential employee or Associate. Upon Client’s hiring Candidate: the permanent placement fee is not due in one lump sum, but on the following schedule, so the Candidate and the Client can see if they work well together. The “date of hire” is considered the Candidates first date of employment with Client.
    - Candidate hire date one third (1/3) of the referral fee due
    - 30 days later one third (1/3) of the referral fee due
    - 60 days later one third (1/3) of the referral fee due
  7. **Permanent Placement Fee Payment Structure for Part Time Candidate Placement:** Our payment structure allows for the employer to get to know the potential employee or Associate. Upon Client’s hiring Candidate: the permanent placement fee is not due in one lump sum, but on the following schedule, so the Candidate and the Client can see if they work well together. The “date of hire” is considered the Candidates first date of employment with Client.
    - Candidate hire date one third (1/2) of the referral fee due
    - Three weeks, 21 days later one half (1/2) of the referral fee due
  8. **Additional Permanent Placement Fee:** In the event that any Permanently placed Candidate, referred by Agency, increases their number of workdays, with Client, beyond their "weekly work schedule", within 12 months of “hire date” the Client agrees to notify and pay the remaining balance of the formula as follows: The difference between the agreed amount for Candidate’s placement and the “placement fee” listed in Section 3. that corresponds to the amount of days Candidate has increased to.
  9. **Working Interview:** Prior to hiring, we strongly encourage a working interview/temporary placement of any Candidate that the Client may be interested in for permanent hire, prior to permanent placement.
    - a. Any Candidate referred to Client that has a working interview, will be considered a temp and invoiced as such, until Candidate is “officially hired”.
    - b. Agency will include up to 3 days, a maximum of 24 hours of Agency “temporary placement” fee of \$7.00 per hour, that a perspective Dental Assistant or Administrative Associate worked in Client’s office during a working interview or as a temp if it is within three weeks of hire date. This “included amount” will be invoiced at time of service, but will be deducted from the” permanent placement fee”.
    - c. Agency will not include temp/working interview “temporary placement” fee of \$7 per hour, for Dental hygienists in the “permanent placement fee”.
  10. **Permanent Placement Guarantee:** Agency makes no guarantee on any Candidate permanently placed with Client. In the event that the permanently placed Candidate is terminated by Client within the initial thirty (30) day period, Client is only liable for the first one third (1/3) of the “permanent placement fee”. Client must notify Agency prior to the end of the first thirty (30) day period, or Client will be liable for the second installment of one third (1/3) of the “permanent placement fee”. In the event that the permanently placed Candidate is terminated by Client within the second thirty (30) day period, Client is only liable for two thirds (2/3) of the “permanent placement fee”. Client must notify Agency prior to the end of the second thirty (30) day period, or Client will be liable for the entire “permanent placement fee”. In the event that the permanently placed Candidate is terminated by Client after sixty (60) days from the date of hire, Agency will not credit or refund any moneys to Client or future placements.
  11. **Cancellation of Temporary Placement or Working Interview:** Client must Guarantee a minimum of four hours for any Candidate placement. In the event that Client provides less than 24 business hours (Monday through Friday 8am to 5pm) cancellation of Temporary Placement or Working Interview Placement requested by Client, or in the event of Candidate’s early dismissal; Client agrees to pay a four (4) hour minimum hourly rate to such Temporary Candidate and the flat fee of \$35.00 to the Agency.

12. **Travel, Holiday, Vacation, Lunch hours, Equipment, etc.:** Client is not responsible for pay compensation to Candidate for Travel, Holiday, Vacation, Lunch hours.

### PAYROLL OPTIONS

Adirondack Staffing Solutions offers Candidates and Clients the option of utilizing temporary Candidate's employed through the Agency as well as working with clients that prefer to pay the temporary Candidate's directly.

#### Mandatory that one of these boxes is checked:

Check here if **Client would like Agency to handle Payroll** for temporary placements **exclusively**:

- Agency will be considered the "Employer of referred Candidate"
- Agency agrees to pay Candidate agreed upon rate and handle all aspects of payroll, as the Candidates employer, including but not limited to preparation of payroll checks and direct deposits, prepare and file all required state and federal tax forms and withholdings, social security, unemployment and Medicare taxes, FMLA, cover the candidate for Workers' compensation and unemployment insurance
- The current payroll surcharge is 25% of the agreed hourly rate of the hours worked for the Candidate's placement
- Client must guarantee four (4) hour minimum for each placement. Placements must be cancelled 24 business hours (8am-5pm) in order to avoid mandatory payment to both the Candidate (4 hours) and the Agency (\$35) 25% payroll surcharge

Check here if **Client will handle payroll** for temporary placements **exclusively**:

- Client will be considered the "Employer of referred Candidate"
- Client will handle all aspects of payroll, as the Candidates employer, including but not limited to preparation of payroll checks and direct deposits, prepare and file all required state and federal tax forms and withholdings, social security, unemployment and Medicare taxes, and cover the candidate for Workers' compensation and unemployment insurance.
- Client must guarantee four (4) hour minimum for each placement. Placements must be cancelled 24 business hours (8am-5pm) in order to avoid mandatory payment to both the Candidate (4 hours) and the Agency (\$35)
- Client will only be billed Agency Fee.

Please list complete address(es) in which this agreement is in effect:

Location 1. \_\_\_\_\_ Location 2. \_\_\_\_\_

Location 3. \_\_\_\_\_ Location 4. \_\_\_\_\_

Location 5. \_\_\_\_\_ Location 6. \_\_\_\_\_

Location 7. \_\_\_\_\_ Location 8. \_\_\_\_\_

By signing this Dental Office Agreement, the undersigned agrees to the foregoing and warrants and represents that he/she is authorized to sign such Agreement on behalf of Client and to so legally bind said Client.

\_\_\_\_\_  
Print

\_\_\_\_\_  
Title

\_\_\_\_\_  
Sign

\_\_\_\_\_  
Date



Adirondack Staffing Solutions, LLC  
**Office Information**

Thank you for choosing Adirondack Staffing Solutions for your dental employment needs. Please help us get to know your office by completing and returning the information form below.

Name of Practice \_\_\_\_\_ Date: \_\_\_\_\_

General or Specialist (please indicate specialty)? \_\_\_\_\_

Name of person filling this out: \_\_\_\_\_ Position: \_\_\_\_\_

Main Address: \_\_\_\_\_ Street Address Suite/Unit # \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Contact Person \_\_\_\_\_ Position: \_\_\_\_\_

Email for Confirmations: \_\_\_\_\_

Email where we send invoices: \_\_\_\_\_

Office Phone: \_\_\_\_\_ Cell # for afterhours changes via text: \_\_\_\_\_

How did you hear about us? \_\_\_\_\_

Hours of operation

Monday	From: _____	To: _____	Lunch: _____
Tuesday	From: _____	To: _____	Lunch: _____
Wednesday	From: _____	To: _____	Lunch: _____
Thursday	From: _____	To: _____	Lunch: _____
Friday	From: _____	To: _____	Lunch: _____
Saturday	From: _____	To: _____	Lunch: _____

Are there any specific Parking Instructions? \_\_\_\_\_

Names of Dentists practicing in your office:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Are you looking for a permanent candidate?      Y      N

If yes, please be as detailed as possible. ie; Position, Days, Hours, Benefits, etc...\_\_\_\_\_

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How will temporary candidate be compensated? **Check all that apply**

\_\_\_\_ Adirondack Staffing Payroll    \_\_\_\_ Check given at end of shift    \_\_\_\_ Check sent in mail w/in a few days

\_\_\_\_ Check sent in mail/payroll    \_\_\_\_ Taxed Withheld    \_\_\_\_ No Taxed Withheld

Equipment & Routines

Practice Management Software:\_\_\_\_\_

Are scrub jackets provided for the temporary employee?    Y    N

Does your office have a preferred color for scrubs (no guarantee temp will comply)? \_\_\_\_\_

What would you like Admin Temp to wear?    \_\_\_\_ Business Casual    \_\_\_\_ Scrubs

Does your office use digital x-rays?    Y    N      If no, will temp be expected to develop x-rays?    Y    N

Time allotted for routine adult prophy or periodontal maintenance: \_\_\_\_\_

Time allotted for 2 quads SRP:\_\_\_\_\_

Will hygiene be assisted if less than 50minute prophy?      Y      N

Can your practice accommodate a left-handed hygienist?      Y      N

Does your office provide N-95 for temporary employee?    Y    N

Does your office provide a face shield for temporary employee?    Y    N

Does your office provide isolation gowns between each patient for temporary employee?    Y    N

We look forward to working with you! Thank you, Adirondack Staffing Solutions, LLC