



DEPARTMENT OF THE TOOTH FAIRY OF NEW ZEALAND

TE TARI O TE PATUPAIAREHE NIHO AOTEAROA

INSPECTION SHEET v55.00062.2022

DATE: _____

NAME OF CHILD: _____ DOB: _____

ADDRESS INSPECTION TOOK PLACE: _____

TOOTH INSPECTED (MARK ON CHART)

SHAPE (RATE FROM 0 TO 5*)

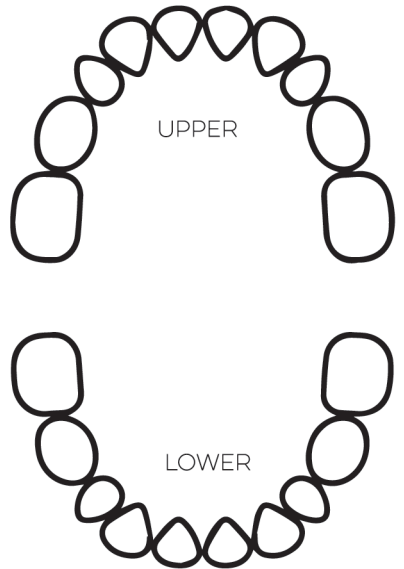
- WEAR
- DECAY
- CHIPS
- CRACKS

CLEANLINESS (RATE FROM 0 TO 5*)

- SOFT PLAQUE
- TARTAR
- STAINING

OTHER OBSERVATIONS:

AMOUNT TO BE PAID _____



OTHER NOTES:

AMOUNTS TO BE PAID IN CASH AT TIME OF INSPECTION OR WITHIN 7-14 WORKING DAYS INTO NOMINATED BANK ACCOUNT AS REGISTERED WITH THE DEPARTMENT OF THE TOOTH FAIRY OF NEW ZEALAND. YOU MAY DISPUTE THE FINDINGS OF THE FAIRY WITHIN 30 DAYS OF RECEIPT OF INSPECTION DOCKET, YOU CAN DO SO IN WRITING ONLINE AT WWW.NZTOOTHFAIRY.COM.

WHILST THE TOOTH FAIRY MAKES EVERY EFFORT TO NOT DAMAGE PERSONAL PROPERTY, PETS OR HUMANS, THE DEPARTMENT OF THE TOOTH FAIRY OF NEW ZEALAND CANNOT BE HELD RESPONSIBLE FOR ANY HARM OR DAMAGE NOR LOSS OF PETS RESULTING FROM THE PROCESS OF MAGICAL APPEARANCE AND/OR DISAPPEARANCE, OR ANY OTHER ACTIVITIES CONDUCTED IN PERFORMING THE DUTIES OF THE TOOTH FAIRY.

***GRADING 0 = ZERO 1 = BARELY NOTICEABLE 2 = MINOR 3 = MODERATE 4 = EXTREME 5 = CATASTROPHIC**