

DMSI CLIENT AGREEMENT

This agreement made by and between Dental Medical Staffing, Inc. (DMSI) and _____,
on this the _____ day of _____, _____ . **Client Name**

Dental Medical Staffing, Inc. (DMSI) and Client agree to the following:

Temporary Placement:

All scheduling for temporaries shall be done directly through DMSI. No temporary is to be contacted directly by the Client or Client's staff.

DMSI will provide payroll for all temporary employees provided to Client. DMSI by law will assume all responsibility for withholding of State and Federal taxes and liabilities, worker's compensation insurance, employment insurance, providing W-2 forms at year-end and compliance with the immigration reform and control act for all temporary employees.

4- Hour Minimum - DMSI has a 4 hour pay minimum for all temporary employees (4 hours at hourly billing rate).
Cancellations- Client will be charged a cancellation fee of \$50.00 for any order that was filled and then cancelled with less than 24 hours' notice.

Client is solely responsible for the conduct of each temporary under their direct supervision and employee shall perform only those duties he/she is legally qualified to do.

Client will furnish a suitable workplace which shall comply with all laws, rules and regulations, including the Occupational Safety and Health Act and Client shall hold DMSI harmless from any violations thereof.

Permanent Placement:

Client agrees to pay DMSI the appropriate placement fee under any of the following conditions.

- 1) Candidate sent directly by DMSI for interview or working interview and subsequently hired for permanent.
- 2) Candidate currently working as a temporary through DMSI and subsequently hired for permanent or temporary permanent.
- 3) Candidate has previously worked as a temporary or interviewed through DMSI within the previous 12 months prior to permanent placement.

Payments:

Invoices for Temporary and Permanent placement are due upon receipt and payment will be made to DMSI. A finance charge of 1.5% or \$10.00 minimum will be charged on all invoices over 30 days. Client shall be responsible for any and all fees if it becomes necessary to engage an attorney.

DMSI reserves the right to change any of the current fee schedules at any time with a 30-day prior notification.

Verification and Signature:

I have received and reviewed the following documents;
DMSI Client Agreement, Hourly Payroll Billing Rates, fee schedules for Permanent Placement Flat Fee and Permanent Placement Temp to Hire.

I agree to all of the terms and conditions of this agreement and agree to pay the appropriate fees for both Temporary and Permanent Placement. This agreement shall be effective on the above date and will not expire.

By _____
Dental Medical Staffing, Inc. Authorized Client Signature Date

Rev: 10/17/19