



Disability Forms including FMLA, Short Term Disability

- Please be advised there is a fee of \$30.00 per form requiring the physician's signature. This fee is due prior to the completion of forms. Some fees may vary due to the type of form being submitted or complexity/length of document resulting in a different charge. If you have any questions specific to your request, please contact the office.
- The portion of the form relating to the claimant **must** be completed before the form is accepted by our office.
- Forms are processed within **7 business days** after the form and payment have been received.
- Unless otherwise noted, in writing by patient, forms are mailed directly to the company that requested them.
- If the patient would like to pick up the forms in person or have it mailed directly to them, it must be noted in writing at the time form is submitted to our office.
- If the patient wants *someone else* to pick up the forms, it must be submitted in writing with the name of that person and the patient's signature is required before it is released.

**ACCEPTABLE FORMS OF PAYMENT INCLUDE CHECKS, CASH, OR
MAJOR CREDIT CARDS**

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