

Som ACCOUNT

How to request for a Courier Pick Up

Organise a pickup for traditional models, impressions and broken devices

51EN4-12009A (2025-05-29)





REQUEST A COURIER

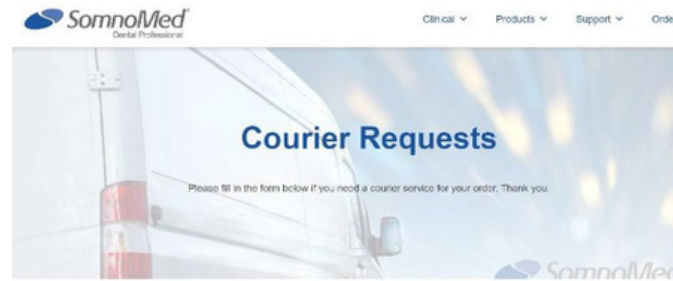
SOMACCOUNT

Repairs & Returns

Patient
Device
Warranty Start
Warranty Expiration

Shipping Label

WEBSITE



[Courier Request Form \(For Dental Practice\)](#)

CALL US



02 9467 0400

EMAIL CONFIRMATION WITH COURIER LABELS

Once a request has been submitted, You will receive an email for confirmation with pick up labels to print and stick on your package.





SOMACCOUNT PORTAL

On your SomAccount portal, below Repairs & Returns, you can book a courier via web or on your mobile.

DD Demo Dentist

Dashboard Patient Management Order Management Products Help Centre

Som ACCOUNT
New Saver Functionality

SomAccount now lets you save partially completed patient orders. You or your administrator can complete and submit them later at your convenience.

DD Demo Dentist

Welcome, Demo Dentist
Customer ID: C515533:1

Search Patients

+ Create Order + New Patient

0 Paid Orders 0 Unpaid Orders 0 New Transfers

My Preferences [Show All](#)
Choose products to show here.

Repairs & Returns

Serial Number

Patient
Device
Warranty Start
Warranty Expiration

+ Request Repair

Shipping Label

+ Shipping Label Request

Web Platform

1:42 4G 93

My Preferences [Show All](#)
Choose products to show here.

Repairs & Returns

Serial Number

Patient
Device
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Shipping Label

+ Shipping Label Request

somaccount.somnomed.com — Private

Mobile Platform



Shipping Label

Company Information

Company Name

SomnoMed Australia

Address Line 1

20 Clarke Street

Address Line 2 (Optional)

City

Crows Nest

State / Province

New South Wales

Zip Code

2065

Phone

+61 2 9467 0400

Email Address

dcarlos+sa3demo@somnomed.com

Other Information

[Send Request](#)

PICK UP ADDRESS

Your clinic information will be prefilled.

Just press [Send Request](#)

EMAIL CONFIRMATION WITH COURIER LABELS

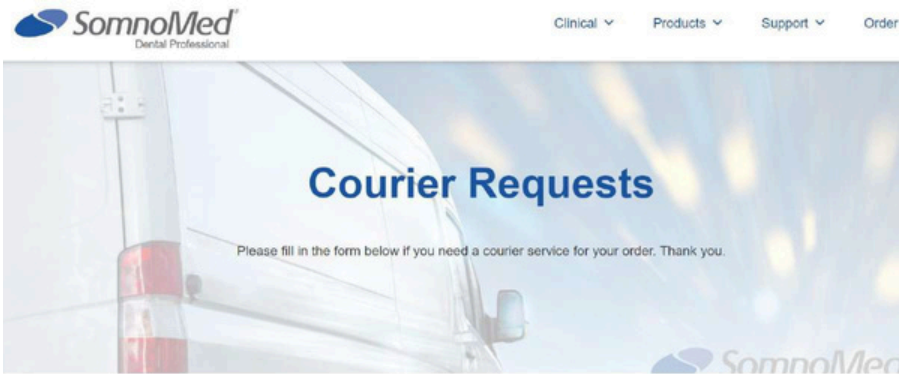
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WEBFORM REQUEST

If you do not have a SomAccount set up yet, you can arrange a pick up via the website form or simply by giving us a call on 02 9467 0400



Courier Request Form (For Dental Practice)

<https://somnomed.com/au/dentists/courier-request/>

Once a request has been submitted, you will receive an email for confirmation with pick up labels to print and stick on your package.



SomnoMed
Dental Professional

Clinical ▾ Products ▾

Practice Name *

Courier (Please select your preference) *

TNT
 DHL
 Startrack

Do you have a courier satchel *

Yes
 No

Pickup date
dd/mm/yyyy

Practice opening time *

HH : MM AM ▾

Please kindly put in the time that the practice opens and closes.

Practice closing time *

HH : MM AM ▾

Email *

Phone *

Address *

Please include full details i.e., suite number or level of your building

City *



PRINT COMPLETED FORM

Ensure an online labform is submitted and printed to pack with your job.
This includes new orders, repair/return or additional impressions/models.

ORDER FORM EXAMPLE

DD Demo Dentist

Dashboard Patient Management **Order Management** Products Help Centre

Dashboard / Order Management

Order History

Filter

Saved Orders Open Orders – Paid Open Orders – Unpaid Closed Orders

Date Created	Sales Order #	Invoice #	Patient	Total Paid	Invoice Due	ETA	Created by	Amount Due	Status	Action
09/04/2025	Pending...	Pending...	Dan Jones	\$0.00			Demo Dentist	\$3.1	Pending	View
04/03/2025	SOAUS0063338	Pending...	Nicola Cagney	\$0.00			Demo Dentist	\$1.1	Pending	View
03/02/2025	SOAUS0063298	INAUS0068257	Daniel Ryan	\$0.00	06/08/2025	03/10/2025	Demo Dentist	\$2.1	Completed	View
03/02/2025	SOAUS0063297	INAUS0068258	Reynold Barker	\$0.00	06/08/2025	03/10/2025	Demo Dentist	\$1.1	Completed	View

Choose Order(s) to Pay

Order Acknowledgement #1000001000

Date Created: 21/10/2024 Created by: Demo Dentist Sales Order #: Pending... Invoice #: Pending...

Product Name	Price	Qty	Total
SumoDent Avart - Dental Mill: As Requested - DVD (Denture) Confirmation: Yes (Open/Close DVD as Required) - Anterior Option: No - Composite Resin (Denture): No	\$0.00	1	\$0.00
Waxing Base	\$0.00	1	\$0.00
ScanFile (20 scans)	\$0.00	1	\$0.00
Subtotal			\$0.00
Shipping & Handling			\$0.00
Tax			\$0.00
Grand Total (inc. GST)			\$0.00

Patient Specific Configuration

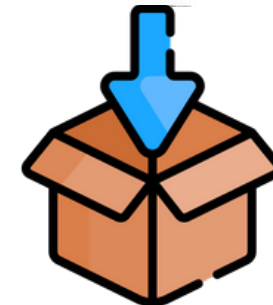
Procedure	Yes	No	Yes	No
Procedure Fee Requirement	Yes	No	Wing Fix Attachment	No
Waxing Option in Production	No	Yes	Waxing with Post Core	No
Waxing Direction	No	Yes	Waxing Legal Bulk	No
Fix Waxing Direction	No	Yes	Additional Mill Change	No
SDM Change Centre Resin	No	Yes	Acrylic	No
SDM Change Resin Production	No	Yes	Porcelain Fit	No
Total Range of Materials	No	Yes	Additional Notes	No

Order Information

Denier	Prescribing Physician	Shipping Address	Billing Address
Denier	Physician	Residential Australia, 21 Clark Street, Cronk Road, North Sydney Council, New South Wales, Australia, 2059	Residential Australia, 21 Clark Street, Cronk Road, North Sydney Council, New South Wales, Australia, 2059
Patient	Case Type	Shipping Method	Payment Method
not set	New Case Study (20)		No Payment Information Required

RE-PRINT ORDER

After submitting your order, you can choose to print the lab form straight away.
If you need to re-print, you can find your order through [Order Management](#) and click [view](#) to re-print your order.





HELP & ASSISTANCE

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New **Save** Functionality

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SomnoMed

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Contact Us

Press

Contact Number:
(02) 9467 0400

Business Hours:
9am – 5pm AEST

- 1 SomCentre & Courier Bookings
- 2 Customer Service / Lab Support
- 3 General Enquiry

[Frequently Asked Questions](#)

[Terms & Conditions](#)

Have an Online Enquiry?

Billing Enquiry

Email Address

Message

[+ Submit Enquiry](#)



HELP & ASSISTANCE

If you require any additional help or urgent assistance, please reach out to us in the Help Centre or call us: 02 9467 0400

E: contactaus@somnomed.com P: (02) 9467 0400 Lvl 3 20 Clarke Street, Crows Nest 2065, Sydney, Australia