FIRST CHOICE PRACTICE SALES, INC.

a California Corporation (01916111)

CENTER OF SAN DIEGO! HIGH-END BUILDOUT TOTALLY TURNKEY!

2 HYGIENE DAYS PER WEEK!

BUILT IN \$1,200,000+ BUSINESS! NEEDS A PROSTHODONTIST ASAP!

LISTING #		20 – 491		PRICE: \$550,000			A/R'S: None				
LOCATION:		San Diego		Est. 2009 PO		POP	PULATION: Mixed upper				
DESCRIPTION:		# of Ops: _5		# Not Plumbed:			Sq. Ft. 2,500 +/-				
Lease X		Own Opt		ion/Renew 1 x 5		Yrs. Remain 2		2+ \$/Mont		h \$10,313 FG	
Office Hours		M	T	W	Т	Н	FI	₹	SAT		SUN
	<u> </u>	9 – 6	9 – 6	9 – 6	9 -	- 6	9 -	6	Closed		Closed
STAFF Front Office – Manager - \$5,800/mo., Reception - \$2,760/mo., TC - \$4,960/mo. Back Staff – RDA - \$3,880/mo., RDA - \$4,000/mo Hygienists – 1 @ \$3,360/mo. (2 days per week) Lab – Master Ceramist - \$9,333/mo., Acrylic Lab Tech – \$4,160/mo., Assistant (1x/wk) - \$960/mo.											
PATIENT PI	ROFILE:										
% Group		5-10 Yrs:	11	-19 Yrs:		20-49	9 Yrs:			50-75+:	
% Reimb		Cash	86%	Idemn			PPO	14%		Plans	
ı		Medical	0%	Cap	0%	Avg.	Cap				
PRACTICE STATS: *(Need to verify with Buyer Audit) (approx) # Active Charts 400 (hygiene recall) # of Recalls per month* # of New Patients per month* 4 - 8 (referral arches) Total # of New Patients YTD*											
	_						rauem			No	
•											
Does practice employ a hygienist? Yes Number of days 2 % of Gross EQUIPMENT:											
		5	Hygiene				A	vg. Ag	e	Newer	
		3 digital		CT- iCat		er		0 0	n Milling S		
Special Equip owned: Laser Intraoral Camera yes Other											
bridges! Every month) for res This is \$100,0	Prost pment. H withing you storation a 100+ per n	th and OS pa as large wet a need for hi and large exi- anonth on-go	artners closing of lab, beautiful of gh-end dental be sting patient bating plus any ne 100,000+ NET	consult rooms business! OS ase needs repl w business!	ol dental pass, Zirkon	Zahn mi all full arches @ 50,000 e	Curren lling lat arches \$5,500	tly has that i @ \$13) per a	s 2 days of I mills full ard 5,000 per ard rch (3 to 5 j	ch zircor ch (6 to 7 per mont	nium 7 per h).

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REGISTRATION AGREEMENT - CONFIDENTIALITY

IMPORTANT: Please fax back this form to obtain the office location and financial data @ 949-548-0525

In consideration of FIRST CHOICE PRACTICE SALES INC., hereinafter called FIRST CHOICE, supplying me with confidential information concerning the following businesses, or any other businesses to which you may otherwise introduce me, I agree to use such confidential information obtained only for purposes of evaluation to purchase. I further agree not to divulge such information to others, except to secure professional advice. I further agree not to directly contact the owner, employees, landlord, suppliers or disturb any business relationship which includes requesting a position as an associate or asking for permission to visit the practice during practice hours of the seller without first obtaining seller's permission through FIRST CHOICE PRACTICE SALES, INC.

Should I, or anyone to whom I have introduced those confidential business listings that you previously presented to me, purchase or acquire an interest in any of those businesses, I agree to conduct all negotiations through your office. I further understand that the seller will be responsible for the payment of the commission to **FIRST CHOICE PRACTICE SALES**. I further understand and agree that if I should purchase all or any portion, lease, become an associate of or come into possession of the business through direct negotiations with the seller and without **FIRST CHOICE's** involvement, within one year from date hereof, then a commission is due **FIRST CHOICE** and I will assume responsibility for the payment of that commission.

The commission referred to above is ten percent (10%) of the total purchase price or \$12,500, whichever is greater. Should any controversy arise as a result of this agreement, **FIRST CHOICE** and I hereby agree to have the matter settled by and under the rules of the American Arbitration Association without the necessity of a court order. All rights of discovery allowed by law may be used and the prevailing party shall be entitled to actual attorney fees and costs. Any decision shall be final and binding upon myself and **FIRST CHOICE**.

NO AGENCY RELATIONSHIP IS CREATED BY SIGNING THIS AGREEMENT.

Listing No. <u>20 – 491</u>	Location	San Diego				
Accepted and Agreed to:						
Signature		Agent				
Print Name		Print Name				
Date		Date				
Address		P. O. Box 8445 Newport Beach, CA 92660 (949) 548-4559				
City	ip	Any additions or deletions to this page other than information we have requested will void your request and we will not provide any additional information. Thank you.				
Phone (Circle One: Mobile/Home/Business)	<u> </u>					
E-mail Address		,				

PLEASE FAX BACK TO: 949 548-0525