FIRST CHOICE PRACTICE SALES, INC.

a California Corporation (01916111)

INCREDIBLE RETAIL LOCATION! MASSIVE FOOT TRAFFIC! NO MARKETING & CONSTANT NEW PATIENTS!

LISTING #	_	22 - 446		PRICE:		E: \$96	\$965,000 OBO			/R'S	:	Negotiable	
LOCATION:	ATION: Chula Vista		<u> </u>	I	Est.	2004	1	POPU	JLATIO	N: _	Hi	spanic	
DESCRIPTIO	DESCRIPTION: # of Ops:		ps:	5 + 1 # Not]		Not Plun	Plumbed:		Sq. Ft. 1,50)0 +/-		
Lease X		Own	0	ption/R	enew	1 x 5	Yrs.	Remair	1 <u>5</u>		\$/Month	\$4,500) +/-
Office Hours		M	T	1		\mathbf{W}	1	ТН	FR		SAT	Γ	SUN
	9_6	5 O + A	½ day	Staff	9	-62A	9 - 6	O + A	9 - 6 0 -	+ A	Close	ed (Closed
<u>STAFF</u>										1 2 1		Stay Y	
						2 D	\$23 + 1% / \$18 / \$15 2 DA @ \$16 / RDA @ \$18						
						x-ray @ \$16							
							\$38						<u>.</u>
	<u> </u>			_ Sala	ry: _	\$60	\$600 and 25% over \$3,000				Will Stay Yes		
PATIENT PRO	OFILE:												
% Group		5-10 Yrs:						_					41%
% Reimb		Cash	10%	_ I	demr	n		_	PPO _	2	0%	Plans	
		Medical	70%		Cap	o 0	%	_ Avg.	Cap _		\$0		
%Revenue	J	Restorative	23%	_ Crow	vn & 1	Bridge _	35%	_	Endo _	1	1%	Perio	10%
	Or	al Surgery	10%	_	Pros	thetics _	10%	_ (Ortho _	()%	Implant	1%
Procedures referred out: 3rds / molar endo / ortho													
PRACTICE STATS: *(Need to verify with Buyer Audit) (approx)													
# Active Charts 2,500 + # of Recalls per month*													
# of New P	atients	per month [;]	*	55 - 65	í	T	otal # o	f New P	atients Y	TD*		745 in 20	21
Any one referral source account for more than 10% of practice revenue? Yes No													
Does practice	employ	a hygienist	?	N	Ю	Numb	er of d	ays		%	of Gross	<u> </u>	
FINANCIAL:	(Need t	o verify wi	th Tax	Returns	and 1	Financia	l Inform	nation b	y Seller)				
2019	\$1,122,6	544	202	0 \$1,1	15,68	8	2021 _	\$1,099,4	43 Cur	rent	YTD	2022 Pe	ending
EQUIPMENT	<u>:</u>												
# C	hairs _	5]	Hygiene					Avg.	Age		Mixed	
# X-	Rays _	3 (3 sensor	rs)	Pano	Pre	exion CT	Oth	er <u> </u>	Endo Mot	or / I	mplant Mo	otor	
Special Equip	owned:	Lasei	r Pic	asso lite		Intraora	l Came	ra	Yes		Other		
Is the practice	comput	terized?		· · · · · · · · · · · · · · · · · · ·	Yes		T	ype of S	oftware:	Dei	ntrix / Dex	xis	
COMMENTS :	Selle	er has built		_			doctor d	lays per	week and	a ne	ver ending	supply of	
patients. This reprocedures and working association	there is								•			•	as a

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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>22 – 446</u>	Location	Chula Vista				
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				
Phone (Circle One: Mobile/Home/Business))	requested will void your request and we will not provide any additional information. Thank you.				
E-mail Address						

PLEASE FAX BACK TO: 949 548-0525