FIRST CHOICE PRACTICE SALES, INC.

a California Corporation (01916111)

STREETSIDE, CORNER LOCATION! STEADY NEW PATIENTS!

GREAT AREA FOR VOLUME DENTISTRY!

PRACTICE IS CLEAN, REMODELED & READY TO MAKE \$\$

LISTING #	23 - 248	PRICE: \$99,000			A/R'S: Negotiable			
LOCATION:	Pico Rivera		Est. 2021		POPULATION: Hispanic			
DESCRIPTION:	# of Op	os: <u>4</u>	# Not Plumbed:		Sq. Ft. 1,200 +/-			
Lease X	Own	Option/Re	enew 1x5	Yrs. Remai	n <u>3</u> +	\$/Month	\$3,675 total	
Office Hours	M	T	W	ТН	FR	SAT	SUN	
	Closed	Closed	Closed	Closed	9 – 6	Closed	Closed	
<u>STAFF</u>	Front:	1	Salary:	\$27	Wi	ll Stay	Yes	
	Back:		Salary:		Wi	ll Stay		
	Other:		Salary:		Wi	ll Stay		
PATIENT PROFIL	<u>.E:</u>							
% Group	5-10 Yrs:		11-19 Yrs:		Yrs:	50-75+:		
% Reimb	Cash _	XX	Idemn		PPO XX	P	lans	
	Medical _	XX	Cap	Avg.	Сар			
% Revenue Restorative		Crow	Crown & Bridge		Endo		Perio	
		 P	Prosthetics		Ortho			
Procedures	referred out:		_					
PRACTICE STATS	_	•			41.4			
# Active Charts # of New Patients per month*			457 # of Recall			·		
		•						
_		ian 10 % of praesice revenue.		Y		No		
Does practice emplo		NO Number of days						
FINANCIAL: (Nee	•				•			
2020 N	<u>VA</u> 20	21 NA	2022	\$352,185	Current Y	Y TD \$181,3	388 as of 10/3	
EQUIPMENT:								
# Chairs	4	Hygiene			Avg. A	Age	Mixed	
# X-Rays	2 (1 Clio sensor	Pano	No	Other				
Special Equip owne	ed: Las	ser No	Intraora	l Camera	Yes	Other		
Is the practice comp	=	Yes –			oftware: 0	•	nuters	
software. Great name week but associates	e and street signage	e. Location has	daily walk-in	patients. Sell	ers had grea			

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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, INC**. 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>23 – 248</u>	Location	Pico Rivera			
Accepted and Agreed to:					
Signature		Agent			
Print Name		Print Name			
Date		Date			
Address		17821 17 th Street, Suite 180 Tustin, CA 92780 (949) 548-4559			
City	Zip	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	s)				
E-mail Address					

PLEASE FAX BACK TO: 949 548-0525