

FIRST CHOICE PRACTICE SALES, INC.

a California Corporation (01916111)

STREETSIDE LOCATION!

45%+NET FOR WORKING OWNER!

ASSOCIATE RUN!

HUGE AREA FOR DENTICAL & RETIREES!

LISTING # 23 - 278 PRICE: \$785,000 OBO A/R'S: Not included

LOCATION: Lawndale Est. 2019 POPULATION: Hispanic

DESCRIPTION: # of Ops: 4 # Not Plumbed: Sq. Ft. 1,350+

Table with columns: Lease (X), Own, Option/Renew (1 x 5), Yrs. Remain (2), \$/Month (\$2,500 total), Office Hours (M, T, W, TH, FR, SAT, SUN) and their respective statuses.

STAFF table with columns: Front, Back, Other; Salary; Will Stay.

PATIENT PROFILE:

Patient profile table with columns: % Group, % Reimb, % Revenue and various categories like 5-10 Yrs, Cash, Medical, Restorative, etc.

Procedures referred out:

PRACTICE STATS: \*(Need to verify with Buyer Audit) (approx)

Practice stats table with columns: # Active Charts, # of Recalls per month, # of New Patients per month, Total # of New Patients YTD, etc.

FINANCIAL: (Need to verify with Tax Returns and Financial Information by Seller)

Financial table with columns: 2021, 2022, 2023, Current YTD.

EQUIPMENT:

Equipment table with columns: # Chairs, Hygiene, Avg. Age, # X-Rays, Pano, Other.

Special Equip owned: Laser, Intraoral Camera, Other

Is the practice computerized? Type of Software: Easy Dental

COMMENTS: Newly remodeled practice in streetside location. Great signage and local traffic. Seller maintains consistent advertising and well-trained staff. Low rent in excellent area for dentistry. Next door to Hawthorne and Gardena. Associate will stay. Fantastic area to add implants and ortho!

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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. 23 – 278 Location Lawndale

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 Zip

\_\_\_\_\_  
Phone (Circle One: Mobile/Home/Business)

\_\_\_\_\_  
E-mail Address

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.

**PLEASE FAX BACK TO: 949 548-0525**

Phone: (949) 548-4559 ● Fax: (949) 548-0525 ● [www.firstchoicedds.com](http://www.firstchoicedds.com)

**ALL INFORMATION PROVIDED SUBJECT TO BUYER VERIFICATION – BROKER MAKES NO WARRANTIES**