# FIRST CHOICE PRACTICE SALES, INC.

a California Corporation (01916111)

# BUSY STREETSIDE LOCATION! LOW RENT & STEADY NEW PATIENTS! GREAT VISIBILITY & PARKING!

**PRICE:** \$299,000

A/R'S: negotiable

LISTING #

24 - 220

LOCATION:	Van Nuys	Est	<b>Est.</b> 2014			POPULATION: Hispanic					
DESCRIPTION:	# of O	# <u> </u>	# Not Plumbed:			<b>Sq. Ft.</b> 1,000 +/-					
Lease X	Own	Optio	on/Renew 1	x 5	5 Yrs. Re		in <u>2</u> +	\$/Month _		\$2,700 total	
Office Hours	M	T	<b>'</b>	W	TI	H	FR	SA	T	ST	UN
	Closed	Closed	1 0	- 6	Clos	hea	9 – 6	Clos	her	Cl	osed
STAFF	Front:							ill Stay		<u> </u>	
SIAIT	Back:			Salary:				ill Stay			
PATIENT PROFIL				Salai y.			v	m stay _	•	1 03	
% Group		2%	11-19 Yrs:	30	<b>%</b>	20-49	) Vrc•	51%	50-	75⊥•	34%
% Reimb		35%					PPO 159		_	_	3170
76 Reinis	Medical						Cap				
%Revenue	Restorative _	_								11	0/0
76 Revenue	Oral Surgery			· <u></u>		<u> </u>			<del></del> '		
Duo oo duunoo	referred out:			· <u> </u>				270	_ mp		370
	# Active Charts		682	_	# of I						
	ents per month*							TD* <u>2</u> Zes			<u>nths</u>
Any one referral source account for more than 1 Does practice employ a hygienist?			_	-				No			
							·	_ % OI	Gross		
<b>FINANCIAL</b> : (Need 2021 \$460	•		\$466,125			-	Seller) 298 Cui	rent YTD	\$376	,314 a	s of 11/1
<b>EQUIPMENT:</b>											
	3						Avg	. Age	Mixe	d new	er
# X-Rays	Digital	<u>_</u>	Pano D	igital	-	_					
Special Equip owne	ed: La	aser		Intraor	al Cam	iera _	Yes	Oth	er		
Is the practice comp		. ,	Yes			_	Software:				1
<b>COMMENTS:</b> Se businesses drive man implants if buyer wis		the door	! Many daily	walk-in'	s. Seller	would	d transition				

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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>23 – 242</u>	Location	Van Nuys				
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	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