



WESTERN PRACTICE SALES

John M. Cahill Associates

#HN-773

Sutter Creek, California

Located in an area known for beautiful scenery, excellent wine and rich history. This exceptional community is the perfect balance of the Gold Rush days and its attractive dining, shopping, and exploration opportunities in this quaint small-town in the heart of Amador County. *Sutter Creek truly has something for everyone!*

The Perfect Place to Live, Work, Play and Raise a Family!

The Doctor averages 7 patients w/ 6 to 7 Hygiene patients per day and generates approximately 5 new patients per month.

The office is conveniently located in an attractive, well-maintained, single-story Professional building complex with ample parking in professional corridor or desirable neighborhood.

The office occupies approximately 1,536 square feet and consists of 4 fully equipped Ops with possibility of 5th Op, Reception area, Doctor's office, Business office, Sterilization, Darkroom, Lab, Storage, and 2 Restrooms.

Seller Extremely Motivated!

Priced to Sell ~ Now Only: \$175,000

Plus \$20,000 towards Tenant Improvements!

For further details or on-site visit, please contact:

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▶ **Honesty** ▶ **Integrity** ▶ **Professionalism** ▶ **Experience**

We look forward to serving you

HN-773

WESTERN PRACTICE SALES / JOHN CAHILL ASSOCIATES

\$195,000

PRACTICE INFORMATION SHEET

OFFICE OPERATION INFORMATION

	SUN	MON	TUE	WED	THUR	FRI	SAT
Office Hours		8 – 5		8 – 5		Some	
Doctor's Hours		9 – 5		9 – 5			
Hygienist Hours		8 – 5		8 – 5			
Type of Practice:	General		Reason for Selling:		Personal		
Years established:	~ 27 yrs		Days worked past 12 months:		~106*		
*Dentist Produces: ~\$224 per hr & ~ \$250 per patient Hygienist Produces: ~\$140 per hr & ~\$147 per Patient							

OFFICE SPACE & LEASE INFORMATION

Is the building/suite owned?	Yes	Is building available for purchase?	No	
Is the space leased?	No	Is lease renewable?	N/A	
Term of Lease:	Negotiable – Seller Owns		Expiration date:	TBD
Do you share space with another dentist?	Yes, owner sublets to specialist for \$1,135 per month			
Rent per month	\$2,304 per month	Common area, maintenance fees /taxes included?	Yes	
If not included, current amount paid?	N/A	Are utilities included?	No	
Is the rent considered above, below or at fair market value?	Fair Market			
Type of Building:	Condo	Free-standing	X	
		Professional	X	
			Retail Center	
Office Square footage:	1,536 sq ft	Carpet?	Yes	
		Air conditioning?	Yes	
Number of fully equipped ops:	4	Plumbed for additional ops?	Possibly 1 additional	
Reception area:	Yes	Dark room:	Yes	
		Doctor's office:	Yes	
		Lab:	Yes	
Business office:	Yes	Restrooms:	Yes, 2	
		Sterilization:	Yes	
		Storage:	Yes	
Laser:	No	Digital X-ray:	No	
		Intra-oral Camera:	No	
		Cerec:	NO	
Description of office building, Location and attributes of practice (a brief description):	Attractive, well-maintained, single-story Professional building complex w ample parking, on major thoroughfare of professional corridor in desirable neighborhood			

PATIENT DEMOGRAPHICS

Breakdown of Service/Procedures as a percentage of Collections:

Preventative/Hygiene	13.65	Diagnostic	11.05	Adjunctive	1.46	Dentures	10.54
General Operative	19.03	Endo	5.38	Ortho/TMJ		Perio	1.85
Oral Surgery	3.32	Cosmetic	0	Crown/Bridge	28.71	Implant	5

What services/procedures are referred out? (i.e. Oral Surgery, Endo, Perio, Ortho, Pedo)

Complex Oral Surgery-3rd molars, Endo-molar endo, Difficult Pedo Behavioral Management

Type of patients as a percentage of Collections:

Private Pay **60** Insurance/PPO **40** Denti-Cal **0** Capitation (HMO) **0** Other **0**

Are you a Delta Provider? **Yes** If Yes, Delta PPO **X**Delta Premier

***Delta Premier:** Dentists enrolling for the first time in the Premier Network are also being required to enroll in the PPO network. The requirement to sign with both networks will result in treatment provided to those Delta PPO patients within the practice being reimbursed at the PPO level, without the ability to balance bill those patients to Premier rates. This could result in a reduction in the practice collections that could lower the buyer’s projected income depending on the amount of Delta DPO patients in the practice who have actually paid the difference between the fee schedules.

Does your practice participate in “Care Credit”? **No**

List Preferred Provider, Health Care Provider and Capitation Plans now in place:

Delta Dental and First Dental Health

Estimated Number of Active Patient Files: **Number to be defined by Buyer’s Due Diligence Process***

***SELLER IN NO WAY WARRANTS THE EXACT ACCURACY OF PATIENT FILES. IT IS THE BUYER’S RESPONSIBILITY TO DEFINE AND VERIFY ACTIVE PATIENT FILES WITH A CHART REVIEW. PRACTICE VALUE IS PREDOMINANTLY DETERMINED BY SELLER’S COLLECTIONS. SELLER’S COLLECTIONS CAN BE INDICATIVE OF THE NUMBER OF ACTIVE PATIENTS AND TYPE OF PROCEDURES PERFORMED.**

Average number of New Patients per month for past 12 months: **~60**

Average number of patients per day? **~ 13-14** Per-Doctor: **7** Per-Hygienist: **6-7**

Hygiene days per week: **~2** Percentage of Production by Hygiene: **~ 28%**

Average age of patients: **Family Range**

Does the office have Nitrous Oxide? **Yes, Plumbed throughout**

Type of recall system used? **Post Appt Scheduling / Follow up Calls**

Number of recalls per month? **~64**

What types of Practice Promotions? **Word-of-mouth and Website**

Phone Book Advertising? **** Yes** **** Phone book advertising contracts will be the responsibility of buyer after transition.**

EQUIPMENT & LEASEHOLDS

Occasionally some specialized items may be excluded from the sale, such as: Articulators, Endo and/or Implant Systems. These items will be referenced as "excluded" on Seller's Equipment list. In addition, Buyer understands that the following items may also be excluded from the sale: diplomas, certificates, cameras, photographs, artwork and miscellaneous personal items.

Describe age and characteristics of leasehold improvements:

Currently being remodeled: New ADA Compliant Restroom, Flooring, Paint and Updated Exterior

Average age of Equipment: **~25 yr**

Any equipment leases? **No** Equipment is right/left-handed/convertible? **Right, Convertible**

PERSONNEL

Position	Days/Hrs	Date hired	Rate of Pay	Eligible for benefits
Reception***	16 hrs / Week		\$24.50/hr	No
RDA	16 hrs / Week	2007	\$20.00/hr	No
RDH	1.5 to 2 days a week	2014	\$300/day +Bonus	No

Do family members work in the office? **Yes** If yes, how much are they paid? ***\$24.50/hr**

Has staff left the practice recently? **No**

Is there a practice management consultant? **No**

PRACTICE FINANCIAL PROFILE

Last 3 years' Gross Collections from Tax Returns:

2016 **332,979.74** 2015 _____ 2014 _____

***Collection amounts are approximate and should be verified by Buyer**

Number of statements sent each month? _____ Is pegboard or computer? **Computer**

What type of computer? **ACR** What software? **Softdent**

Is software transferable? **Yes, Transfer Fee, if applicable, to be paid by Buyer**

Fees Schedule: **Available upon request**

NOTE: The Seller has furnished the preceding information to WESTERN PRACTICE SALES/JOHN M. CAHILL ASSOCIATES. This information has not been verified. A potential Buyer should verify the accuracy of all information to his/her own satisfaction.

WESTERN PRACTICE SALES/JOHN M. CAHILL ASSOCIATES are agents of the Seller and therefore represent the interest of the Seller. We strongly advise a potential purchaser to seek independent counsel to represent his/her interests. Counsel may be, but is not limited to, an attorney, accountant, appraiser, broker or management consultant. Fees of such counsel are the sole responsibility of the purchaser.