



## WESTERN PRACTICE SALES

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John M. Cahill Associates

# CC-1115

### Western Marin County, California

Choose your lifestyle in this one-of-a-kind seaside community in Western Marin County. The relaxed workweek allows the new owner to spend a few days strolling near the beach and taking in local history, or provides an opportunity to expand this practice into a full-time, thriving location! Established for 30+ years, Seller is retiring and is passing this gem to you to take it to the next level!

The Doctor averages 7-8 patients per day and welcomes approximately 30 new patients per month.

The office is conveniently located in an attractive, well-maintained single-story Retail center near local pharmacy and popular local café near Highway 1.

The office occupies approximately 510 square feet and consists of 2 fully equipped Ops, Reception area, Doctor's office, Business office, Sterilization, Darkroom, Lab, Storage, and Restroom.

***Full Price: \$75,000***

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

Timothy G. Giroux, DDS

Jon B. Noble, MBA

John M. Cahill, MBA

Edmond P. Cahill, JD

**800.641.4179**

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

**We look forward to serving you**

**CC-1115**

**WESTERN PRACTICE SALES / JOHN CAHILL ASSOCIATES**

**\$ 75,000**

**PRACTICE INFORMATION SHEET**

**OFFICE OPERATION INFORMATION**

	SUN	MON	TUE	WED	THUR	FRI	SAT
Office Hours		9 – 5	9 – 5	(Admin)	9 – 5	(Admin)	<i>1x month</i>
Doctor's Hours		9 – 5	9 – 5	(Admin)	9 – 5	(Admin)	<i>1x month</i>
Type of Practice:	<b>General</b>		Reason for Selling:			<b>Retirement</b>	
Years established:	~ 33 yrs		Days worked past 12 months:			~ 165+ days	

**OFFICE SPACE & LEASE INFORMATION**

Is the building/suite owned?	<b>No</b>	Is building available for purchase?	<b>N/A</b>				
Is the space leased?	<b>Yes</b>	Is lease renewable?	<b>Yes</b>	Is lease assignable?	<b>Yes</b>		
Term of Lease:	<b>Month-to-Month</b>			Expiration date:	<b>N/A</b>		
Rent per month	<b>\$1,105.00/month</b>		Common area, maintenance fees /taxes included?	<b>Yes</b>			
If not included, current amount paid?	<b>N/A</b>		Are utilities included?	<b>Yes, Water &amp; Gas</b>			
Is the rent considered above, below or at fair market value?	<b>Below Market</b>						
Type of Building:	Condo	Free-standing	Professional	<b>Retail Center</b>	<b>X</b>		
Office Square footage:	<b>510 sf</b>	Carpet?	<b>Yes</b>	Air conditioning?	<b>No</b>		
Number of fully equipped ops:	<b>2</b>	Plumbed for additional ops?	<b>No</b>				
Reception area:	<b>Yes</b>	Dark room:	<b>Yes</b>	Doctor's office:	<b>Yes</b>	Lab:	<b>Yes</b>
Business office:	<b>Yes</b>	Restrooms:	<b>Yes, 1</b>	Sterilization:	<b>Yes</b>	Storage:	<b>No</b>
Digital X-ray:	<b>No</b>	Cerec:	<b>No</b>	Laser:	<b>No</b>	Intra-oral Camera:	<b>No</b>
						3D Imager:	<b>No</b>

Description of office building, Location and attributes of practice (a brief description): **Single-story Retail Shopping Center with close proximity to local pharmacy & popular local Café near Highway I.**

## PATIENT DEMOGRAPHICS

Breakdown of Service/Procedures as a percentage of Collections:

Preventative/Hygiene	<b>40</b>	Diagnostic	<b>10</b>	Adjunctive		Dentures	<b>5</b>
General Operative	<b>20</b>	Endo		Ortho/TMJ		Perio	
Oral Surgery	<b>5</b>	Cosmetic	<b>10</b>	Crown/Bridge	<b>10</b>	Implant	

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

**Complex Oral Surgery, Endo, Perio, Ortho**

Type of patients as a percentage of Collections:

Private Pay 72% Insurance/PPO 28% Denti-Cal \_\_\_\_\_ Capitation (HMO) \_\_\_\_\_ Other \_\_\_\_\_

Are you a **Delta Provider**? Premier Only \_\_\_\_\_ **Premier + PPO** Yes

**\*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: **PPO: Delta, Anthem, United Healthcare, Aetna, United Concordia, Premier Access, Guardian**

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: **~3-5/month**

Average number of patients per day? Per-Doctor: **7-8** Per-Hygienist: **N/A**

Hygiene days per week: **N/A**

Average age of patients: **Mid – mature Family Range**

Does the office have Nitrous Oxide? **No**

Type of recall system used? **Prescheduling & Postcard Reminders**

Number of recalls per month? **~ 30-40**

What types of Practice Promotions? **Senior Discounts**

Phone Book Advertising? \* **No** \* *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: **Remodeled in 1980's, New Carpets and Flooring in 1990's and new paint in early 2000's.**

Average age of Equipment: **20-25 years**

Any equipment leases? **No** Equipment is right/left-handed/convertible? **Right & Left**

## PERSONNEL

Position	Days/Hrs	Date hired	Rate of Pay	Eligible for benefits
<b>RDA/Front Desk</b>	<b>M – F</b>	<b>~ 2007</b>	<b>Available Upon Request</b>	<b>Yes</b>

Do family members work in the office? **No** If yes, how much are they paid? **N/A**

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

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

## PRACTICE FINANCIAL PROFILE

### Last 3 years' Gross Collections from Corporate Tax Returns:

*Fiscal Year ending 7/31:* 2019 \$ 152,529 2018 \$ 183,120 2017 \$ 165,880

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

Is pegboard or computer? **Both** What type of computer? **Dell PC**

What software? **EZ 2000** 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.**