



CLIENT OPENING SURVEY FORM

Male
MR./MRS./MISS

Glenn
FIRST NAME

Jones
LAST NAME

9047286255
CONTACT NUMBER

814-299-2877
ALTERNATE NUMBER

COMPANY DATA BASE

stitch235123@yahoo.com
EMAIL ADDRESS

Classic Tub Repairs,
Inc.
COMPANY NAME

www.classictubrepair.com
WEBSITE URL

5235 Mission Oaks Blvd
Address

Camarillo
City

CA
State

93012
ZIP Code

General Building Contractors
SIC DESCRIPTION

1521
SIC CODE

Independent
ENTITY TYPE

Under \$500,000
COMPANY SALES

245,100.01
REVENUE (USD)

Ventura
COUNTRY/REGION

YES
MEDICAL INSURANCE



US Hwy 1 S, Saint Augustine, FL 32086 ,Plantation Island
Dr S, Saint Augustine, FL 32080

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1782