

## CLIENT OPENING SURVEY FORM

IVII	nuw	Davies
MR./MRS./MISS	FIRST NAME	LAST NAME
(760) 451-3109		(760) 978-7083
CONTACT NUMBER		ALTERNATE NUMBER
	COMPANY DATA BA	ASE
	SH Commercial Real	
ıw.davies@dewhirst.com	Estate/Special Use	shcommercialrealestate.com
EMAIL ADDRESS	<b>Properties</b>	WEBSITE URL
	COMPANY NAME	
NA		
Address		
Tarzana	CA	91357
City	State	ZIP Code
Real Estate Agents and Manage	ers	
SIC DESCRIPTION		
NA		Independent
SIC CODE		ENTITY TYPE
\$500,000 to \$999,999		954,699.99
COMPANY SALES		REVENUE (USD)
NA		YES
COUNTRY/REGION		MEDICAL INSURANCE
•		G
US Hwy 1 S, Saint Augustine, FL 32086 ,Plantation Island Dr S, Saint Augustine, FL 32080		+1 (904) 117- 1782