



# CLIENT OPENING SURVEY FORM

Mr

MR./MRS./MISS

Greg

FIRST NAME

Orwin

LAST NAME

7146263524

CONTACT NUMBER

7144007789

ALTERNATE NUMBER

## COMPANY DATA BASE

[greg.orwin@scisys.co.uk](mailto:greg.orwin@scisys.co.uk)

EMAIL ADDRESS

Pontell Insurance

COMPANY NAME

<http://www.pontellinsurance.com>

WEBSITE URL

1484 Tuskawilla Rd

Address

Oviedo

City

Florida

State

32765-8756

ZIP Code

Auxiliary Insurance Services

SIC DESCRIPTION

6420

SIC CODE

Independent

ENTITY TYPE

\$500,000 to \$999,999

COMPANY SALES

816,600.02

REVENUE (USD)

Florida

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