



CLIENT OPENING SURVEY FORM

Mr/Mrs/Miss

MR./MRS./MISS

Dean

FIRST NAME

Istslssn

LAST NAME

416-847-4418

CONTACT NUMBER

416-762-6649

ALTERNATE NUMBER

COMPANY DATA BASE

dean_ketelsen@yahoo.com

EMAIL ADDRESS

Robert Grant Law
Offices

COMPANY NAME

robertgrantlaw.com

WEBSITE URL

688 North Arrowhead Avenue

Address

San Bernardino

City

CA

State

92401

ZIP Code

Legal Services

SIC DESCRIPTION

8111

SIC CODE

Independent

ENTITY TYPE

Under \$500,000

COMPANY SALES

88,600.00

REVENUE (USD)

San Bernardino

COUNTRY/REGION

YES

MEDICAL INSURANCE



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



+1 (904) 117-
1782