



CLIENT OPENING SURVEY FORM

Male

MR./MRS./MISS

Edward

FIRST NAME

Scott

LAST NAME

8186186654

CONTACT NUMBER

207-233-6185

ALTERNATE NUMBER

COMPANY DATA BASE

eds12287@gmail.com

EMAIL ADDRESS

Central Jersey Trailer
& Hitch, LLC

COMPANY NAME

<http://www.hitchone.com>

WEBSITE URL

45 Fourth St

Address

Somerville

City

New Jersey

State

08876-3205

ZIP Code

Trailer and Other Motor Vehicle Retailing

SIC DESCRIPTION

3913

SIC CODE

Independent

ENTITY TYPE

Under \$500,000

COMPANY SALES

535,000.03

REVENUE (USD)

New Jersey

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