



Confidentiality Agreement

Buyer Name (hereinafter "Buyer") is interested in the possible acquisition of a dental practice in STATE.

Buyer acknowledges that Veritas Transition Group ("Veritas Transition Group") shall furnish buyer with certain confidential and proprietary information pertaining to the Owner's dental practice, including, but not limited to tax returns, profit and loss statements, fees schedules, employment records, equipment lists, patient lists, appraisals, leases, etc. In consideration for Veritas Transition Group providing the aforementioned information, Buyer hereby agrees to the following:

1. That all the information and documentation provided to or disclosed to Buyer or private in nature and shall remain confidential. Buyer agrees not to disclose any person, firm or corporation without Owner's express written consent information or documentation that Buyer shall acquire regarding Owner's dental practice, except to Buyer's attorney or accountant. Buyer agrees that the disclosure of any information or documentation with respect to the dental practice Owner would cause Owner irreparable harm and damage. Buyer further agrees that buyer will hold harmless and indemnify Veritas Transition Group and Owner in the event of disclosure of any information or documentation respecting Owner's dental practice, except as herein noted.
2. That the information and documentation forwarded to Buyer pertaining to the Owner's practice is to be used solely to assist Buyer in deciding whether to purchase said practice and will not be used in any other manner for personal or professional benefit.
3. That in the event Buyer decides to purchase the above mentioned practice, Buyer will immediately notify Veritas Transition Group of this decision and will return all documentation without retaining copies or extracts thereof.
4. The Buyer will not directly contact the dental practice Owner, practice employees, or any agents of the practice without Veritas Transition Group's express written consent.

Buyer Name: _____

Buyer Signature: _____ Date: _____

Practice # or Location Interested: _____

Veritas Transition Group

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