



STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

525 WEST JEFFERSON ST. • SPRINGFIELD, ILLINOIS 62761 • (217) 782-3516 FAX: (217) 785-4111

July 15, 2016

CERTIFIED LETTER
RETURN RECEIPT REQUESTED

Timothy Tincknell, FACHE
Davita HealthCare Partners, Inc.
1600 West 13th Street, Suite 3
Chicago, Illinois 60608

Re: Section 1130.770 Final Cost Report
Permit Number: #13-070 – DaVita Belvidere Dialysis
Permit Holder: DaVita HealthCare Partners, Inc., Dialysis of Northern Illinois,
LLC

Dear Mr. Tincknell:

We are in receipt of your final project cost report for Permit #13-070 dated June 28, 2016. The report is in compliance with State Board Rules (77 IAC 1130.140 and 1130.770). Based upon your report, our records will show that the permit had a final realized cost of \$2,559,358 and a project completion date of March 28, 2016, the date the stations were certified by Medicare.

No further action by the permit holder is required for this permit in relationship to the Illinois Health Facilities Planning Act.

Should you have any questions or concerns please contact Mike Constantino or George Roate of my staff at Mike.Constantino@illinois.gov or George.Roate@illinois.gov or 217.782.3516.

Sincerely,

A handwritten signature in black ink that reads "Kathy Olson". The signature is written in a cursive style.

Kathy Olson, Board Chair
Illinois Health Facilities and Services Review Board