



**FRESENIUS
KIDNEY CARE**

Fresenius Kidney Care
3500 Lacey Road, Downers Grove, IL 60515
T 630-960-6807 F 630-960-6812
Email: lori.wright@fmc-na.com

November 2, 2016

RECEIVED

NOV 04 2016

HEALTH FACILITIES &
SERVICES REVIEW BOARD

Ms. Courtney Avery
Administrator
Illinois Health Facilities & Services Review Board
525 West Jefferson, 2nd Floor
Springfield, IL 62761

Re: Request For Permit Renewal Section 1130.750
Project #14-047, Fresenius Medical Care Humboldt Park
Permit Holder: Fresenius Medical Care of Illinois, LLC, and Fresenius Medical Care Holdings, Inc.

Dear Ms. Avery:

Fresenius Medical Care of Illinois, LLC is seeking a permit renewal for Fresenius Medical Care Humboldt Park. Enclosed is a \$500.00 permit renewal fee. There has been no change to the size and scope of this project since the permit was altered June 30, 2015. This report summarizes the current status of the project.

Sincerely,

Lori Wright
Fresenius Medical Care
Senior CON Specialist

cc: Clare Ranalli



October 11, 2016

Request For Permit Renewal Section 1130.750

Request For Permit Renewal Section 1130.750

Project #14-047, Fresenius Medical Care Humboldt Park

Permit Holder: Fresenius Medical Care of Illinois, LLC, and Fresenius Medical Care Holdings, Inc.

- 1. The requested completion date:** *The requested completion date is December 31, 2017.*
- 2. a status report on the project detailing what percent has been completed and a summary of project components yet to be finished and the amount of funds expended on the project date**

This project is for the establishment of a 34-station ESRD facility (concurrent with a 20-station reduction of Fresenius West Metro) and was approved for an alteration June 30, 2015 reducing the size of the clinic down to 15,641 GSF with a permit amount of \$8,686,230. The project was obligated with the execution of the lease.

The project is approximately 75% complete and is expected to be complete prior to December 31, 2017.

- 3. a statement as to the reasons why the project has not been completed**

Initial delays were encountered by the shell building contractor's findings of lead contaminated soil, buried concrete foundations, railroad ties, etc. on the site. The shell building contractor also required extra time to reconstruct a wall found to be faulty during the construction phase.



4. evidence of financial commitment to fund the project

Sources and Uses of Funds

All Project financing to date has been funded from available cash and its equivalents as reported on the company's financial statements. The right to occupy the premises has been secured through a leasing arrangement. This leasing arrangement was utilized to obligate the project. None of the project costs have exceeded the approved permit amounts.

Total committed for Project

PROJECT COST AND SOURCES OF FUNDS		
	Committed	Spent
Preplanning Costs	N/A	N/A
Site Survey and Soil Investigation	N/A	N/A
Site Preparation	N/A	N/A
Off Site Work	N/A	N/A
New Construction Contracts	N/A	N/A
Modernization Contracts	2,518,201	45,000
Contingencies	250,256	0
Architectural/Engineering Fees	271,000	138,612
Consulting and Other Fees	N/A	N/A
Movable or Other Equipment (not in construction contracts)	646,000	0
Bond Issuance Expense (project related)	N/A	N/A
Net Interest Expense During Construction (project related)	N/A	N/A
Fair Market Value of Leased Space or Equipment	5,000,773	5,000,773
Other Costs To Be Capitalized	N/A	N/A
Acquisition of Building or Other Property (excluding land)	N/A	N/A
	Total Committed For Project	
	8,686,230	
	Spent	5,184,385

5. **Anticipated final cost of the project:** Final cost will be within the permit amount of \$8,686,230.



FRESENIUS KIDNEY CARE

Fresenius Medical Care of Illinois, LLC

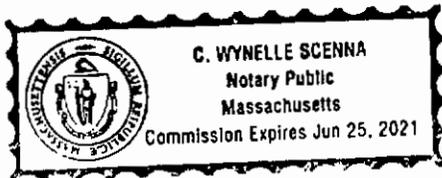
In accordance with Section 1130.740 part c, of the Illinois Health Facilities & Services Review Board rules for renewal of a permit;

I do hereby certify that the project was initiated on 05/08/2015 with the lease execution and; that the financial resources to fund the project are available or otherwise committed; and that the project's cost, scope, design, square footage, number of stations are in compliance with that which the State Board has approved.

By: *B. Mello*
ITS: Bryan Mello
Assistant Treasurer

Notarization: *C Wynelle Scenna*
Subscribed and sworn to before me
This 14 day of Oct, 2016

Seal





FRESENIUS KIDNEY CARE

Fresenius Medical Care Holdings, Inc.

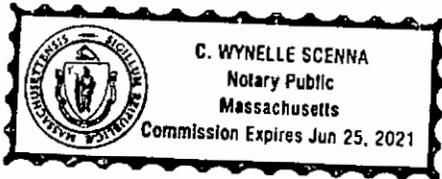
In accordance with Section 1130.740 part c, of the Illinois Health Facilities & Services Review Board rules for renewal of a permit;

I do hereby certify that the project was initiated on 05/08/2015 with the lease execution and; that the financial resources to fund the project are available or otherwise committed; and that the project's cost, scope, design, square footage, number of stations are in compliance with that which the State Board has approved.

By: *Bryan Mello*
ITS: Bryan Mello
Assistant Treasurer

Notarization: *C Wynelle Scenna*
Subscribed and sworn to before me
This 14 day of Oct, 2016

Seal



APPLICATION AND CERTIFICATE FOR PAYMENT

TO (OWNER): Fresenius Medical Care PROJECT: Chicago IL
Humboldt Park FMC 9586 1

FROM (CONTR.): Cohen Architectural VIA (ARCHITECT):
Woodworking

CONTRACT FOR: Millwork & Installation

AIA DOCUMENT G702

APPLICATION NO: 1
PERIOD TO: 1/16/2016
CONTRACTOR'S PROJECT NO:
CONTRACTOR DATE:

Distribution to:
OWNER: ARCHITECT
CONTRACTOR

CONTRACTOR'S APPLICATION FOR PAYMENT

CHANGE ORDER SUMMARY		ADDITIONS	DEDUCTIONS
Change Orders approved in previous months by Owner			
Approved this month	Date Approved	TOTAL	TOTAL
		0	0
TOTALS		0	0
Net change by Change Orders		0	0

The undersigned Subcontractor certifies that to the best of Subcontractor's knowledge, information and belief the Work covered by this Application for Payment has been completed in accordance with the Contract Documents, that all amounts have been paid by the Contractor for Work for which previous Certificates for Payment were issued and payments received from the Owner, and that current payment shown herein is now due.

CONTRACTOR:

By: Date: 1/15-16

A M GILLENWATER
Notary Public - Notary Seal
STATE OF MISSOURI
Crawford County
Commission Number 13494056
My commission expires June 17, 2017

Application is made for Payment, as shown below, in connection with the Contract. Continuation Sheet, AIA Document G703, is attached.

1. ORIGINAL CONTRACT SUM \$ 175,536.00
 2. Net change by Change Orders \$ -
 3. CONTRACT SUM TO DATE (Line 1 + 2) \$ 175,536.00
 4. TOTAL COMPLETED & STORED TO DATE (Column G on G703) \$ 50,000.00
 5. RETAINAGE:
 - a. 10 % of Completed Work \$ 5,000.00
(Columns D + E on G703)
 - b. 100 % of Stored Material
(Column F on G703)
- Total Retainage (Line 5a + 5b or Total in Column I of G703) \$ 5,000.00
6. TOTAL EARNED LESS RETAINAGE \$ 45,000.00
(Line 4 less Line 5 Total)
 7. LESS PREVIOUS CERTIFICATES FOR PAYMENT (Line 6 from prior Certificate)
 8. CURRENT PAYMENT DUE \$ 45,000.00
 9. BALANCE TO FINISH, INCLUDING RETAINAGE (Line 3 less Line 6) \$ 130,536.00

ARCHITECT'S CERTIFICATE FOR PAYMENT

In accordance with the contract Documents, based on on-site observations and the data comprising the above application, the Architect certifies to the Owner that to the best of the Architect's knowledge, information and belief the Work has progressed as indicated the quality of the Work is in accordance with the Contract Documents, and the Contractor is entitled to payment of the AMOUNT CERTIFIED.

AMOUNT CERTIFIED

(Attach explanation if amount certified differs from the amount applied for.)
ARCHITECT:

By: _____ Date: _____

This Certificate is not negotiable. The AMOUNT CERTIFIED is payable only to the Contractor named herein. Issuance, payment and acceptance of payment are without prejudice to any rights of the Owner or Contractor under this Contract.

NOTICE: PROPERTY OWNERS IMPORTANT INFORMATION CONCERNING MECHANICS LIENS ON REVERSE SIDE.

State of Missouri County of Crawford
Subscribed and sworn to before me this 15 day of Jan 2016
Notary Public: A M Gillenwater
My Commission expires: June 17, 2017