



March 6, 2018

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**HEALTH FACILITIES &
SERVICES REVIEW BOARD**

VIA FEDERAL EXPRESS

Michael Constantino
Supervisor, Project Review Section
Illinois Department of Public Health
Health Facilities and Services Review Board
525 West Jefferson Street, Second Floor
Springfield, Illinois 62761

**Re: Notice of Project Completion and Final Realized Cost Report – Park
Manor Dialysis (Proj. No. 15-048)**

Dear Mr. Constantino:

On behalf of DaVita Inc. and Pawlier Dialysis LLC d/b/a Park Manor Dialysis (collectively, "DaVita"), I am writing to submit the notice of project completion and final realized project cost report for Project No. 15-048. On February 16, 2016, the Illinois Health Facilities and Services Review Board ("State Board") approved DaVita's application for a certificate of need permit to establish a 16-station in-center hemodialysis facility located at 9505 South Colfax Avenue, Chicago, Illinois 60617 (the "Project"). The Project was obligated on February 27, 2016 through the execution of a lease to establish the dialysis facility. The facility was notified by the Centers for Medicare and Medicaid Services in a letter dated February 27, 2018 that the 16 stations were approved and certified with an effective date of February 7, 2018.

For your review, DaVita submits the following information as its final realized cost report for the establishment of Park Manor Dialysis:

1. Final Realized Project Costs

| Park Manor Dialysis Final Realized Project Costs | | |
|--|--------------------|--------------------|
| | Approved | Expended |
| New Construction Contracts * | \$1,405,263 | *\$1,268,420 |
| Contingencies | \$110,000 | \$0 |
| Architectural /Engineering Fees | \$107,700 | \$69,536 |
| Consulting and Other Fees | \$88,000 | \$13,777 |
| Movable or Other Equipment (not in construction contracts) | \$597,077 | \$634,676 |
| Fair Market Value of Lease Space and Equipment | \$1,803,194 | \$1,803,194 |
| ESTIMATED TOTAL PROJECT COST | \$4,111,234 | \$3,789,603 |

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*The G702 does not include the Permit Holder's purchased lighting package of \$60,808, a door security system of \$21,612, and \$5,015 of miscellaneous work. These amounts were added to the New Construction Costs.

All of the costs reported in the Table above will be reported on the Medicare / Medicaid cost reports.

2. Medicare and Medicaid Cost Reports and Certification of Compliance

Pursuant to 77 Ill. Admin. Code §1130.770, DaVita certifies the final realized costs are the total costs required to complete the Project and no additional or associated costs or capital expenditures related to the Project will be submitted for reimbursement under Title XVIII or Title XIX. I further certify DaVita has complied with all of the terms of the permit to date and all information submitted in this cost report for the facility is true and correct.

3. Final Application and Certification for Payment

Attached as Attachment A is the final Application and Certification for Payment (G702) for the Project.

If you have any questions or need any additional information related to the Project, please feel free to contact Tim Tincknell at 773-278-4403 or timothy.tincknell@davita.com.

Sincerely,



Gaurav Bhattacharyya
Division Vice President
DaVita Inc.

SUBSCRIBED AND SWORN

to before me this 6 day of

MARCH, 2018



My commission expires: 06-15-19

Attachment

cc: Dawn Thomas, DaVita Inc.
Jim Burke, DaVita Inc.
Anne Cooper, Polsinelli PC

DAVITA - APPLICATION FOR PAYMENT: Cover Sheet

TO OWNER:
 DaVita, Inc.
 1627 Cole Blvd. Bldg 18
 Lakewood, CO

PROJECT:
 Park Manor
 9505 S Colfax Avenue
 Chicago, IL 60627

APPLICATION NO: 5

Distribution to:

- OWNER
- ARCHITECT
- CONTRACTOR
-
-

PERIOD TO: 07/31/17

PERIOD FROM: 07/01/17

FROM CONTRACTOR:
 Leopardo Companies, Inc.
 5200 Prairie Stone Parkway
 Hoffman Estates, IL 60192

VIA ARCHITECT:
 Studio GC, Inc.
 223 W Jackson Blvd, Suite 1200
 Chicago, IL 60606

DVA PROJ NO: 11,165
GC JOB NO: 16-2834
CONTRACT DATE: 8/12/16

CONTRACT FOR: General Construction

CONTRACTOR'S APPLICATION FOR PAYMENT

Application is made for payment, as shown below, in connection with the Contract Continuation Sheet is attached

The undersigned Contractor certifies that to the best of the Contractor'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.

- 1. ORIGINAL CONTRACT SUM \$ 1,141,803.00
- 2. Net change by Change Orders \$ 39,182.00
- 3. CONTRACT SUM TO DATE (Line 1 + 2) \$ 1,180,985.00
- 4. TOTAL COMPLETED & STORED TO DATE: Column G (TI Tab) \$ 1,180,985.00
- 5. RETAINAGE
 - a. 0.00 % of Completed Work \$ 0.00
(Column D + E on TI Tab)
 - b. 0.10 % of Stored Material \$ 0.00
(Column F on TI Tab)
 - Total Retainage (Lines 5a + 5b or Total in Column I of TI Tab) \$ 0.00
- 6. TOTAL EARNED LESS RETAINAGE \$ 1,180,985.00
(Line 4 less Line 5 Total)
- 7. LESS PREVIOUS CERTIFICATES FOR PAYMENT (Line 6 from prior Certificate) \$ 596,295.47
- 8. CURRENT PAYMENT DUE \$ 484,689.53
- 9. BALANCE TO FINISH, INCLUDING RETAINAGE \$ 0.00
(Line 3 less Line 6)

CONTRACTOR: Leopardo Companies, Inc.

By: *Joseph L. Giametti* Date: 8/11/17

CERTIFICATE FOR PAYMENT

In accordance with the Contract Documents, based on on-site observations and the data comprising the application, 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 \$ 484,689.53

(Attach explanation if amount certified differs from the amount applied. Initial all figures on this Application and on the Continuation Sheet that are changed to conform with the amount certified.)

Authorized Representative: DaVita, Inc.

By: *Carl Giametti* Date: 8/24/2017

EB449179E8D94E3.
 This Certificate is non-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.

| CHANGE ORDER SUMMARY | ADDITIONS | DEDUCTIONS |
|--|--------------------|---------------|
| Total changes approved in previous months by Owner | \$11,819.00 | \$0.00 |
| Total approved this Month | \$27,363.00 | \$0.00 |
| TOTAL \$ | \$39,182.00 | \$0.00 |
| NET CHANGES by Change Order | \$39,182.00 | |

* Note - All items in blue require manual entry

Schedule of Values (Life Safety)

APPLICATION NO: 5
 APPLICATION DATE: 7/31/2017
 PERIOD TO: 7/31/2017
 PERIOD FROM: 7/1/2017
 DaVita PROJECT NO: 11,165

Cost Categories shown below are not to be added to, or deviated from
 In tabulations below, state amount for each category
 Use Column I on Contracts where variable retainage for line items may apply.

| A ITEM NO. | B DESCRIPTION OF WORK | C SCHEDULED VALUE | D WORK COMPLETED | | F MATERIALS PRESENTLY STORED (NOT IN D OR E) | G TOTAL COMPLETED AND STORED TO DATE (D+E+F) | % (G + C) | H BALANCE TO FINISH (C - G) | I RETAINAGE (IF VARIABLE RATE) (% * G) |
|------------------|---------------------------|-------------------------|---|---------------|---|---|--------------|--------------------------------------|--|
| | | | FROM PREVIOUS APPLICATION (D + E) | THIS PERIOD | | | | | |
| | LIFE SAFETY | | | | | | | | |
| 1.1 | General Requirements | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | | \$0.00 | \$0.00 |
| 1.2 | Overhead and Profit | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | | \$0.00 | \$0.00 |
| 10.2 | Fire Extinguishers | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | | \$0.00 | \$0.00 |
| 15.3 | Fire Protection Piping | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | | \$0.00 | \$0.00 |
| 16.2 | Fire Alarm System | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | | \$0.00 | \$0.00 |
| | Change Order # ? | \$0.00 | | | | \$0.00 | | \$0.00 | \$0.00 |
| | Change Order # ? | \$0.00 | | | | \$0.00 | | \$0.00 | \$0.00 |
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| | Change Order # ? | \$0.00 | | | | \$0.00 | | \$0.00 | \$0.00 |
| | Change Order # ? | \$0.00 | | | | \$0.00 | | \$0.00 | \$0.00 |
| | Change Order # ? | \$0.00 | | | | \$0.00 | | \$0.00 | \$0.00 |
| | LIFE SAFETY TOTALS | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | 0.00% | \$0.00 | \$0.00 |

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