

# Northwest Endo Center, LLC

March 31, 2017

**RECEIVED**

**APR 04 2017**

**HEALTH FACILITIES &  
SERVICES REVIEW BOARD**

Via Federal Express

Ms. Kathryn Olson, Board Chair  
Illinois Health Facilities and Services Review Board  
525 West Jefferson Street  
Springfield, IL 62761

Re: Project #16-003 NORTHWEST ENDO CENTER, LLC

Dear Ms. Olson,

Please accept this letter as our **Final Realized Costs Report** for the above referenced project in accordance with requirements of the 77 Ill. Adm. Code 1130-770. The project was granted a Certificate of Need by the Illinois Health Facilities Planning Board on March 29, 2016.

The project is a single-specialty (gastroenterology/endoscopy) ASTC with two procedure rooms in 3,600 square foot of new construction and renovated space located at 1415 S. Arlington Heights Road in Arlington Heights, IL. All work has been completed on the modernization, new construction and equipping and the new Ambulatory Surgery Treatment Center began operations on March 6, 2017.

The permit was approved with a total project costs of \$2,829,568.00. The attached table of Project Costs and Sources of Funds shows the final total capital costs of the project.

I hereby certify that the final realized costs, as itemized, are the total project costs of the project and that there are no additional or associated costs or capital expenditures related to the project.

If you have any questions regarding this report, please feel free to contact me at any time at (847) 660-7555.

Sincerely,



Dorene K. Savage  
Chief Administrative Officer  
Northwest Endo Center, LLC

Notarized by: *John Haukland* 04/03/17



**JOHN HAUKLAND**  
Official Seal  
Notary Public - State of Illinois  
My Commission Expires Mar 22, 2021

cc:

Allen C. Jensen, Executive Director, Facilities Management Department, Northwest Community Healthcare  
Brad Buxton, Vice President, Strategy and Business Development, Northwest Community Healthcare  
Ralph Weber, CON Consultant  
Mitchell Bernsen, M.D., Medical Director

1415 S. Arlington Heights Road Arlington Heights, IL 60005  
(847) 660-7755 Phone  
(847) 357-1689 Fax

Project 16-003 Establishment of Ambulatory Surgical treatment Center

**Project Costs and Sources of Funds**

<b>Use of Funds</b>	<b>Permit Amount</b>	<b>Final Project Costs</b>
Preplanning Costs	\$ 31,000.00	\$ 28,696.00
Site Survey and Soil Investigation	\$ 17,000.00	\$ 14,890.00
Site Preparation	\$ 298,204.00	\$ 365,314.00
Off Site Work	\$ 74,350.00	\$ -
New Construction Contracts	\$ 625,022.00	\$ 630,000.00
Modernization Contracts	\$ 510,264.00	\$ 520,264.00
Contingencies	\$ 113,528.00	\$ 164,100.00
Architectural/Engineering Fees	\$ 150,000.00	\$ 140,900.00
Consulting and Other Fees	\$ 75,000.00	\$ 67,355.01
Moveable or Other Equipment (not in construction contracts)	\$ 790,000.00	\$ 723,315.43
Bond Issuance Expense (project related)		
Net Interest Expense During Construction (project related)		
Fair Market Value of Leased Space or Equipment	\$ 70,200.00	\$ 70,200.00
Other Costs to be Capitalized	\$ 75,000.00	\$ 36,589.10
Acquisition of Building or Other Property (excluding land)		
<b>Total Uses of Funds</b>	<b>\$ 2,829,568.00</b>	<b>\$ 2,761,623.54</b>
<b>Sources of Funds</b>	<b>Permit Amount</b>	<b>Final Spending</b>
Cash and Securities	\$ 2,029,568.00	\$ 1,961,623.54
Pledges		
Gifts and Bequests		
Bond Issues (project related)		
Mortgages		
Leases (fair market value)		
Government Appropriations		
Grants		
Other Funds and Sources/ line of credit	\$ 800,000.00	\$ 800,000.00
<b>Total Sources of Funds</b>	<b>\$ 2,829,568.00</b>	<b>\$ 2,761,623.54</b>

# Northwest Endo Center, LLC

March 31, 2017

Via Federal Express

Ms. Kathryn Olson, Board Chair  
Illinois Health Facilities and Services Review Board  
525 West Jefferson Street  
Springfield, IL 62761

Re: Project #16-003 NORTHWEST ENDO CENTER, LLC

Dear Ms. Olson,

Please accept this letter as our **2016 Annual Progress Report** for the above referenced project in accordance with requirements of the 77 Ill. Adm. Code 1130-760. The project was granted a Certificate of Need by the Illinois Health Facilities Planning Board on March 29, 2016.

The project is a single-specialty (gastroenterology/endoscopy) ASTC with two procedure rooms in 3,600 square foot of new construction and renovated space located at 1415 S. Arlington Heights Road in Arlington Heights, IL.

The permit was approved with a total project costs of \$2,829,568.00.

The current status of the project is as follows:

- Percentage of completion: 100%

We received our IDPH license (#HF112791), effective February 7, 2017 (copy attached) and began patient services on March 6, 2017.

If you have any questions regarding this report, please feel free to contact me at any time at (847) 660-7555.

Sincerely,



Dorene K. Savage  
Chief Administrative Officer  
Northwest Endo Center, LLC

cc:

Allen C. Jensen, Executive Director, Facilities Management Department, Northwest Community Healthcare  
Brad Buxton, Vice President, Strategy and Business Development, Northwest Community Healthcare  
Ralph Weber, CON Consultant  
Mitchell Bernsen, M.D., Medical Director

1415 S. Arlington Heights Road Arlington Heights, IL 60005  
(847) 660-7755 Phone  
(847) 357-1689 Fax



**Illinois Department of  
PUBLIC HEALTH**

**HF 112791**

**LICENSE, PERMIT, CERTIFICATION, REGISTRATION**

The person, firm or corporation whose name appears on this certificate has complied with the provisions of the Illinois statutes and/or rules and regulations and is hereby authorized to engage in the activity as indicated below.

**Nirav D. Shah, M.D., J.D.**

**Director**

Issued under the authority of  
the Illinois Department of  
Public Health

EXPIRATION DATE	CATEGORY	ID NUMBER
02/06/2018		7003210
<b>Effective: 02/07/2017</b>		

**Northwest Endo Center LLC  
1415 S. Arlington Heights Road  
Arlington Heights, IL 60005**

The face of this license has a colored background. Printed by Authority of the State of Illinois • P.O. #48240 5AM 5/16

→ **DISPLAY THIS PART IN A  
CONSPICUOUS PLACE**

**Exp. Date 02/06/2018**

**Lic Number 7003210**

**Date Printed 02/24/2017**

**Northwest Endo Center LLC**

**FEE RECEIPT NO.**