FEDERAL EXPRESS

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

Re: Permit Renewal Request – Hickory Creek Dialysis (Proj. No. 17-063)

Dear Ms. Avery:

I am writing on behalf of DaVita Inc., DuPage Medical Group, Ltd. and Joliet Dialysis, LLC (collectively, the "Permit Holders") to request an 18 month extension of the completion date for Project No. 17-063 (Hickory Creek Dialysis). On April 17, 2018, the Illinois Health Facilities and Services Review Board ("HFSRB") approved the Permit Holders' certificate of need application for the establishment of a 12 station dialysis clinic to be located at 214 Collins Street, Joliet, Illinois 60432 (the "Project"). The Project has been obligated, and the Permit Holders expect construction will be completed by the third quarter of 2020. Based upon recent experience, first treatment should occur several weeks after completion of construction. The Permit Holders anticipate Medicare certification may take an additional six months after first treatment. Accordingly, the Permit Holders respectfully request an eighteen month renewal of the Project permit and a new project completion date of May 31, 2021.

1. Requested Project Completion Date

The Permit Holders request the HFSRB grant an eighteen month renewal of the Project permit and establish May 31, 2021 as the new project completion date.

2. Status of the Project

The project was obligated through the execution of the lease for the facility. DaVita accepted the shell and site from the developer on June 17, 2019. Underground plumbing and the concrete floor are complete. The Permit Holders anticipate the core and shell will be complete and winterized during the fourth quarter of 2019, which will allow the Permit Holders to build out of the tenant improvements during the winter months. Construction is anticipated to be complete during the third quarter of 2020. Based upon recent experience, first treatment will

occur several weeks after completion of construction. The Permit Holders anticipate Medicare certification may take an additional six months after first treatment. Therefore, to allow sufficient time to complete the Project, the Permit Holders request an 18 month renewal of the Project permit.

To date, the Permit Holders have expended $336,816 on the Project.

3. Statement Regarding Completion of the Project

The developer delivered the shell and site to the Permit Holders. The Permit Holders anticipate the core and shell will be complete and winterized during the fourth quarter of 2019. Construction is anticipated to be complete during the third quarter of 2020. Based upon recent experience, first treatment will occur several weeks after completion of construction. The Permit Holders anticipate Medicare certification may take an additional six months after first treatment. Therefore, to allow sufficient time to complete the Project, the Permit Holders request an eighteen month renewal of the Project permit.

4. Confirmatory Evidence of Project Compliance

I hereby certify, pursuant to 77 Ill. Admin. Code §1130.740, Permit Holders' compliance with the scope and costs of the project approved by the HFSRB pursuant to Project Permit #17-063.

Based on the above information, which is provided to the HFSRB in compliance with Section 1130.740 of the Illinois Administrative Code, the Permit Holders formally request an 18 month renewal of their permit for Project #17-063 and a new project completion date of May 31, 2021.

If you need any additional information or have any questions regarding the status of the project, please feel free to contact me.

Sincerely,

Axel Lapica
Group Vice President
DaVita Inc.

Subscribed and sworn to me
This 15th day of October, 2019

Notary Public

DIANE E. LUCIA
Official Seal
Notary Public-State of Illinois
My Commission Expires April 1, 2021

DaVita. DATE: 05-Sep-19 VENDOR NAME: ILLINOIS DEPARTMENT OF NO. 9216938

INVOICE NUMBER	INVOICE DATE	DESCRIPTION	FACILITY	DISCOUNT AMOUNT	NET AMOUNT
4301-500.00	08/16/2019	DAVITA 4301	04301	$0.00	$500.00
				$0.00	$500.00

PLEASE DETACH AND RETAIN THIS STATEMENT AS YOUR RECORD OF PAYMENT

▼ DETACH CHECK ALONG PERFORATION ▼ ▼ DETACH CHECK ALONG PERFORATION ▼

DaVita.

P.O. Box 2037
Tacoma, WA 98401-2037

WELLS FARGO BANK NA 56-382 412

9216938

CHECK DATE	CHECK NUMBER	PAY THIS AMOUNT
05-Sep-19	9216938	$500.00

PAY Five Hundred Dollars And Zero Cents*****

TO THE ORDER OF
ILLINOIS DEPARTMENT OF PUBLIC HEALTH
525 W JEFFERSON STREET
SPRINGFIELD, IL 62761

DOCUMENT CONTAINS MULTI-COLORED PANTOGRAPH & MICROPRINTING. BACK HAS THERMOCHROMIC INK & A WATERMARK. HOLD AT AN ANGLE TO VIEW. VOID IF NOT PRESENT.

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