



STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

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

MEMORANDUM

TO: Mike Constantino, Chief - Program Review Section
Division of Health Systems Development

FROM: Debra Savage, Chairwoman
Illinois Health Facilities and Services Review Board

RE: Permit Relinquishment #18-045 Fresenius Medical Care West Belmont,
Chicago

This is to advise you that I have reviewed the above-captioned Relinquishment request within the requirements in 77 IAC 1130.775 and have determined the following:

The request is in compliance with the requirements in 77 IAC 1130.775 and the Relinquishment is approved.

This request is to be reviewed by the Health Facilities Planning Board.

This request is DENIED effective _____ because it does **NOT** comply with the requirements specified in 77 IAC 1130.500.

Other actions as follows:

Debra Savage

Debra Savage, Chairwoman
Illinois Health Facilities and
Services Review Board

12/10/19

Date