



STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

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

ELECTRONICALLY TRANSFERRED

June 1, 2020

Susan Prizant, Senior Paralegal
Gutnicki
4711 Golf Road
Skokie, Illinois 60076

Re: Incomplete - Application for Permit #20-022
Hope Creek Nursing and Rehab Center

Dear Ms. Prizant

This letter is to notify you that #20-022 Application for Permit Hope Creek Nursing and Rehab Center has been deemed incomplete. On May 27, 2020 we notified you by email of the additional information that was needed. At that time, you stated that the application was on hold. You have 45 days from **June 1, 2020** (the date of this letter) to provide the additional information or the application will need to be withdrawn. Also, should you submit the additional material a check in the amount of \$10,700 will be due ($\$6,000,000 \times .22 = \$13,200 - \$2,500 = \$10,700$).

*77 ILAC 1130.620 c) 6) "states if the application is incomplete, the applicant shall be **allowed 45 days** after notification to provide all necessary information to complete the application. Upon receiving all requested information, HFSRB staff shall again review the application for completeness and shall notify the applicant of its decision. If HFSRB staff find that the application remains incomplete at the end of the allotted response period, the application shall be declared null and void, and all fees paid forfeited."*

If you should have questions please contact Mike Constantino or George Roate at 217.782.3516 or mike.constantino@illinois.gov or george.roate@illinois.gov

Sincerely,

A handwritten signature in cursive script that reads "Mike Constantino".

Mike Constantino, Project Reviewer
Illinois Health Facilities and Services Review Board