



FRESENIUS KIDNEY CARE

Fresenius Kidney Care

3500 Lacey Road, Downers Grove, IL 60515
T 630-960-6807 F 630-960-6812
Email: lori.wright@fmc-na.com

November 2, 2016

RECEIVED

NOV 04 2016

HEALTH FACILITIES &
SERVICES REVIEW BOARD

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

Re: Request For Permit Renewal Section 1130.750
Project #14-065, Fresenius Medical Care Plainfield North
Permit Holder: Dialysis Centers of America – Illinois, Inc., and Fresenius Medical Care Holdings, Inc.

Dear Ms. Avery:

Dialysis Centers of America – Illinois, Inc. is seeking a permit renewal for Fresenius Medical Care Plainfield North. Enclosed is a \$500.00 permit renewal fee. There has been no change to the size and scope of this project. This report summarizes the current status of the project.

Sincerely,

Lori Wright
Fresenius Medical Care
Senior CON Specialist

cc: Clare Ranalli



October 11, 2016

Request For Permit Renewal Section 1130.750

Request For Permit Renewal Section 1130.750

Project #14-065, Fresenius Medical Care Plainfield North

Permit Holder: Dialysis Centers of America – Illinois, Inc., and Fresenius Medical Care Holdings, Inc.

1. **The requested completion date:** *The requested completion date is September 30, 2017.*
2. **a status report on the project detailing what percent has been completed and a summary of project components yet to be finished and the amount of funds expended on the project date**

This project is for the relocation of the 10-station Fresenius (RCG) Morris ESRD facility from 1401 Lakewood Drive, Morris to 24024 Riverwalk Court, Plainfield and a name change to Fresenius Medical Care Plainfield North. The facility relocated and began treating patients on September 19, 2016. It is now waiting on Medicare certification and receipt of the certification letter.

Also, on October 11, 2016 a certificate of exemption application was submitted to the Board to change ownership of the facility from Dialysis Centers of America – Illinois, Inc. to Fresenius Medical Care Plainfield North, LLC.

The project is approximately 99% complete and is expected to be complete prior to September 30, 2017.

3. **a statement as to the reasons why the project has not been completed**

This project has not specifically experienced any significant delays. There were minor delays during the space planning period and some minor weather delays. The project is essentially complete, however must wait for Medicare survey and certification to be fully complete per Board rules.



4. evidence of financial commitment to fund the project

Sources and Uses of Funds

All Project financing to date has been funded from available cash and its equivalents as reported on the company's financial statements. The right to occupy the premises has been secured through a leasing arrangement. This leasing arrangement was utilized to obligate the project. None of the project costs have exceeded the approved permit amounts.

Total committed for Project

PROJECT COST AND SOURCES OF FUNDS		
	Committed	Spent
Preplanning Costs	N/A	N/A
Site Survey and Soil Investigation	N/A	N/A
Site Preparation	N/A	N/A
Off Site Work	N/A	N/A
New Construction Contracts	N/A	N/A
Modernization Contracts	1,046,500	910,954
Contingencies	104,000	0
Architectural/Engineering Fees	112,000	83,978
Consulting and Other Fees	N/A	N/A
Movable or Other Equipment (not in construction contracts)	362,000	274,312
Bond Issuance Expense (project related)	N/A	N/A
Net Interest Expense During Construction (project related)	N/A	N/A
Fair Market Value of Leased Space or Equipment	2,020,150	2,020,150
Other Costs To Be Capitalized	N/A	N/A
Acquisition of Building or Other Property (excluding land)	N/A	N/A
Total Committed For Project		\$3,644,650
Spent		\$3,289,394

- 5. Anticipated final cost of the project:** *Final cost will be within the permit amount of \$3,644,650.*



FRESENIUS KIDNEY CARE

Dialysis Centers of America – Illinois, Inc.

In accordance with Section 1130.740 part c, of the Illinois Health Facilities & Services Review Board rules for renewal of a permit;

I do hereby certify that the project was initiated on 08/19/2015 with the lease execution and; that the financial resources to fund the project are available or otherwise committed; and that the project's cost, scope, design, square footage, number of stations are in compliance with that which the State Board has approved.

By: _____

Bryan Mello
Assistant Treasurer

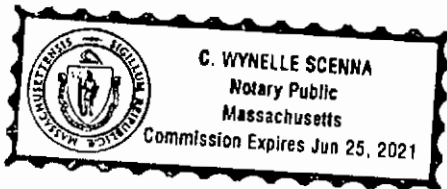
ITS: _____

Notarization: *C Wynelle Scenna*

Subscribed and sworn to before me

This 14 day of Oct, 2016

Seal



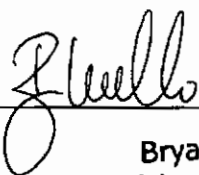


FRESENIUS KIDNEY CARE

Fresenius Medical Care Holdings, Inc.

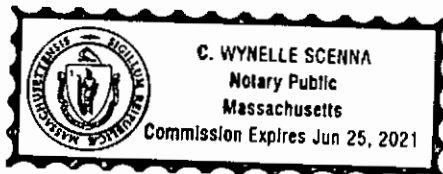
In accordance with Section 1130.740 part c, of the Illinois Health Facilities & Services Review Board rules for renewal of a permit;

I do hereby certify that the project was initiated on 08/19/2015 with the lease execution and; that the financial resources to fund the project are available or otherwise committed; and that the project's cost, scope, design, square footage, number of stations are in compliance with that which the State Board has approved.

By: 
ITS: Bryan Mello
Assistant Treasurer

Notarization: C Wynelle Scenna
Subscribed and sworn to before me
This 14 day of Oct, 2016

Seal



APPLICATION AND CERTIFICATE FOR PAYMENT

To Owner:
 Dialysis Centers of American-Illinois Inc.
 c/o Fresenius Medical Care NA
 1909 Tyler St., 8th fl
 Hollywood, FL 33020

Project:
 Grant #4323-RL-W-GU-15
 24040 Riverwalk Court
 Plainfield, IL 60544

From Contractor:
 Northern Builders, Inc.
 5060 River Road
 Schiller Park, Illinois 60176

VIA Architect:
 Christopher Kidd & Associates LLC
 N48W16550 Lisbon Rd
 Menomonee Falls, WI 53051

CONTRACTOR'S APPLICATION FOR PAYMENT

Application is made for Payment, as shown below, in connection with the Contract.
 Continuation Sheet, AIA Document G703, is attached

1. ORIGINAL CONTRACT SUM.....	\$ 841,871.00
2. Net change by Change Orders.....	\$ -
3. CONTRACT SUM TO DATE (Line 1+2).....	\$ 841,871.00
4. TOTAL COMPLETED & STORED TO DATE.....	\$827,871.73

Column G on G703

5. RETAINAGE:

a. 10% of Completed Work (Column D+E on G703)	\$ 82,787.17
b. % of Stored Material (Column F on G703)	\$ -
Total Retainage (Line 5a+5b or Total in Column I of G703)	\$ 82,787.17

6. TOTAL EARNED LESS RETAINAGE..... (Line 4 less line 5 Total)

7. LESS PREVIOUS CERTIFICATES FOR PAYMENTS (Line 6 from prior Certificate).....

8. CURRENT PAYMENT DUE.....

9. BALANCE TO FINISH, PLUS RETAINAGE (Line 3 less Line 6)

CHANGE ORDERS SUMMARY	ADDITIONS	DEDUCTIONS
Total changes approved in previous months by Owner	\$0.00	\$0.00
Total approved this Month	\$0.00	\$0.00
TOTALS	\$0.00	\$0.00
NET CHANGES by Change Order	\$0.00	

Application No: 2REV Distribution to:

Period to: August 15, 2016

Contract for: General Construction

Project No: 16-009

M. MERCIK
FMS PM

Contract Date: April 12, 2016

SEP 1 9 16

RECS - North
RECEIVED

Owner:	
Architect:	
Contractor:	
Field:	

The undersigned Contractor certifies that to the best of his 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.

BY:

Debra H Wagner

Director of Accounting

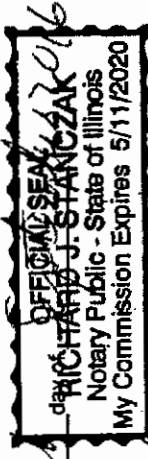
Subscribed and sworn to me before me this

State of

County of

Notary Public:

My commission expires:



ARCHITECT'S CERTIFICATE FOR PAYMENT

In accordance with the Contract Documents, based on on-site observation and the data above comprising the above application, the Architect certifies to the Owner that to the best of Architect's knowledge, information and belief the Work has progressed as indicated, 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..... \$ 448,075.81

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

ARCHITECT:

By:

Date:

This Certificate is not 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.

APPLICATION AND CERTIFICATE FOR PAYMENT

TO (OWNER): Fresenius Medical Center
 FROM (CONTR.): Cohen Architectural Woodworking
 CONTRACT FOR: Millwork & Installation

PROJECT: Grant #4323
 Plainfield, IL

AIA DOCUMENT G702

APPLICATION NO: 3
 PERIOD TO: 8/19/2016
 CONTRACTOR'S: M. MERCER
 PROJECT NO: FMS PM
 CONTRACT DATE: AUG 25 16

Page 1 of

Distribution to:
 OWNER: ARCHITECT
 CONTRACTOR

CONTRACTOR'S APPLICATION FOR PAYMENT

CHANGE ORDER SUMMARY		ADDITIONS		DEDUCTIONS	
Change Orders approved in previous months by Owner		TOTAL			
Approved this month					
Number	Date Approved				
TOTALS					
Net change by Change Orders					

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

CONTRACTOR:

By:

Date: 8/23/16
A M GILLENWATER
 Notary Public - Notary Seal
 STATE OF MISSOURI
 Crawford County
 Commission Number 13494055
 My commission expires June 17, 2017

ARCHITECT'S CERTIFICATE FOR PAYMENT

In accordance with the contract Documents, based on on-site observations and the data comprising the above application, the Architect certifies to the Owner that to the best of the Architect's knowledge, information and belief the Work has progressed as indicated the quality of the Work is in accordance with the Contract Documents, and the Contractor is entitled to payment of the AMOUNT CERTIFIED.

NOTICE: PROPERTY OWNERS IMPORTANT INFORMATION
 CONCERNING MECHANICS LIENS ON REVERSE SIDE.

Application is made for Payment, as shown below, in connection with the Contract.
 Continuation Sheet, AIA Document G703, is attached. RECEIVED

1. ORIGINAL CONTRACT SUM \$ 69,083.00
2. Net change by Change Orders \$ -
3. CONTRACT SUM TO DATE (Line 1 + 2) \$ 69,083.00
4. TOTAL COMPLETED & STORED TO DATE (Column G on G703) \$ 69,083.00
5. RETAINAGE:
 - a. % of Completed Work (Columns D + E on G703)
 - b. 100 % of Stored Material (Column F on G703)
6. TOTAL EARNED LESS RETAINAGE \$ -
7. LESS PREVIOUS CERTIFICATES FOR PAYMENT (Line 4 less Line 5 Total) \$ 62,174.70
8. CURRENT PAYMENT DUE \$ 6,908.30
9. BALANCE TO FINISH, INCLUDING RETAINAGE (Line 3 less Line 6) \$ -

State of: Missouri County of: Crawford
 Subscribed and sworn to before me this 23 day of Aug 2016
 Notary Public: A M Gillenwater
 My Commission expires June 17, 2017

AMOUNT CERTIFIED

(Attach explanation if amount certified differs from the amount applied for.)
 ARCHITECT:

By: Date:

This Certificate is not 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.