

STATE OF ILLINOIS HEALTH FACILITIES AND SERVICES REVIEW BOARD

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

June 9, 2016

EMAIL CERTIFIED LETTER RETURN RECEIPT REQUESTED

Asim Shazzad, Administrator Dialysis Care Center 15786 S Bell Rd Homer Glen, IL, 60491

Re:

Additional Information Project #16-020

Additional Information Project #16-022

Mr. Shazzad:

This letter is in response to correspondence we received on June 7, 2016 raising concerns with your applications for permit #16-020 and #16-022 [correspondence is enclosed]. As staff we are responsible to follow up on concerns we feel are relevant to the application for permit.

- 1. Please provide a list of zip codes within thirty (30) minutes of the proposed site 9115 S Cicero Ave, STE 300, Oak Lawn, Illinois, Application for Permit #16-020.
- 2. Please provide a list of zip codes within thirty (30) minutes of the proposed site 3322 Vollmer Rd; Suite 3; Olympia Fields, Illinois, Application for Permit #16-022.
- 3. Please provide a list of <u>all</u> outpatient dialysis facilities within thirty (30) minutes of the proposed site-9115 S Cicero Ave, STE 300, Oak Lawn, Illinois, Application for Permit #16-020 and the Map Quest Print Outs that utilizes MapQuest Classic Maps.
- 4. Please provide a list of <u>all</u> outpatient dialysis facilities within thirty (30) minutes of the proposed site 3322 Vollmer Rd; Suite 3; Olympia Fields, Illinois, Application for Permit #16-022 and the Map Quest Print Outs that utilizes MapQuest Classic Maps.

Please provide the requested information within 30 days from receipt of this letter.

Should you have any questions or concerns please contact Mike Constantino or George Roate at Mike.Constantino@illinois.gov or George.Roate@illinois.gov or 217.782.3516.

Sincerely,

Mike Constantino Project Reviewer

cc: Enclosure