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

RECEIVED
OCT 17 2019
HEALTH FACILITIES & SERVICES REVIEW BOARD

October 15, 2019

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

Re: **Annual Progress Report. Section 1130.760**
Project #16-029, Fresenius Medical Care Ross Dialysis - Englewood
Permit Holder: Ross Dialysis-Englewood, LLC, and Fresenius Medical Care Holdings, Inc.
Permit Amount: $7,949,665

Dear Ms. Avery:

Enclosed please find the final realized cost report submission for the relocation of the 16-station Fresenius Medical Care Ross Dialysis-Englewood facility from 6333 S. Green Street, Chicago to 946 W. 63rd Street, Chicago and the addition of 8 stations along with a signed notarized cost report certification for the project as required pursuant to 7Il. Adm. 1130.770.

If you have any questions, please contact me at 630-960-6807.

Sincerely,

Lori Wright

Lori Wright
Senior CON Specialist

FRESENIUS
KIDNEY CARE

October 15, 2019

Final Cost Report, Section 1130.770

Project #16-029, Fresenius Medical Care Ross Dialysis - Englewood
Permit Holder: Ross Dialysis-Englewood, LLC, and Fresenius Medical Care Holdings, Inc.
Permit Amount: $7,949,665

Status of the Project

This project is for the relocation of the 16-station Ross Dialysis Englewood facility from 6333 S. Green Street, Chicago to 946 W. 63rd Street, Chicago and the addition of 8 stations in 10,991 GSF with amount of $7,949,665. This address is a change from the address reported in the CON application, but is an address change only and not a site change. The facility is located on a corner and the city gave the facility an address on the main road.

The project was obligated on November 14, 2017 with the execution of the lease. The permit renewal was granted on October 30, 2018 with a new completion date of March 31, 2020. The facility began operations on September 9, 2019 and was complete upon receipt of the Medicare certification letter on October 14, 2019 with an effective date of August 27, 2019.

Application and Certificate for Payment (AIA G702)

G-702s attached.

Project Costs and Sources of Funds

Line Item	Allowance /CON	Realized Costs
Modernization	1,664,783	1,128,131
Contingencies	160,018	0
Architectural/Engineering	180,400	100,008
Movable & Other Equipment	620,000	445,083
FMV of Leased Space & Equipment	5,324,464	5,324,464
Total Project Costs Allowed	**$7,949,665**	
Realized Total Project Costs	**TOTAL**	**$6,997,686**

There are no costs that have been or will be submitted for reimbursement under Titles XVIII and XIX of the Social Security Act.

FRESENIUS KIDNEY CARE

Certification Of Cost Report
Ross Dialysis-Englewood, LLC
Project #16-029

Ross Dialysis Englewood, LLC certifies that pursuant to 7711. Adm. 1130.770, that the final realized costs of Fresenius Medical Care Ross Dialysis-Englewood, Project #16-029, are the total costs required to complete the project, and that there are no additional or associated costs or capital expenditures related to the project which will be submitted for reimbursement under Title XVIII or XIX.

BY: ____________________

ITS: Assistant Secretary

BY: ____________________
Dorothy Rizzo
Assistant Treasurer

ITS: ____________________

Subscribed and Sworn to before me
this 28th day of August, 2019

Subscribed and Sworn to before me
this ____ day of __________, 2019

Elizabeth D. Scully
Notary Public

My commission expires: 10/14/22

Seal

ELIZABETH D. SCULLY
Notary Public
COMMONWEALTH OF MASSACHUSETTS
My Commission Expires
October 14, 2022

FRESENIUS
KIDNEY CARE

Certification Of Cost Report
Fresenius Medical Care Holdings, Inc.
Project #16-029

Fresenius Medical Care Holdings, Inc. certifies that pursuant to 7711. Adm. 1130.770, that the final realized costs of Fresenius Medical Care Ross Dialysis-Englewood, Project #16-029, are the total costs required to complete the project, and that there are no additional or associated costs or capital expenditures related to the project which will be submitted for reimbursement under Title XVIII or XIX.

BY: [signature]
ITS: Assistant Secretary

BY: Dorothy Rizzo
ITS: Dorothy Rizzo
Assistant Treasurer

Subscribed and Sworn to before me
this_____day of__________, 2019

Elizabeth D. Scully.
Notary Public

My commission expires: 10/14/22

Subscribed and Sworn to before me
this_____day of__________, 2019

Notary Public

My commission expires:__________

APPLICATION AND CERTIFICATION FOR PAYMENT
AIA DOCUMENT G702/CMa

CONSTRUCTION MANAGER-ADVISER EDITION

TO CONTRACTOR:
DiNaso & Sons Construction Co., Inc.
9910 W. 191st St., Suite A
Mokena, IL 60448

PROJECT:
Ross Dialysis - Englewood JV
946 West 63rd Street
Chicago, IL 60621

APPLICATION NO: 4 FINAL

PERIOD TO: 06/21/19

Distribution to:
[X] OWNER
[ ] ARCHITECT
[X] CONTRACTOR

FROM SUBCONTRACTOR:
DiNaso & Sons Construction Co., Inc.
9910 W. 191st St., Suite A
Mokena, IL 60448

OWNER:
Ross Dialysis - Englewood, LLC
c/o Fresenius Medical Care NA
1909 Tyler Street, 8th Floor
Hollywood, FL 33020

PROJECT NOS: 9042-2-RL-W-GU-17

CONTRACT DATE: March 18, 2019

CONTRACT FOR:
General Construction

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 $ 1,017,600.00
2. Net change by Change Orders $ 11,809.53
3. CONTRACT SUM TO DATE (Line 1 ± 2) $ 1,029,409.53
4. TOTAL COMPLETED & STORED TO DATE (Column G on G703) $ 1,029,409.53
5. RETAINAGE:
   a. 0 % of Completed Work (Column D + E on G703) $ 0.00
   b. 0 % of Stored Material (Column F on G703) 0.00

   Total Retainage (Lines 5a + 5b or Total in Column I of G703) $ 0.00
6. TOTAL EARNED LESS RETAINAGE (Line 4 Less Line 5 Total) $ 1,029,409.53
7. LESS PREVIOUS CERTIFICATES FOR PAYMENT (Line 6 from prior Certificate) $ 915,840.00
8. CURRENT PAYMENT DUE $ 113,569.53
9. BALANCE TO FINISH, INCLUDING RETAINAGE (Line 3 less Line 6) $ 0.00

CHANGE ORDER SUMMARY	ADDITIONS	DEDUCTIONS
Total changes approved in previous months by Owner	$0.00	$0.00
Total approved this Month	$11,809.53	$0.00
TOTALS	$11,809.53	$0.00
NET CHANGES by Change Order	$11,809.53	

The undersigned Contractor certifies that to the best of the Contractor'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: DiNaso & Sons Construction Co., Inc.

By: Chad R [signature] Date: August 30, 2019

State of: Illinois County of: Will
Subscribed and sworn to before me this 30th day of August 2019
Notary Public: Christine A. Hassel
My Commission expires: 7-5-2023

OFFICIAL SEAL
CHRISTINE A HASSEL
NOTARY PUBLIC - STATE OF ILLINOIS
MY COMMISSION EXPIRES:07/05/23

CERTIFICATE FOR PAYMENT

In accordance with the Contract Documents, based on on-site observations and the data comprising the 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.

AMOUNT CERTIFIED .... $ 113,569.53

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

CONSTRUCTION MANAGER:

By: Date:

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.

FONDA PRINCE
DIV ADMIN
SEP 16 19
RECS-North Central
RECEIVED

APPLICATION AND CERTIFICATE FOR PAYMENT

AIA DOCUMENT G702

TO (OWNER): Fresenius Medical Care
PROJECT: Ross Dialysis - Englewood - JV
FROM (CONTR.) Cohen Architectural Woodworking
VIA (ARCHITECT):
CONTRACT FOR: Millwork & Installation

APPLICATION NO: 18036.4
PERIOD TO: September 2019
CONTRACTOR'S PROJECT NO: 9042-2-RL-W-GU-17
CONTRACT DATE:

Distribution to:
OWNER: ☐
ARCHITECT ☐
CONTRACTOR ☐
☐

CONTRACTOR'S APPLICATION FOR PAYMENT

CHANGE ORDER SUMMARY		ADDITIONS	DEDUCTIONS
Change Orders approved in previous months by Owner	TOTAL	1,253.50	
Approved this month			
Number	Date Approved		
TOTALS		-	-
Net change by Change Orders		1,253.50	

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: 9/19/19

A M GILLENWATER
Notary Public, Notary Seal
State of Missouri
Crawford County
Commission # 13494056
My Commission Expires 06-20-2021

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

1. ORIGINAL CONTRACT SUM — $ 97,468.00
2. Net change by Change Orders — $ 1,253.50
3. CONTRACT SUM TO DATE (Line 1 + 2) — $ 98,721.50
4. TOTAL COMPLETED & STORED TO DATE (Column G on G703) — $ 98,721.50
5. RETAINAGE:
   a. 0 % of Completed Work (Columns D + E on G703) — $ -
   b. 100 % of Stored Material (Column F on G703)

   Total Retainage (Line 5a + 5b or Total in Column I of G703) — $ -
6. TOTAL EARNED LESS RETAINAGE (Line 4 less Line 5 Total) — $ 98,721.50
7. LESS PREVIOUS CERTIFICATES FOR PAYMENT (Line 6 from prior Certificate) — $ 88,849.35
8. CURRENT PAYMENT DUE — $ 9,872.15
9. BALANCE TO FINISH, INCLUDING RETAINAGE (Line 3 less Line 6) — $ -

State of: Missouri County of: Crawford
Subscribed and sworn to before me this 19 day of Sept 2019
Notary Public: AM Gillenwater
My Commission expires: 6/20/21

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 progresssed 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

(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.

FONDA PRINCE
DIV ADMIN
SEP 25 19
CS North Central
RECEIVED

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