



STATE OF ILLINOIS
HEALTH FACILITIES AND SERVICES REVIEW BOARD

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

VIA EMAIL
USPO

April 18, 2017

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

Re: **Section 1130.650 – Modification of an Application**
 Project #16-058 – Dialysis Care Center McHenry
 Applicants: Dialysis Care Center McHenry, LLC and Dialysis Care
 Center Holdings, LLC

Dear Mr. Shazzad:

We are in receipt of your change in the project costs for the above referenced project received April 14, 2017 by email. This change in the project costs is considered a modification of the application and requires an extension of the review period. The review period is being extended, and the Project #16-058 is scheduled to be heard at the June 2017 State Board Meeting.

The increase in the project costs will result in an **additional fee of \$173. Payment must be made within thirty days of the date of this letter.**

$[\$1,215,000 \times .0022 = \$2,673 - \$2,500 \text{ (original payment)} = \$173.00]$

"If a modification of an application for permit results in an increase in the total estimated project cost, the application processing fee shall be recalculated on the basis of the revised estimated project cost. This Section is applicable with respect to any additional fees required for a modified application."

Should you have any questions or concerns please contact Courtney Avery of my staff at Courtney.Avery@illinois.gov or 312.814.4825.

Sincerely,

A handwritten signature in blue ink that reads "Kathy Olson".

Kathy Olson, Board Chair



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