



**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 7, 2018

RECEIVED

NOV 08 2018

**HEALTH FACILITIES &
SERVICES REVIEW BOARD**

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

Re: Final Cost Report. Section 1130.770
Project #17-005, Chicago Vascular ASC
Permit Holder: Chicago Vascular ASC, LLC
Permit Amount: \$3,794,239

Dear Ms. Avery:

On behalf of Chicago Vascular ASC, LLC, enclosed please find the final realized cost report submission for the establishment of Chicago Vascular, ASC, 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
Senior CON Specialist

cc: Clare Connor

November 7, 2018

Final Cost Report, Section 1130.770

Project #17-005, Chicago Vascular ASC
Permit Holder: Chicago Vascular ASC, LLC
Permit Amount: \$3,794,239

This project is for the establishment of a limited specialty ASTC in 12,017 GSF with a project cost of \$3,794,239. The facility is located at 700 Pasquinelli Drive in Westmont. The project was obligated with the signing of the construction contract on November 11, 2017. The facility is now licensed, effective 07/26/2018 (license #7003219 attached).

Application and Certificate for Payment (AIA G702)

G-702 attached.

Project Costs and Sources of Funds

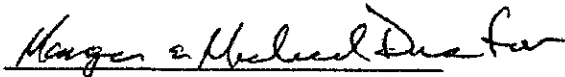
Project Costs	Allowance/CON	Realized
Modernization	321,640	1,158,418
Contingencies	0	0
Architectural/Engineering	30,000	93,625
Consulting and other fees	50,000	29,410
Moveable & Other Equipment	1,076,442	1,076,442
FMV of Leased Space/Equipment	2,316,157	1,100,967
Total Project Costs	\$3,794,239	\$3,458,862
Funding	Allowance/CON	Realized
Cash & Securities	1,478,082	2,357,895
FMV Lease/Equipment	2,316,157	1,100,967
Total funds	\$3,794,239	\$3,458,862

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

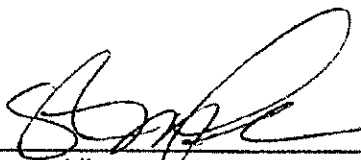
Certification of Cost Report
Chicago Vascular, ASC
Project #17-005

Chicago Vascular ASC, LLC certifies that pursuant to 7711. Adm. 1130.770, that the final realized costs of Chicago Vascular, ASC, Project #17-005, 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: 
Angelo Makris, M.D.

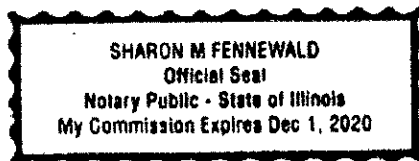
ITS: 

Subscribed and Sworn to before me
this 7th day of November, 2018


Notary Public

My commission expires: 12/01/2020

Seal



APPLICATION AND CERTIFICATE FOR PAYMENT

PAGE 1 OF 1 PAGES

TO (OWNER):

Chicago Vascular ASC, LLC
700 Pasquinelli Drive
Westmont, IL 60559

PROJECT:

American Access Care of Chicago, LLC
CON Project

APPLICATION NO. 4

PERIOD TO: April 30, 2018



FROM (CONTRACTOR):

Shales McNutt LLC
425 Renner Drive
Elgin, IL 60123

VIA (Architect):

Anderson Mikos Architects, Ltd.
17W110 22nd Street, Suite 220
Oakbrook Terrace, IL 60181

ARCHITECT'S

PROJECT NO:

CONTRACT FOR:

CONTRACT DATE:

CONTRACTOR'S APPLICATION FOR PAYMENT

Application is made for Payment, as shown below, in connection with the Contract.

CHANGE ORDER SUMMARY			
Change Orders approved in previous months by Owner		ADDITIONS	DEDUCTIONS
TOTAL			
Approved this Month			
Number	Date Approved		
TOTALS		0.00	0.00
		0.00	

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 the current payment shown herein is now due.

CONTRACTOR:

By: M. A. Shales Date: 5/3/18

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.

1. ORIGINAL CONTRACT SUM

\$ 816,771.00

2. Net change by change orders

\$ 0.00

3. CONTRACT SUM TO DATE (Line 1+/- 2)

\$ 816,771.00

4. TOTAL COMPLETED & STORED TO DATE

\$ 816,771.00

(Column G on Continuation Sheet)

5. RETAINAGE:

a. Variable of Completed Work

\$ 0.00

(Column D + E on Continuation Sheet)

b. 10% of Stored Material

(Column F on Continuation Sheet)

\$ 0.00

Total Retainage (Line 5a + 5b)

\$ 0.00

6. TOTAL EARNED LESS RETAINAGE

\$ 816,771.00

(Line 4 less Line 5 Total)

7. LESS PREVIOUS CERTIFICATES FOR

PAYMENT (Line 6 from prior Certificate)

\$ 690,597.35

8. CURRENT PAYMENT DUE

\$ 126,173.65

9. BALANCE TO FINISH, PLUS RETAINAGE

\$ 0.00

(Line 3 less Line 6)

State of:

Subscribed and sworn to before me this 3rd day of May, 2018

County of: Kane

Notary Public

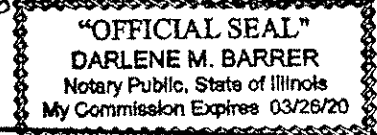
Darlene M. Barrer

My Commission Expires:

3-26-20

AMOUNT CERTIFIED

\$ 126,173.65



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

PAGE 1 OF 1 PAGES

TO (OWNER):

Chicago Vascular ASC, LLC
700 Pasquelli Drive
Westmont, IL 60559

PROJECT:

American Access Care of Chicago, LLC
Non-CON Project

APPLICATION NO. 4

PERIOD TO: April 30, 2018

FROM (CONTRACTOR):

Shales McNutt LLC
425 Renner Drive
Elgin, IL 60123

VIA (Architect):

Anderson Mikos Architects, Ltd.
17W110 22nd Street, Suite 220
Oakbrook Terrace, IL 60181

ARCHITECT'S

PROJECT NO:



CONTRACT FOR:

CONTRACT DATE:

CONTRACTOR'S APPLICATION FOR PAYMENT

Application is made for Payment, as shown below, in connection with the Contract.

CHANGE ORDER SUMMARY			
Change Orders approved in previous months by Owner		ADDITIONS	DEDUCTIONS
TOTAL			
Approved this Month		26,112.95	
Number	Date Approved		
CO 1	Apr-18		
TOTALS		26,112.95	0.00
		26,112.95	

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 the current payment shown herein is now due.

CONTRACTOR:

By: Shales McNutt Date: 5/3/18

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.

1. ORIGINAL CONTRACT SUM

\$ 315,534.00

2. Net change by change orders

\$ 26,112.95

3. CONTRACT SUM TO DATE (Line 1+/- 2)

\$ 341,646.95

4. TOTAL COMPLETED & STORED TO DATE

\$ 341,646.95

(Column G on Continuation Sheet)

5. RETAINAGE:

a. Variable of Completed Work

\$ 0.00

(Column D + E on Continuation Sheet)

b. 10% of Stored Material

(Column F on Continuation Sheet)

\$ 0.00

Total Retainage (Line 5a + 5b)

\$ 0.00

6. TOTAL EARNED LESS RETAINAGE

\$ 341,646.95

(Line 4 less Line 5 Total)

7. LESS PREVIOUS CERTIFICATES FOR

PAYMENT (Line 6 from prior Certificate)

\$ 267,899.42

8. CURRENT PAYMENT DUE

\$ 73,747.53

9. BALANCE TO FINISH, PLUS RETAINAGE

\$ 0.00

(Line 3 less Line 6)

State of:

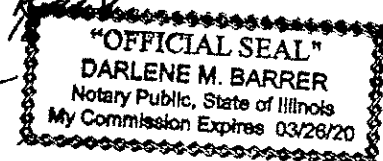
Subscribed and sworn to before me this

County of: Rock
day of May, 20

Notary Public

My Commission Expires:

3-26-20



AMOUNT CERTIFIED

\$ 73,747.53

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.