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\* Associated Firm  
\*\* In cooperation with  
Trench, Rossi e Wetanabe  
Advogados

## PRIVATE AND CONFIDENTIAL

December 22, 2017

Illinois Health Facilities and Services  
Review Board  
525 West Jefferson Street  
2nd Floor  
Springfield, IL 62761

Attention: George Roate

### Illinois Back & Neck Institute LLC - Certificate of Need Application Materials

Dear George,

In follow-up to Amalia Rioja's email correspondence, please find enclosed the updated Certificate of Need application materials for page 7 of your agency's application form. This reflects the revised date of completion of June 2019 for the Illinois Back & Neck Institute LLC's proposed ambulatory surgery treatment center to be located at 360 W. Butterfield Road, Suite 100, Elmhurst, Illinois 60126.

Please let us know if you have any questions or if you need further information. Thank you for your assistance in advance.

Best,



Clarisa Bonilla  
Business Project Manager

+1 312 861 2996  
Clarisa.Bonilla@bakermckenzie.com

# RECEIVED

DEC 26 2017

HEALTH FACILITIES &  
SERVICES REVIEW BOARD

**Related Project Costs**

Provide the following information, as applicable, with respect to any land related to the project that will be or has been acquired during the last two calendar years:

Land acquisition is related to project ☐ Yes ☒ No  
Purchase Price: \$ \_\_\_\_\_  
Fair Market Value: \$ \_\_\_\_\_

The project involves the establishment of a new facility or a new category of service  
☒ Yes ☐ No

If yes, provide the dollar amount of all **non-capitalized** operating start-up costs (including operating deficits) through the first full fiscal year when the project achieves or exceeds the target utilization specified in Part 1100.

Estimated start-up costs and operating deficit cost is \$ 150,000.00

**Project Status and Completion Schedules**

**For facilities in which prior permits have been issued please provide the permit numbers.**

Indicate the stage of the project's architectural drawings:

☐ None or not applicable ☒ Preliminary  
☐ Schematics ☐ Final Working

Anticipated project completion date (refer to Part 1130.140) : June 2019

Indicate the following with respect to project expenditures or to financial commitments (refer to Part 1130.140):

- ☐ Purchase orders, leases or contracts pertaining to the project have been executed.  
☐ Financial commitment is contingent upon permit issuance. Provide a copy of the contingent "certification of financial commitment" document, highlighting any language related to CON Contingencies  
☒ Financial Commitment will occur after permit issuance.

APPEND DOCUMENTATION AS ATTACHMENT 8, IN NUMERIC SEQUENTIAL ORDER AFTER THE LAST PAGE OF THE APPLICATION FORM.

**State Agency Submittals [Section 1130.620©]**

Are the following submittals up to date as applicable:

- ☐ Cancer Registry  
☐ APORS  
☐ All formal document requests such as IDPH Questionnaires and Annual Bed Reports been submitted  
☒ All reports regarding outstanding permits

**Failure to be up to date with these requirements will result in the application for permit being deemed incomplete.**