POLSINELLI

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**BY FEDERAL EXPRESS**

RECEIVED
JUN 05 2020
HEALTH FACILITIES & SERVICES REVIEW BOARD

Ms. Courtney Avery
Illinois Department of Public Health
Health Facilities and Services Review Board
525 West Jefferson Street, 2nd Floor
Springfield, Illinois 62761

**RE: Metroeast Endoscopic Surgery Center (MESC), Project # 19-010 Final Report**

Dear Ms. Avery:

This letter constitutes the final report for MESC's CON permit for project 19-010, which was approved on June 4, 2019.

**Project Completion**

MESC has completed the project based on the approvals received from IDPH. The project completion date of record is June 1, 2020.

**Cost Report and Supporting Documentation**

In compliance with Section 1130.770 of the Board rules, this letter and its enclosures contain the supporting documentation relating to project completion and the related costs and sources of funds.

**Itemization of Project Costs and Sources of Funds**

Total project costs were $127,464. The Project Costs table below provides an itemized listing showing the Approved Permit Amount and the Final Realized Costs.

| PROJECT COSTS | Approved Permit Amount | Final Realized Costs |
|---|---|---|
| Preplanning Costs | $0 | $0 |
| Site Survey and Soil Investigation | $0 | $0 |
| Site Preparation | $10,000 | $0 |
| Off Site Work | $0 | $0 |
| New Construction Contracts | $0 | $0 |
| Modernization Contracts | $100,000 | $81,957 |
| Contingencies | $5,000 | $0 |
| Architectural/Engineering Fees | $7,000 | $7,492 |
| Consulting and Other Fees | $30,000 | $8,315 |
| Movable or Other Equipment (not in construction contracts) | $25,000 | $29,700 |
| Bond Issuance Expense (project related) | $0 | $0 |
| Net Interest Expense During Construction (project related) | $0 | $0 |
| Fair Market Value of Leased Space or Equipment | $0 | $0 |

| | | |
|---|---|---|
| Other Costs To be Capitalized | $3,000 | $0 |
| Acquisition of Building or Other Property (excluding land) | $0 | $0 |
| **TOTAL PROJECT COSTS** | $180,000 | $127,464 |

**Method of Financing of the Project**

The Project Sources of Funds table below provides a listing of the sources of funding of the project.

| **PROJECT SOURCES OF FUNDS** | **Approved Permit Amount** | **Actual Expenditures** |
|---|---|---|
| Cash and Securities | $180,000 | $127,464 |
| Pledges | $0 | $0 |
| Gifts and Bequests | $0 | $0 |
| Bond Issues (project related) | $0 | $0 |
| Mortgages | $0 | $0 |
| Leases (fair market value) | $0 | $0 |
| Governmental Appropriations | $0 | $0 |
| Grants | $0 | $0 |
| Other Funds and Sources | $0 | $0 |
| **TOTAL FUNDS** | $180,000 | $127,464 |

**Titles XVIII and XIX**

This letter certifies that the reported final realized costs 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 that will be submitted for reimbursement under Titles XVIII or XIX.

**Certification of Compliance**

This letter certifies that the project is in compliance with all of the terms of the associated permit.

**Application and Certification for Payment**

The final AIA Application and Certification for Payment for the construction contract of the project (Form G702) is attached.

If you have any questions or concerns about this project, please feel free to contact me.

Sincerely,

Kara Friedman

Kara Friedman

# APPLICATION AND CERTIFICATE FOR PAYMENT AIA DOCUMENT G702

**TO OWNER**
Dr. Shakeel Ahmed
5023 North Illinois Street
Fairview Heights, Illinois 62208

**PROJECT**
Renovation to MESC
5023 North Illinois Street
Fairview Heights, Illinois 62208

**APPLICATION NO** Final
**PERIOD TO**
**PROJECT NOS.**

Distribution to
☐ Owner
☐ Architect
☐ Contractor
☐

**FROM CONTRACTOR.**
Amir Zukanovic

**VIA ARCHITECT.**
Oculus Inc.
One S. Memorial Dr
St Louis, Missouri 63102

**CONTRACT DATE:**

**CONTRACT FOR**

## 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 . . . . $ 81,957
2. Net Change by Change Orders . . . . $ 0
3. CONTRACT SUM TO DATE (Line 1 ± 2) . . . . $ 81,957
4. TOTAL COMPLETED & STORED TO DATE. (Column G on G703) $ 81,957
5. RETAINAGE:
   a. 0 % of Completed Work (Columns D + E on G703) $ 0
   b. 0 % of Stored Material (Column F on G703) $ 0
6. TOTAL EARNED LESS RETAINAGE . . . . $ 81,957 (Line 4 less Line 5 Total)
7. LESS PREVIOUS CERTIFICATES FOR PAYMENT (Line 6 from prior Certificate) . . . . $ 81,957
8. CURRENT PAYMENT DUE . . . . $ 0
9. BALANCE TO FINISH, INCLUDING RETAINAGE (Line 3 less Line 6) $ 0

| CHANGE ORDER SUMMARY | ADDITIONS | DEDUCTIONS |
|---|---|---|
| Total changes approved in previous months by Owner | | |
| Total: Approved this Month | | |
| TOTALS | | |
| NET CHANGES by Change Order | | |

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:

By: Amir Zukanovic Date: 3-11-2020

State of: Illinois
County of: St. Clair
Subscribed and sworn to before me this 12th day of March, 2020

LAURIE I. CRAIG
Official Seal
Notary Public - State of Illinois
My Commission Expires Sep 26, 2022

Notary Public: Laurie Craig
My Commission expires: 9/26/2022

**ARCHITECT'S CERTIFICATE FOR PAYMENT**

In accordance with the Contract Documents, based on on-site observations and the data comprising this 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 . . . . $ -0.00-
(Attach explanation if amount certified differs from the amount applied for. Initial all figures on this Application and on the Continuation Sheet that are changed to conform to the amount certified.)

ARCHITECT:
By: RKT, AIA Project Architect Date: 3/11/20

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.