



## Fresenius Medical Care

June 11, 2013

**RECEIVED**

JUN 12 2013

HEALTH FACILITIES &  
SERVICES REVIEW BOARD

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

**Re: Final Cost Report. Section 1130.770**  
**Project # 12-043, Fresenius Medical Care West Belmont**  
**Permit Holder:** Bio-Medical Applications of Illinois, Inc. and Fresenius Medical Care Holdings, Inc.  
**Permit Amount:** \$845,588

Dear Ms. Avery:

Enclosed please find the final realized cost report submission for Fresenius Medical Care West Belmont, #12-043, along with a signed notarized cost report certification for the project as required pursuant to 7II. Adm. 1130.770.

If you have any questions, please contact me at 708-498-9121.

Sincerely,

Lori Wright  
Fresenius Medical Care  
Senior CON Specialist

cc: Clare Ranalli

May 20, 2013

**Final Cost Report, Section 1130.770 Fresenius Medical Care West Belmont**

**Project #** 12-043, Fresenius Medical Care West Belmont

**Permit Holder:** Bio-Medical Applications of Illinois, Inc. and Fresenius Medical Care Holdings, Inc.

**Permit Amount:** \$845,588

**This report summarizes the final costs of the above-mentioned project. The development is located at 4943 W. Belmont, Chicago. There have been no changes to the scope and size of this project. The Permit amount is \$845,588.**

<b><u>Key Milestones Completed:</u></b>	<b><u>Date Complete</u></b>
• Project Obligation with Lease Execution	09/11/2012
• ESRD Federal Certification Survey	05/10/2013
• Project Complete with receipt of Certification letter	05/15/2013

## Sources and Uses of Funds

All Project financing to date has been funded from available cash and its equivalents as reported on the company's financial statements. The right to occupy the premises is being secured through a leasing arrangement. This leasing arrangement was utilized to obligate the project. None of the project costs have exceeded the approved permit amounts.

### Project Costs and Sources of Funds

Line Item	Allowance/CON	Realized Costs
Preplanning Costs	N/A	N/A
Site Survey & Soil Investigation	N/A	N/A
Site Preparation	N/A	N/A
Off-site work	N/A	N/A
New Construction Contracts	N/A	N/A
Modernization	137,250	115,500
Contingencies	16,500	0
Architectural/Engineering	15,375	14,805
Consulting and other fees	N/A	N/A
Movable & Other Equipment	75,000	14,549
Bond Issuance Expense	N/A	N/A
Net Interest Expense during Construction	N/A	N/A
FMV of Leased Space & Equipment	601,463	601,463
Other Costs to be Capitalized	N/A	N/A
Acquisition of Building or other Property (excluding land)	N/A	N/A
<b>Total Project Costs</b>	<b>845,588</b>	
<b>Realized Total Project Costs To Date</b>		<b>746,317</b>
Cash & Securities	244,125*	144,854
Pledges	N/A	N/A
Gifts & Bequests	N/A	N/A
Bond Issues	N/A	N/A
Mortgages	N/A	N/A
Lease FMV	601,463	601,463
Gov. Approp	N/A	N/A
Grants	N/A	N/A
Other funds and Sources	N/A	N/A
<b>Total funds</b>	<b>845,588</b>	
<b>Total Spent to Date</b>		<b>749,317</b>

\*An error was made in the application. This is the correct number.

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

**APPLICATION AND CERTIFICATION FOR PAYMENT**  
AIA DOCUMENT G702/CMA

CONSTRUCTION MANAGER-ADVISER EDITION

PAGE 1 OF 2

TO CONTRACTOR: PROJECT: #2022-3-EX-NC-RN-12

Dinaso & Sons Construction Co., Inc.  
4931 W. 171st Street, Unit E  
Country Club Hills, IL 60478

West Belmont  
4943 W. Belmont  
Chicago, IL 60641

FROM SUBCONTRACTOR:

Dinaso & Sons Construction Co., Inc.  
4931 W. 171st Street, Unit E  
Country Club Hills, IL 60478

Bio Medical Applications of Illinois, Inc.  
c/o Fesenius Medical Care NA  
2219 Hollywood Blvd., Suite 101  
Hollywood, FL 33020

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 \$ 115,500.00  
2. Net change by Change Orders \$ 0.00  
3. CONTRACT SUM TO DATE (Line 1 + 2) \$ 115,500.00  
4. TOTAL COMPLETED & STORED TO DATE (Column G on G703) \$ 115,500.00

5. RETAINAGE:

a. 0% of Completed Work \$ 0.00  
(Column D + E on G703)  
b. 0% of Stored Material 0.00  
(Column F on G703)

Total Retainage (Lines 5a + 5b or Total in Column I of G703) \$ 0.00  
6. TOTAL EARNED LESS RETAINAGE \$ 115,500.00  
(Line 4 Less Line 5 Total)  
7. LESS PREVIOUS CERTIFICATES FOR PAYMENT (Line 6 from prior Certificate) \$ 79,893.00  
8. CURRENT PAYMENT DUE \$ 35,607.00  
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	\$0.00	\$0.00
<b>TOTALS</b>	\$0.00	\$0.00
NET CHANGES by Change Order	\$0.00	\$0.00

AIA DOCUMENT G702 - APPLICATION AND CERTIFICATION FOR PAYMENT - 1992 EDITION AIA ©1992

APPLICATION NO: FINAL Distribution to:  
PERIOD TO: April 2, 2013  OWNER  
 ARCHITECT

PROJECT NOS: 2022-3-EX-NC-RN-12  CONTRACTOR  
CONTRACT DATE: December 3, 2012

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: *Charles A. Dinaso* Date: April 2, 2013

State of Illinois County of Cook  
Subscribed and sworn to before me this day of April, 2013  
Notary Public: *Christine A. Hassel*  
My Commission Expires 7-5-2015



**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: ..... \$ 35,607.00  
(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: \_\_\_\_\_ 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.

THE AMERICAN INSTITUTE OF ARCHITECTS, 1735 NEW YORK AVE., N.W., WASHINGTON, DC 20005-5292

**Certification Of Cost Report**  
**Fresenius Medical Care West Belmont**  
**Project # 12-043**

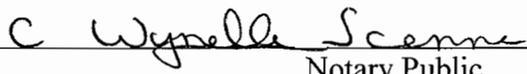
**Bio-Medical Applications of Illinois, Inc.** certifies that pursuant to 7711. Adm. 1130.770, that the final realized costs of Fresenius Medical Care West Belmont, Project #12-043, are the total costs required to complete the project, and that there are no additional or associated costs or capital expenditures related to the project which will be submitted for reimbursement under Title XVIII or XIX.

BY:   
ITS: Mark Fawcett  
Vice President & Treasurer

BY:   
ITS: **Bryan Mello**  
**Assistant Treasurer**

Subscribed and Sworn to  
Before me this \_\_\_ day of \_\_\_\_\_, 2013

Subscribed and Sworn to  
Before me this 20 day of May, 2013

  
Notary Public

Notary Public

My commission expires: \_\_\_\_\_

My commission expires: 08-01-2014



**Certification Of Cost Report**  
**Fresenius Medical Care West Belmont**  
**Project # 12-043**

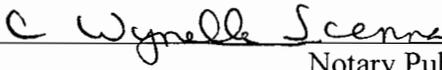
**Fresenius Medical Care Holdings, Inc.** certifies that pursuant to 7711. Adm. 1130.770, that the final realized costs of Fresenius Medical Care West Belmont, Project #12-043, are the total costs required to complete the project, and that there are no additional or associated costs or capital expenditures related to the project which will be submitted for reimbursement under Title XVIII or XIX.

BY:   
ITS: Mark Fawcett  
Vice President & Treasurer

BY:   
ITS: Bryan Mello  
Assistant Treasurer

Subscribed and Sworn to  
Before me this \_\_\_ day of \_\_\_\_\_, 2013

Subscribed and Sworn to  
Before me this 20 day of May, 2013

  
Notary Public

Notary Public

My commission expires: 08-01-2014

My commission expires: \_\_\_\_\_

