



**SIGNATURE  
HEALTHCARE  
SERVICES, LLC**

**RECEIVED**  
APR 08 2015 *gms*  
CERTIFICATE OF NEED PROGRAM  
DEPARTMENT OF HEALTH

April 6, 2015

Janis Sigman  
Manager, Certificate of Need Program  
Department of Health  
P.O. Box 47852  
Olympia, WA 98504-7852

Dear Ms. Sigman:

This is a letter of intent for Signature Healthcare Services, LLC to establish a new psychiatric hospital in Spokane County Washington.

1. Description of the Proposed Service

Signature Healthcare Services, LLC proposes to establish a new psychiatric hospital with 72 licensed psychiatric hospital beds.

2. Estimated Cost of the Project

Estimated capital expenditures for this project are \$22,412,785

3. Identification of the Service Area

The new psychiatric hospital will be located in Spokane County. Spokane County is the planning area or service area for evaluation of the new psychiatric hospital certificate of need application.

If you have questions, please contact me at:

Signature Healthcare Services  
4238 Green River Road  
Corona, CA 92883  
951.549.8032 office  
909.772.4330 cell

Sincerely,

A handwritten signature in black ink, appearing to read 'Blair Stam', is written over a horizontal line.

Blair Stam  
Executive Vice President

4238 Green River Rd. • Corona, CA 92880 • Phone 951.549.8032 • Fax 951.549.8033  
1450 W. Long Lake Road, Suite 340 • Troy, MI 48098 • Phone 248.905.5091 • Fax 248.905.5096



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Dear Ms. Sigman:

This is a letter of intent for Signature Healthcare Services, LLC to establish a new psychiatric hospital in Spokane County Washington.

1. Description of the Proposed Service

Signature Healthcare Services, LLC proposes to establish a new psychiatric hospital with 72 licensed psychiatric hospital beds.

2. Estimated Cost of the Project

Estimated capital expenditures for this project are \$25,000,000.

3. Identification of the Service Area

The new psychiatric hospital will be located in Spokane County. Spokane County is the planning area or service area for evaluation of the new psychiatric hospital certificate of need application.

If you have questions, please contact me at:

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