



STATE OF WASHINGTON
DEPARTMENT OF HEALTH
Olympia, Washington 98504

BEGINNING OF REVIEW NOTICE
Certificate of Need Application

Applicant: Proliance Surgeons, Inc. PS

Description of Proposal: Establish a CN approved ambulatory surgery center in Lakewood within Pierce County

Estimated Costs: \$315,000

Public Hearing: No public hearing will be held unless requested. To request a hearing, the request must be in writing and include the name, address, and signature of the person making the request. Deadline for requesting a public hearing is 5:00 p.m. on Tuesday June 25, 2013. Faxed requests will not be accepted.

If a public hearing is scheduled, the hearing notice will be published in **The News Tribune** at least 15 days before the date of the hearing.

Public Comment Period: If no public hearing is held, written comments must be received by the Certificate of Need Program by 5:00 pm, July 15, 2013. Faxed comments will not be accepted.

Send written comments to:

Mailing Address

Department of Health
Certificate of Need Program
Mail Stop 47852
Olympia, WA 98504-7852

Other Than Mail

Department of Health
Certificate of Need Program
111 Israel Road SE
Tumwater, WA 98501

Anticipated Decision Date: September 12, 2013

If you have any questions regarding a hearing or would like additional information, please call Bob Russell with the Certificate of Need Program at (360) 236-2958. For additional information or details, log into the DOH Certificate of Need website: www.doh.wa.gov