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July 31, 2012

Janis Sigman, Manager
Certificate of Need Program
Office of Certification and Enforcement
State of Washington Department of Health
111 Israel Rd SE
Tumwater, WA 98501

R E C E I V E D
JUL 31 2012
CERTIFICATE OF NEED PROGRAM
DEPARTMENT OF HEALTH

Dear Ms. Sigman:

In accordance with WAC 246-310-080, DaVita Inc. hereby submits a letter of intent regarding its intention to apply for a certificate of need for a **5** station expansion of the DaVita Westwood Dialysis Center. In conformance with the requirements of WAC, the following information is provided:

A Description of the Extent of Services Proposed:

DaVita Inc. intends to expand by **5** stations the DaVita Westwood Dialysis Center that will provide and support in-center and peritoneal dialysis.

Estimated Cost of the Proposed Project:

The capital expenditure associated with this project is estimated to be **\$ 65,700**.

Description of the Service Area:

The service area is **King County ESRD Planning Area # 3**.

We look forward to continuing to serve dialysis patients in Washington.

Sincerely,

David D. Natali
Group Facility Administrator
DaVita, North Star, Region 1