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October 30, 2009

Janis Sigman, Manager
Certificate of Need Program
Office of Certification and Enforcement
State of Washington Department of Health
310 Israel Road SE
Building 4, Floor 3
Tumwater, WA 98501-5447

R E C E I V E D

OCT 30 2009

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 20 station 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 establish a 20 station dialysis facility located at 1351 Aaron Drive, Richland, WA 99352 that will provide and support in-center and home hemodialysis.

Estimated Cost of the Proposed Project:

The capital expenditure associated with this project is estimated to be \$1,789,908.00, inclusive of the application fee.

Description of the Service Area:

The service area is Benton County.

Thank you for your support in this matter.

Sincerely,

Jason Bosh
Regional Operations Director
DaVita, North Star, Region 1