## Certificate of Need Request for Extension



To request a six-month extension to incur a capital expenditure or above-ground construction, complete this form in its entirety. Also submit a completed Periodic Progress Report with this form if it is due at this time. Send this information by email to <u>CONP@health.mo.gov</u> (preferred), fax at 573-751-7894, or mail to CONP, P.O. Box 570, Jefferson City, MO 65102. Request for extensions must be received in adequate time to allow for processing prior to the meeting for which a decision is scheduled.

Date: March 19, 2024					
Project #: 5999		Project Name: Harrison County Community H	Iospital		
Project Title/Description: Replacement Hospital					
1. Briefly explain why a capital expenditure will not be incurred by the current deadline.					
Delays in the finalization and execution of the construction contract					
2. Briefly state the reason(s) for the extension request.					
Delays in the finalization and execution of the construction contract					
3. What steps have been completed for the project to date and when were they completed? Date Completed Construction contract signed and all documents and paperwork approved by USDA					
Date Completed         Construction contract signed and all documents and paperwork approved by USDA.           2/27/2024         2/27/2024					
4. What steps are needed in order incur a capital expenditure (above ground construction or equipment lease/purchase) for the project,					
and when will they be completed?					
Anticipated Ground/dirt preparation work begins in March and above ground construction to begin in early summer 2024					
Completion Date Summer 2024					
5. What are the steps that will take place after the capital expenditure to complete the project and when do you anticipate that they will be					
completed?					
<u>Anticipated</u> <u>Completion</u> Date	<u>Step</u> to be Cor	nleted			
April 2026		ent hospital construction completed April 2026			
				/	
6. Are plannin	g and/or zo	ning matters complete, and is the site approved?		Yes No	
If "no", explain.					
7. Has financing been secured for the project?					
If financing has been acquired and documentation was not previously provided, attach a copy of the					
letter from the lender or 3rd party documentation					
Are financing contingencies complete? Is financing available for immediate disbursal for the project?					
Is financing available for immediate disbursal for the project? Types 🗍 No				Yes No	
If the answer is "no" to any of the above questions, explain.					
Give specifics of any and all existing financing problems and the reason(s) for their occurrence.					
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8. Are there ar	8. Are there any new equity partners for the project as originally presented to the committee? Yes V No				
If "yes", expla	If "yes", explain.				
9. Explain any and all restructuring of the project as originally presented to the committee.					
None					
10. Describe any anticipated situation(s) or problems not previously addressed that may prevent the project from incurring a capital					
expenditure by the end of the requested extension, should the extension be granted.					
None					
<ul> <li>11. If this extension is granted, do you anticipate that additional six-month extensions will be necessary?</li> <li>□ Yes ☑ No If "yes", how many would be needed? n/a</li> </ul>					
Explain why additional extensions would be needed. $n/a$					
Signature O C III Printed Name Date					
V	one	Doug Brandt		3/19/2024	
/		Doug Dranut		UII/INVAT	