

## 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 CONP@health.mo.gov (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: <b>3.29.24</b>					
Project #: <b>6004 RS</b>		Project Name: Select Neuro Transition			
Project Title/Description: Neurological Transition Facility					
1. Briefly explain why a capital expenditure will not be incurred by the current deadline.					
	Construction has begun in its early stages, due to scheduling conflicts and delays with contractors. While no capital				
expenditure has been realized at this time, it is expected that such expenditure will be incurred on or about May 1, 2024.					
2. Briefly state the reason(s) for the extension request.					
To provide time to continue and complete construction on the project.					
Date Completed Sept 2023					
Mar 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?					
Completion Date	Anticipated Step Completion Date to be Completed				
May 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?  Anticipated   Step					
Completion Date to be Completed					
Fall 2024 Construction expected to complete;					
Winter 2024 Licensing and operational.					
6. Are planning and/or zoning matters complete, and is the site approved? x Yes No If "no", explain.					
7. Has financing been secured for the project? x Yes \square No					
If financing has been acquired and documentation was not previously provided, attach a copy of the letter from the lender or 3 <sup>rd</sup> party documentation.					
Are financing contingencies complete?   x Yes   No					
Is financing available for immediate disbursal for the project?					
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.					
None.					
8. Are there any new equity partners for the project as originally presented to the committee? Yes x No					
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 anticipated at this time.					
11. If this extension is granted, do you anticipate that additional six-month extensions will be necessary?					
Yes x No If "yes", how many would be needed?					
Explain why additional extensions would be needed.					
Signature Printed Name Date					
	V	du for	Jon Dalton	4.1.24	