

**Application to Determine Eligibility to Receive Accelerated Capital Reimbursement for the
Financing of Federally Mandated Sprinkler Costs**

Facility Name:

Operating Certificate Number:

Have you filed your facility's 2011 Cost Report? Yes No

In addition to information identified in the August 2012 DAL and that the Department will obtain from your 2011 Cost Report, please provide the following financial information:

1) Most recent interim financial statements for the current year (unaudited is acceptable)

2) Cash flow projections for the current year

3) Outstanding liabilities to vendors and days past due

4) The facility's 2012 operating budget

5) Amount of existing capital debt, name of lender, and what the security is for that debt

6) Indicate whether HUD/FHA insures your existing mortgage Yes No

Please provide the following information about your sprinkler project:

1) Have you submitted the appropriate CON notice or application? Yes No

2) Have you received a formal bid for your project? Yes No

3) Description and estimated costs of the sprinkler project (either from the bid above or other source)

4) Estimated start and completion dates of the project

5) Have you secured a lender? If so, please provide the name of the lender and terms and conditions of the financing (i.e., rate, term, any other financing provisions or conditions)

6) Indicate whether one or more of your existing lenders holds a lien on your facility's accounts receivable, and whether this lien would include Medicaid capital reimbursement for sprinkler costs

Do you authorize the Department or your Nursing Home Association to share the information contained in your cost report and on this application with potential lenders that may be willing to finance your sprinkler project?

Yes

No

I, the owner or operator certify that the information provided above is accurate and complete and should I be deemed eligible for accelerate capital reimbursements for sprinklers and apply to have the terms of my financing approved, I agree to comply with the terms set forth in Section 86-2.41 of Subpart 86-2 of 10 NYCRR, including the provision to set aside and use rate adjustments made pursuant to this application for the purpose of paying debt service on financing entered into to satisfy the Federal requirements for sprinklers as provided in Section 42 CFR 483.70(a)(8).

X

Signature of Facility Owner/Operator