



Department of Health

ANDREW M. CUOMO
Governor

HOWARD A. ZUCKER, M.D., J.D.
Commissioner

SALLY DRESLIN, M.S., R.N.
Executive Deputy Commissioner

FINAL EXPENDITURE REPORT - PROPERTY COSTS

Agency:			
Site Address, City			
County:		Scope of Work:	
Op Cert # :		# Beds/Slots:	Program Type:
Corp ID# :		# Respite Beds:	Provider ID #:
Filing Date (supercedes any previous filings):		PPA Date:	Cert Date*:
Agency Contact:		Phone #:	*Certification or Project Date of Last Expenditure:
DDRO Contact:		Phone #:	DDRO Code:

*****This form must be completed in its entirety or it will be returned. Questions should be directed to MHRs.*****

Property Costs	Approved PPA Costs	Final Costs	Variance + or (minus)
1. Real Property Acquisition- Land:			\$0
1.a. Building:			\$0
1.b. Property Option (acquisition only):			\$0
2. Construction/Renovation:			\$0
3. Contingency (Change orders) :			\$0
*DOB approval is required for Change Orders in excess of 15% of approved base rehab costs.			
4. Design:			\$0
5. Clerk of the Works:			\$0
6. Site Survey/ Soil Data:			\$0
7. Closing Costs :			\$0
Pre-Operational Interest*			
*NO INTEREST ASSOCIATED WITH PERMANENT FINANCING should be reported on the Short Term Interest Tab, even if it occurred before project certification or completion. *DOB approval is required for Pre-op interest costs incurred beyond one year.			
8. Pre-op Interest:			\$0
* This amount should match the Total amount from the Short Term Interest Tab 2B.			
9. Accounting/Legal:			\$0
10. Other Capital Costs:			\$0
TOTAL Property Cost:	\$0	\$0	\$0
(PPA) TOTAL Non- Property Cost (Start-up):			

CERTIFICATIONS

AGENCY

MHRs

Name Printed

Date

Name Printed

Date

BUREAU OF MENTAL HYGIENE SERVICES RATE SETTING

Title

Title

FINAL EXPENDITURE REPORT - NON-PROPERTY COSTS (Day Programs Only)

Agency:

Site Address, City: Project ID #:

Op Cert #: Program Type: PPA Date:

Filing Date (supercedes any previous filings): Certified Cap: Cert Date:

PRE-OPERATIONAL COSTS (Start-Up)	Comments
Pre-Operational Rent:	\$ _____
Pre-Operational Utilities & Taxes:	\$ _____
Pre-Operational Staffing:	\$ _____
Pre-Operational Staff Training:	\$ _____
Pre-Operational Advertising:	\$ _____
Pre-Operational Travel:	\$ _____
Pre-Operational Security Services:	\$ _____
Pre-Operational Furniture:	\$ _____
Pre-Operational Equipment, Supplies, Clothing:	\$ _____
Pre-Operational Miscellaneous Other:	\$ _____
Pre-Operational TOTAL :	\$ <input type="text"/> PPA Approved Pre-Op TOTAL: <input style="background-color: yellow;" type="text"/>

CERTIFICATIONS

AGENCY

MHRS

Name Printed _____ Date _____

Title

Pritned Name _____ Date _____

BUREAU OF MENTAL HYGIENE SERVICES RATE SETTING

Title



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FINAL EXPENDITURE REPORT- FINANCING

Agency :	<input type="text"/>		
Site Address, City:	<input type="text"/>	PPA Date:	<input type="text"/>
Op Cert #:	<input type="text"/>	Cert Date:	<input type="text"/>
Was financing obtained for this project? (Y/N): 			

TEMPORARY FINANCING

Amount Financed: \$	<input type="text"/>		Loan ID:	<input type="text" value="AA"/>
Start Date:	<input type="text"/>	Pre- Op End Date:	<input type="text"/>	
Interest Rate:	<input type="text"/>	Fixed or Variable:	<input type="text"/>	
Amount Financed: \$	<input type="text"/>		Loan ID:	<input type="text" value="BB"/>
Start Date:	<input type="text"/>	Pre-Op End Date:	<input type="text"/>	
Interest Rate:	<input type="text"/>	Fixed or Variable:	<input type="text"/>	

PERMANENT FINANCING

Amount Financed: \$	<input type="text"/>		Loan ID:	<input type="text" value="A"/>
Start Date:	<input type="text"/>	End Date:	<input type="text"/>	
Interest Rate:	<input type="text"/>	Fixed or Variable:	<input type="text"/>	
Amount Financed: \$	<input type="text"/>		Loan ID:	<input type="text" value="B"/>
Start Date:	<input type="text"/>	End Date:	<input type="text"/>	
Interest Rate:	<input type="text"/>	Fixed or Variable:	<input type="text"/>	

This form should include bank loans and bonds **only**.

TEMPORARY (Pre-op) FINANCING: If any portion of the project was financed pre-operationally, include the amount, start and end dates, interest rate, and indicate whether the financing was at a fixed or variable rate. Pre-op financing cannot extend beyond one year without approval from the NYS Division of the Budget.

PERMANENT FINANCING: A drawdown from a Line of Credit can be considered permanent financing. Closing costs for permanent financing may be included on the FER; however, interest associated with permanent financing is not reported on the FER as Pre-Op interest



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FINAL EXPENDITURE REPORT- SHORT-TERM INTEREST

Agency:	<input type="text"/>	PPA Date:	<input type="text"/>
Site Address, City:	<input type="text"/>	Cert Date:	<input type="text"/>
Op Cert #:	<input type="text"/>		

TERMS OF FINANCING

Amount Financed: \$	<input type="text"/>	Loan ID:	<input type="text"/>
Start Date:	<input type="text"/>	End Date:	<input type="text"/>
Interest Rate:	<input type="text"/>	Fixed or Variable:	<input type="text"/>

SHORT-TERM INTEREST SCHEDULE

<u>Dates</u>	<u>Interest Rate</u>	<u>Interest Amount \$</u>
TOTAL:\$		<input type="text"/>



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Agency:			PPA Date:	
Site Address, City:			Cert Date:	
Op Cert #:				

TERMS OF FINANCING

Amount Financed: \$		Loan ID:	
Start Date:		End Date:	
Interest Rate:		Fixed or Variable:	

SHORT-TERM INTEREST SCHEDULE

<u>Dates</u>	<u>Interest Rate</u>	<u>Interest Amount \$</u>
TOTAL:\$		



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Agency:	<input type="text"/>	PPA Date:	<input type="text"/>
Site Address, City:	<input type="text"/>	Cert Date:	<input type="text"/>
Op Cert #:	<input type="text"/>		

TERMS OF FINANCING

Amount Financed: \$	<input type="text"/>	Loan ID:	<input type="text"/>
Start Date:	<input type="text"/>	End Date:	<input type="text"/>
Interest Rate:	<input type="text"/>	Fixed or Variable:	<input type="text"/>

SHORT-TERM INTEREST SCHEDULE

<u>Dates</u>	<u>Interest Rate</u>	<u>Interest Amount \$</u>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
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<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

TOTAL:\$