

VERMONT AGENCY OF HUMAN SERVICES DEPARTMENT OF MENTAL HEALTH AND DEPARTMENT OF DISABILITIES, AGING AND INDEPENDENT LIVING

CERTIFICATE OF APPROVAL APPLICATION COVER PAGE

Ann	icant.

HowardCenter, Inc.

Project Title:

4309 Shelburne Road

Principal Contact:

Sandy McGuire, CFO/COO

Address:

208 Flynn Avenue, Suite 3J, Burlington VT 05401

802-488-6900

PROJECT TYPE & AMOUNT

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Capital expenditure exceeding \$1,500,000 for construction, development, purchase or long-term lease of property or existing structure

□ Purchase of a technology, technology upgrade, other equipment or a renovation with a cost exceeding \$1,000,000

□ The offering of a health care service having a projected annual operating expense that exceeds \$500,000 for either of the next two budgeted fiscal years if the service was not offered by the health care facility within the previous three fiscal years.

 A. Proposed Capital Expenditure (Total 	Table) 5	3.159.05	1
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Proposed Lease Amount (payment times term) \$	I certify to the best of my
knowledge and belief, that the information in this application	n is true and correct and that this
application has been duly authorized by the governing body	of the applicant.

CERTIFYING OFFICIAL:

Sandra McGuire, CFO/COC

SIGNATURE:

8/30/22

DATE:

Certificate of Approval Application November, 2007 Page 3 of 6