



1 Chairman Blackwell stated that we have a quorum and we are able to proceed with the meeting.  
2 It appears as though Commissioner Miller is not online with us at this time. We are remote. And  
3 we will work through the remote situation to accommodate all we need to do.  
4

5 Chairman Blackwell stated that he will start out by saying that in accordance with the Illinois  
6 Open Meetings Act, and in view of the Governor's most recent Disaster Declaration as it regards  
7 COVID-19, I have determined that fully in-person meetings conducted under the Open Meetings  
8 Act are not practical or prudent because of the current pandemic disaster. Accordingly, meetings  
9 may still be conducted by audio or video conference without the physical presence of a quorum  
10 of the Planning and Zoning Commission.  
11

12 The Governor's new law relating to the Open Meetings Act under the emergency law, requires  
13 someone to be physically present at the Village Hall Board Room during the meeting. And every  
14 vote, even the most routine of votes, has to be by roll call rather than in favor of.  
15

16 Chairman Blackwell stated that John McDonnell, the Village's Building Commissioner, is  
17 physically present in the Board Room at Village Hall for tonight's meeting. And tonight's  
18 meeting is being recorded verbatim.  
19

20 Chairman Blackwell stated now, for the purposes of efficiency, and to allow adequate due  
21 process for the Petitioner, our residents, and businesses in the Village of Olympia Fields, and to  
22 hear all matters before us this evening, and in future meetings, a schedule has been established to  
23 accommodate all parties.  
24

25 Chairman Blackwell stated that tonight, September 29<sup>th</sup>, 2020, is the first hearing. October 20<sup>th</sup>  
26 of 2020, is the second hearing. And, if in fact, we have not concluded our business as a Planning  
27 Commission at that time, we have set a third meeting, that is tentative for November 10<sup>th</sup> of  
28 2020. He stated to repeat those days, the following meetings are October 20<sup>th</sup>, for the second  
29 meeting and November 10<sup>th</sup>, for the third meeting.  
30

31 Chairman Blackwell stated that the questions and comments that are received on this meeting  
32 will be made publicly available and forwarded to the Petitioner. Let me add one other thing too.  
33 The Olympia Fields website, if one is to go on that website, anyone can submit additional  
34 questions based on the timeframe that has been established by the Village Administrator. Those  
35 particular questions that you may have, must be turned in on a timely basis. That is the second  
36 option to submit questions.  
37

38 Chairman Blackwell stated that during tonight's meeting we will hear the Petitioner's proposal  
39 and presentation. There will be no oral questioning during the course of the Petitioner's  
40 presentation in order to make sure that the Petitioner's presentation is full and complete, and that  
41 the Petitioner has adequate time to make such presentation.  
42

43 Chairman Blackwell stated that during this presentation, members of the public are encouraged  
44 to submit questions or comments via the "Chat" feature if you are using the Zoom link, and to  
45 watch and listen to the Public Hearing. If you would like to send in questions or comments  
46 related to the Petitioner's presentation, or agenda, please feel free to email them in to:

1 [publiccomments@olympia-fields.com](mailto:publiccomments@olympia-fields.com). All questions and comments must be received by 3  
2 o'clock P.M. Wednesday, September 30<sup>th</sup>, 2020.

3  
4 Chairman Blackwell stated as some housekeeping measures, we are under Zoom for the meeting.  
5 As such, the Petitioners are all going to be asked to identify themselves and their titles. Anyone  
6 on the Petitioner's side who will be presenting, would need to do so upfront for the Court  
7 Reporter, as this is being recorded through Zoom, we have a Court Reporter who is also  
8 recording the transcript.

9  
10 Chairman Blackwell stated just as a reminder, we are not looking to have the Commissioners for  
11 the Plan Commission engage in questioning tonight. We have essentially blocked out sufficient  
12 time for Petitioner looking to see how far they need to go to make their initial presentation. He  
13 would expect that will take up most of tonight.

14  
15 Chairman Blackwell stated for our second meeting, which will be for sure on October the 20<sup>th</sup>, at  
16 that point in time, the Petitioners would have an opportunity to do a quick summation of their  
17 position, followed by an initial set of questions from the Plan Commissioners, and of course,  
18 Teska through Mike Hoffman will also have questions that he has presented to the Petitioners, or  
19 will have available for them to answer as well. In that second meeting, following those questions,  
20 we will open it back up to the Commissioners that have follow-up questions. We will see how  
21 long we need to go. We have ample time to do so. And the schedule seems appropriate and set to  
22 accommodate all parties under the circumstances.

23  
24 Chairman Blackwell stated that the Minutes from our previous meeting, will be dealt with at our  
25 October 20<sup>th</sup> meeting. We will not have review and approval of the Minutes until our following  
26 meeting.

27  
28 Chairman Blackwell stated tonight we have a Public Hearing and discussion to consider an  
29 application filed by Recovery & Rehabilitation, LLC, a Delaware limited liability company  
30 authorized to transact business in Illinois as RoseHeart Renewal Center and All Nations  
31 Assembly Church, Inc. The request is for a zoning map amendment from R-1 One Family  
32 Residence to MD-1 Medical District and a Special Use to operate a 120-bed alcoholism and  
33 substance abuse treatment facility in accordance with Section 22-333 of the Zoning Ordinance.  
34 The property is located at the southwest corner of 203<sup>rd</sup> Street and Governors Highway. It is  
35 currently owned and operated by All Nations Assembly Church and has previously been known  
36 as the "Tolentine Center." The property contains approximately 22 acres. The property address is  
37 20300 Governors Highway, PIN #31-14-301-005-0000.

38  
39 Chairman Blackwell stated so tonight, we have a presentation by the Petitioner, Recovery &  
40 Rehabilitation, LLC. The first thing that he would like to do is to ascertain who, on behalf of the  
41 Petitioner, will be making a presentation tonight regarding the Petition. Who do we have from  
42 the Petitioner's group?

43  
44 Ms. Kelly Mottl stated Hi, good evening, I'm Kelly Mottl. I'm here on behalf of the Petitioner.

45  
46 Chairman Blackwell stated okay, let me say this before you get started, Ma'am. Two things,  
47 another housekeeping measure, turn down your microphones. If your speakers are near your

1 webcam and you can move them, move them. This will help to eliminate echoes and  
2 reverberations. We can isolate when you do have the echo. And we can just let the individual  
3 speaker know to turn down their speakers on their webcam and on your computer too. And if we  
4 can't hear you, we will certainly let you know. He stated for Ms. Mottl to go ahead. Chairman  
5 Blackwell apologized. He stated that he needed to say that. He is glad that he did.

6

7 Ms. Mottl stated that we understand. Again, she is Kelly Mottl. She is here on behalf of the  
8 Applicant.

9

10 Chairman Blackwell asked Ms. Mottl to spell out her name for the Court Reporter. He stated that  
11 she is hearing your name, but we need to have it spelled out.

12

13 Ms. Mottl stated that it is Kelly, K-e-l-l-y. The last name is Mottl, M-o-t-t-l. Chairman Blackwell  
14 stated for Ms. Mottl to go ahead.

15

16 Ms. Mottl stated good evening. She is here on behalf of the Applicant. She has the rest of their  
17 team here as well. She will do a short introduction of all the participants that we have who are  
18 here on behalf of the Applicant.

19

20 Ms. Mottl wanted to first off say a thank you to the Village for setting this meeting up. She  
21 knows these are unusual circumstances. We appreciate the effort that you have put into putting  
22 this meeting together, and to getting us through the technical bumps. We wanted to let you know  
23 how much we appreciate the public showing up as well to hear our presentation.

24

25 Ms. Mottl stated first off, we want to establish for the record, that the requirements for Notice,  
26 the newspaper publishing, the signage, and the neighbor notification have been met. Further, we  
27 want to admit into submission all materials into the record that are set forth within the  
28 Applicant's Rider on Page 6. That would include: The ALTA Survey; The Topo Survey; The  
29 Preliminary Overall Site Plan; The Owner's Consent; The Landscape Plan; The Fire Truck  
30 Exhibit; The Wetland Delineation Report; The Will-South Cook Soil and Water Conservation  
31 District Land Use Opinion; The Preliminary Engineering & Stormwater Management Plan; The  
32 Market Impact Study by MaRous & Company; The KLOA Summary Traffic Evaluation; The  
33 Main Level Interior Floor Plans; The Second & Basement Level Interior Floor Plans; The Aerial  
34 Renderings; The Renderings of the Main Reception Area; The Renderings of the Main Vestibule  
35 Addition; and the Renderings of a Typical Treatment Room; The Opinion from John Curtiss of  
36 The Retreat; and all of our Digital Submissions. And we would like to admit into evidence our  
37 Rider as a whole, as well. Ms. Mottl stated with the foregoing being Exhibits Number 1 through  
38 15.

39

40 Ms. Mottl stated that it is well-known that opioid use disorder and opioid addiction are at  
41 epidemic levels in the U.S. and worldwide. Millions of Americans currently suffer from opioid  
42 use disorder. And this has become a Public Health crisis with devastating consequences. In fact,  
43 in October of 2017, the Secretary of Health and Human Services declared a Nationwide Public  
44 Health Emergency regarding the opioid crisis. Since then, the problem has gotten worse and has  
45 intensified during COVID. The CDC reports that during the week of June 24<sup>th</sup> to June 30<sup>th</sup>, 2020,  
46 13% of adults in the U.S. reported starting or increasing substance abuse.

47

1 Ms. Mottl stated in response to the opioid crisis, the U.S. Department of Health and Human  
2 Services has been focusing its efforts on improving access to treatment and recovery services. In  
3 that regard, we are here on behalf of RoseHeart Renewal Center to request approval to use the  
4 property located at 20300 Governors Highway as a fully licensed, 120-bed Alcoholism and  
5 Substance Abuse Treatment Facility.

6  
7 Ms. Mottl stated that we plan to maintain virtually the entire original footprint of the existing  
8 building that is located at that site, and to renovate it in accordance with the architectural and  
9 engineering drawings that you will see later on during our presentation, in order to make  
10 cosmetic changes which would provide a proper site layout in accordance with Illinois law  
11 governing alcoholism and substance abuse treatment facilities, and to bring the structure up to  
12 current Code and Fire Codes.

13  
14 Ms. Mottl stated that our facility will provide a private, modern residential setting for patients  
15 while meeting and exceeding all performance standards set forth by the Illinois Department of  
16 Health and Human Services. Treatment in our facility to patients will be delivered by our clinical  
17 team of therapists, doctors, psychiatrists and nurses, who will also meet all criteria as set forth by  
18 the Illinois Department of Human Services, Office of Alcoholism and Substance Abuse.

19  
20 Ms. Mottl stated that we present to you tonight our Application for RoseHeart Renewal Center to  
21 obtain the following development approvals: A Map Amendment to rezone the property to MD-  
22 1, Medical District; and our Application for a Special Use to use the property as an alcoholism  
23 and substance abuse treatment facility.

24  
25 Ms. Mottl stated that here with her tonight, she has the rest of their team. She is here along with  
26 Andrew Kolb. We are the development team. She and Andrew have worked together for about  
27 10 years in various businesses. We have commercial real estate development experience. They  
28 have developed medical facilities. They have represented CVS Pharmacies and Minute Clinics  
29 all over the Midwest in developing their properties.

30  
31 Ms. Mottl stated that she also has with them, John Vrba who is our CEO. He is the owner and  
32 operator of Burgess Square Healthcare & Rehab Center, which is a premiere Skilled Nursing  
33 Facility and Rehabilitation Center in DuPage County. We have a Capital Partner, Ted Myers,  
34 who is the owner of large commercial real estate. He is not here tonight, but he is part of our  
35 team.

36  
37 Ms. Mottl stated that with us here tonight who will also do a presentation are our architects from  
38 Charles Vincent George Architects. We have Mark Nosky, who is the Senior Project Manager,  
39 and Jeff Lietz, who is the VP of Commercial Architecture.

40  
41 Ms. Mottl stated on this call, although not presenting, we have Brad Prischman from V3  
42 Companies who did the engineering work. We also have our Landscape Architect. We also have  
43 the gentleman who performed the Traffic Study from KLOA who are available for questions  
44 should you have them. Ms. Mottl stated that she will turn the presentation over to our architects  
45 to Mark, who is going to walk you through the drawings and the renderings of the project. You  
46 can get a look and see what the project is going to look like.

47

1 Chairman Blackwell thanked Ms. Mottl. Chairman Blackwell inquired of Mark whether or not  
2 he is on video. Mark stated that he is. Chairman Blackwell asked Mark to give us the proper  
3 spelling of his last name. Mark stated it is N-o-s-k-y. He is the Senior Project Manager. He has  
4 been working with Jeff Lietz on this project. He stated that both of us will be sharing the  
5 presentation in terms of the architectural drawings, and we've put a PowerPoint Presentation or  
6 slides together to show you as we go through the project, what this project is all about.

7  
8 Chairman Blackwell stated sure, you may proceed. Mr. Nosky stated before leading on to Jeff,  
9 when we came into the project, being the architects for the project — Mr. Nosky stated that he is  
10 going to turn down his sound a little bit. Mr. Nosky stated that we took great pains to kind of go  
11 out into the existing building. Looked through the building, understand the site, and we kind of  
12 performed an as-built review of the building, developing plans and elevations based on our  
13 study.

14  
15 Chairman Blackwell asked Mark to hold it for one second. We've got some noise in the  
16 background and some echoing, and we are probably picking it up. He would ask that anyone who  
17 is not speaking, put your mic on mute. If you have background folks doing things, you might  
18 want to quiet them down, and turn your mics down. He stated that he has done these things, and  
19 you get a double echo where you can't really even understand. Let's keep going.

20  
21 Mr. Nosky stated let's try this. Is that better? Chairman Blackwell stated that it happens. Yes, go  
22 ahead. We will tell you if it's not good. Mr. Nosky stated all right, sorry.

23  
24 Mr. Nosky stated in regards to the existing building, there is quite a long history with the  
25 building itself. When we came to the project, we were kind of studying it for its possibility of  
26 being used in this way, and also that we didn't know enough about the building to really kind of  
27 pursue any kind of a design at that point. We did an extensive as built review of the building, and  
28 then trying to understand what we were seeing in terms of we didn't actually do exploratory  
29 holes, but we were able to get on the roof and move through the building through all levels,  
30 basement through the second floor of some of these pieces. You know this building is an  
31 expansive building footprint. It has courtyards that are part of this building. It is not a straight  
32 forward box by any means of the imagination. When we kind of started in on the plans, it really  
33 was kind of a learning process for us in terms of trying to gel a function for this plan. There is  
34 going to be extensive renovation to the building. We see only the bones of the building being  
35 pretty much adequate for what we want to try to get accomplished.

36  
37 Mr. Nosky stated that he was going to move this to Jeff, and hopefully he can work through the  
38 presentation plans, beginning with the existing site and through the floor plans. He will pick it up  
39 after that and move through the 3D renderings and the exterior design of the building. Mr. Nosky  
40 stated that he is going to turn it over to Jeff.

41  
42 Mr. Lietz inquired do you need his information as you have taken it from everybody else.  
43 Chairman Blackwell stated yes, please. Mr. Lietz stated Jeff Lietz, L-i-e-t-z, VP of Commercial  
44 Architecture for Charles Vincent George Architecture in Naperville. He has been with the firm  
45 for 24 years. Chairman Blackwell stated thank you. Mr. Hoffman stated that he made Jeff the  
46 host so that he can share slides whenever he chooses to.

47

1 Mr. Lietz stated okay. Can everybody see my screen? It should have the existing topographic  
2 survey on. Mr. Hoffman stated yes. Chairman Blackwell stated yes. Mr. Lietz stated that he  
3 knows that everyone is familiar with the site being at the southwest corner of 203<sup>rd</sup> Street and  
4 Governors Highway. The one particular aspect that this site brought to this team is that the  
5 building being so large is setback so far from the street. The parking lots are so far away from the  
6 building, we knew that we had to address that. The ring roads that we will call it, they are dead  
7 end at the western sides of the property, so it doesn't really allow for fire apparatus access, so we  
8 knew that we had to address that. The grading, as you can see from the topography here, drops  
9 off to the south of the property which we've delineated nearly .4 acres of wetland that we need to  
10 address. As you can see, the existing building, Mark had alluded earlier that it is not a box by any  
11 means. It does have very distinct open spaces within the facility. He stated large open spaces that  
12 would work nicely within any kind of a rehabilitation center. It does have a very large sanctuary  
13 that we are repurposing. It has existing residents' halls. We were able to use the bones of this  
14 building to put together a fairly comprehensive design for review tonight.

15  
16 Mr. Lietz stated moving on to the second slide, just a street view of the existing building from  
17 203<sup>rd</sup> near the entrance. As you can see, it is setback far from the curb. The thing that you notice  
18 within the trees is a garage structure. That's something that is deemed very much in any means to  
19 any kind of a use. There are a lot of existing trees. A lot of mature trees, that you will notice on  
20 the next slide we really had tried to utilize existing mature growth that can be saved to preserve  
21 it. These trees here are all existing, the bank of trees along the existing driveway that we are  
22 going to repurpose. We're not going to relocate our entrance along 203<sup>rd</sup>. We are just going to  
23 modify it to make it per code. We want to put up a new monument sign.

24  
25 Mr. Lietz stated that as you enter the site, you can see that we have the split driveway with a very  
26 nice landscape island that is centered on the entrance to the building. There have been a number  
27 of Site Plan iterations that we went through on this project. The number of components within  
28 the building and how to address them when we designed this site. One of the components that  
29 came in near the end was the detox element. We knew that we needed to address the detox  
30 patients. We know that we want to get them away from the existing main entrance. He stated  
31 have a dedicated entrance for them because everything is about the comfort of the people coming  
32 into the building.

33  
34 Mr. Lietz stated that you will notice on this corner here, in the northwest section of our building  
35 where the garage use to be, we've demolished that and put in a new two-story detox wing right  
36 here. When he goes through the plans, we will get to that in more detail. All of this is pavement  
37 that goes around. We have the new ring road that is going to be comprised of grass street pavers,  
38 able to sustain the immense weight of fire apparatuses. You can see the courtyards that we have  
39 detailed here with a number of plants, and pathways, and benches, and features. The whole idea  
40 here is to get people to enjoy nature, get to a location where they can sit, reflect, and relax, so  
41 that they can try to enjoy the treatment process. We all know that is a very rigorous process.

42  
43 Mr. Lietz stated that around the site you will notice that we have winding trails. He stated getting  
44 back to nature here and taking advantage of the immense site that we do have, and how far we  
45 are away from the major highways, we were able to include walkway trails. Physical activity is a  
46 big part of the treatment process, he stated and adding walking trails, and even sections, every so  
47 often we'll have a fitness zone. You can see these on many of the larger park settings within any

1 municipality. We do have garden plots. We've addressed the grade situation with retaining walls  
2 so we can get a nice, flat area for the residents here to have garden plots. We've got entrances  
3 into the sides of the building here for large group meetings, which he can get into a little bit later  
4 when we talk about the floor plans.

5  
6 Mr. Lietz stated that the other thing is the buffer between the Residential District on the east side  
7 of Governors Highway, and the relationship to the wetlands that we have on the southside of our  
8 property. This is a natural location to have a naturalized detention area. It is a very large one. As  
9 you can see, it is large enough that it's a nice buffer zone for the landscaping here that is along  
10 Governors Highway. All of the trails that are meandering will have outcroppings of like a  
11 community gathering area. It could be a fire pit. It could be a shelter. Everything is designed to  
12 provide a better environment for the patients that are staying here.

13  
14 Mr. Lietz stated that the next couple of slides, as we go through them, are again, the landscaping.  
15 They are enlarged versions of the plans. This is an enlarged version of our entrance. The existing  
16 trees that we are showing here. The monument sign and all of the landscaping that is put around  
17 it. The landscape median that divides the drive for both entrance and exits. You sort of see the  
18 outcroppings of where we have some of the gathering areas here.

19  
20 Mr. Lietz stated that the next slide goes into more detail on one of our courtyards. It's a very  
21 formal design with sidewalks, pathways, trees, bushes, benches, features, everywhere that  
22 somebody who is in distress can go out and feel a little bit of comfort as they sit inside their  
23 environment. The other areas on this plan as you can sort of see, a gazebo or something like this  
24 that can go inside of our areas for the shelter. If it is drizzling or raining, people don't have to  
25 just go inside. There are opportunities to stay outside.

26  
27 Mr. Lietz stated the next slide getting into more of the Geometry Plan, we do have preliminary  
28 engineering done. We've gone to Utility Analysis and Grading. But more importantly, this  
29 Geometry Plan sort of shows you how the new site relates to the existing site. You will notice the  
30 large parking lot that we are going to remove and plant grass instead of. You can see how the  
31 parking works itself in and around the building so that this isn't a typical building that has one  
32 big block of asphalt. We tried to work the parking in and around the building so it becomes part  
33 of the architecture, part of the site. He stated that you can see these lines here, these are the  
34 retaining walls that are going to flatten out this grade to allow more of a handicap accessible  
35 approach to our site. We've got the maintenance end to our project here. We are building a  
36 retaining wall here, so it is sort of sunken inside, because the last thing you want to see is  
37 delivery trucks. When you're in your residence here, you are looking out into more of a serene  
38 environment rather than a loading dock. You can more clearly see all of the pathways that are  
39 coming in and around the buildings.

40  
41 Mr. Lietz stated that the next slide is really just again, a record that we have done a Traffic  
42 Impact Study. He stated that Luay Aboona is available for questions if there should be any.

43  
44 Mr. Lietz stated that for the next slide we are going to get into the floor plan and the true  
45 architecture of our project starts. He stated to give a little background, the existing building is  
46 about 60,000 square feet, 65,000 square feet. This plan right here represents a footprint of about  
47 70,000 square feet. In that 70,000 square feet is about 15,000 square feet of courtyards. The idea



1 here is to take all of the different sections, and the interesting part of this is to create quadrants  
2 for the residents and the people that are staying here. It all comes in off of the entrance here. This  
3 is the main entrance which is the focal point as you enter the site and into our parking zone. It's a  
4 rotunda effect. As you can see, a rotunda effect is round and it has spokes to it. If you go to the  
5 right, it is more of the facility directors and the executive branch. He stated straight ahead is the  
6 reception and all of the admin. He stated to the left you can go and talk to the different directors  
7 and into the fitness area which is where the old sanctuary use to be, which is the three-story  
8 element, or the two and a half story element. We've created zones for yoga. We've eliminated  
9 the front door access here, so everybody comes in the front here. This is all for the residents. He  
10 stated small meeting rooms. You will notice that there are meeting rooms throughout this project.  
11 That is important so the people can be comfortable in any area that they are in. He stated a lot of  
12 gathering spaces, washrooms are everywhere. We have a large group room here where we can  
13 bring in an outside speaker to speak to the groups. Large group rooms and meditation rooms, and  
14 miscellaneous offices for the people who work here. A kitchenette and lounge for the actual  
15 tenants, or the residents to use.

16

17 Mr. Lietz stated that the plan gets into the residential area. He stated that you will notice that he  
18 is purposely going around the building to get to the detox in the end. We have 100 bed facility  
19 for non-detox. These are sections of pods, around 18 beds per pod. He stated that within each  
20 pod you've got your own shower and toilet facilities. You have your own dirty laundry and clean  
21 laundry, which is part of the Administrative Code to provide those facilities. We've got elevators  
22 at existing locations, but we are going to need new elevators per code. You notice that each of  
23 the rooms are mostly two resident rooms which is important in the whole treatment philosophy.  
24 Each of the pods has its own group room and a refreshment center. You will notice here the areas  
25 that are hashed, these are additions. We are able to in-fill where there use to just be an enclosed  
26 breezeway call it from one area of the building to the other area of the building. We were able to  
27 enclose with 66 and a half feet and get 10 extra beds. Again, the areas are all situated around the  
28 shower and toilet facilities for the individual residents.

29

30 Mr. Lietz stated that there is a central gathering area here, which people can converge on and  
31 spend time together in. There's an existing kitchen that will be fully renovated to bring it up to  
32 code. A large dining hall that can seat 70 people. Granted there are 100 people here, so we know  
33 that is going to happen in shifts.

34

35 Mr. Lietz stated that the maintenance wing is away from everybody that is a resident here. You  
36 have the employee lounge, offices, maintenance director, chef, and stairs that will go down into  
37 the maintenance garage and workshop, all separated from the patients receiving treatment.

38

39 Mr. Lietz stated as you travel along to this area here, which is the northwest corner of our site,  
40 which used to be the garages, we've torn down the garages, and it is a hashed area again. We've  
41 created the two-story detox wing. There are 20 beds in the detox. There are seven on the first  
42 floor and 13 on the second floor. The total number of beds for the entire facility is 120. Detox  
43 has its own dedicated dining, meeting, showers facilities, clean laundry, dirty laundry, and even  
44 triage, medical evaluation and an ICU pod. He stated strategically placed nurses' stations among  
45 the area is very important. He stated separating detox from the executive area is a large group  
46 room, where you have a two-sided fireplace that looks out into our courtyard here. If we count  
47 these, we've got five group rooms all of varying sizes that are able to hold small groups and

1 large groups for any kind of counseling or group sessions that the doctors and counselors want to  
2 hold.

3

4 Mr. Lietz stated as we go into the Second Floor Plan, we've also got the Basement Floor Plan  
5 down there. He will go into the Second Floor Plan in detail now. We have 13 detox with the  
6 shower and lavs, and again dirty laundry and clean laundry, nurses' stations, small group rooms.  
7 He stated part of the architecture of this as Mark will go on when he talks about the exterior  
8 architecture, that you can see this addition truly makes sense in creating a great atmosphere for  
9 our patients. He stated the conservatory, the smaller of the three courtyards, we are planning to  
10 put a conservatory roof on it so it becomes a four-season space that you can enjoy nature in.  
11 Obviously, sunshine. He stated call it an area where you can enjoy the plant life in the dead of  
12 winter.

13

14 Mr. Lietz stated the fitness area on the Second Floor, we have more offices for the trainers,  
15 activity rooms. If you have been in the sanctuary, it would be where the choir loft is. Then  
16 obviously, where there is an existing Second Floor on the far south of the building, we've  
17 fashioned that out with a 20-bed hall for any kind of patients. The idea here is that everyone of  
18 these pods as he talked about earlier, has a space for any handicap individuals, so that we are not  
19 turning away anybody.

20

21 Mr. Lietz stated that the basement is really going to be the maintenance area. There are large  
22 boiler rooms. If you were in the basement, that large boiler room looks like it was out of a Walt  
23 Disney cartoon. It is huge. It doesn't work any longer. We are going to modernize the entire  
24 place. There are large laundry facilities. Every resident is required to do their own laundry.

25

26 Mr. Lietz stated that we have the large mechanical and sprinkler room, which now has a  
27 Sprinkler System in it. He guesses it was never commissioned correctly, so we know that will  
28 probably be redone. That in a sense, is the architecture of the building and floor plan model.

29

30 Mr. Lietz stated that going onto the next views, he is going to turn it back over to Mark, as he  
31 talks about the exterior architecture and how we've designed it.

32

33 Mr. Nosky stated hello again, this is Mark Nosky, and he is going to talk a little bit about the  
34 renderings of the building, and trying to give you a little better idea of the building because it is  
35 too hard to kind of get across in a two-dimensional type view. This 3D Model illustrates the  
36 dynamic layout of the building and it kind of uses the existing bones of the building too. As he  
37 goes through these renderings, hopefully he can show you the ins and outs of how our Plan  
38 comes together with the exterior. This particular rendering is kind of coming up the main  
39 entrance drive. It has this median that runs through the middle of those drives, kind of leading  
40 towards the drop-off area in front of the building. Again, in the 3D renderings we don't have the  
41 amount of landscaping that was indicated in the landscape drawing. Some of these green areas  
42 have additional trees and plantings in them that aren't really reflected in this 3D Model. The  
43 model itself, basically kind of gives you the structure of the building and the ins and outs of that.  
44 Hopefully, as we kind of work through the design of the landscaping that will only enhance this.  
45 Essentially, this is a sketch up model of the 3D view.

46

1 Mr. Nosky stated that what you are looking at when you look at this view coming off of 203<sup>rd</sup> is  
2 on the right-hand side, the detox area which is kind of represented with the two-story, white  
3 verticals, tilted columns in brick. He stated that to the very right is a one-story piece that ends up  
4 being the entrance for the detox and drop-off area. In between the monument sign that you see at  
5 the end of the drive there and before you get to the entrance, there's a wing that connects these  
6 buildings. This is again, where we've taken probably where that group of windows is, to the  
7 right-hand side of that sign is an area where we're rebuilding basically the facade, as we have  
8 taken away the garages as we have noted before, and trying to implement a two-story wing and  
9 its function, which is kind of a nice asset to the other side of the building which is where the  
10 sanctuary is.

11  
12 Mr. Nosky stated on the left-hand side is the old sanctuary. We're looking at this building as  
13 being basically a pre-cast, and face brick building with window insets. We are going to maintain  
14 some of the pre-cast that's there in its original form. And then taking this brown and kind of light  
15 brown brick and re-staining the brick to a lighter color, mainly kind of white where columns  
16 exist, and trying to re-emphasize how they pull out from the facade and it gives you kind of a  
17 rhythm down the facade as well. In areas where you see gray, or light gray, that is meant to be  
18 used, at least on this front facade, large format panels, tile panels to in-fill those areas. As we get  
19 around to the inside of the courtyards, and the other sides of the building, then we will probably  
20 go to kind of a staining of brick as well with large format tile to kind of give that some character.

21  
22 Mr. Nosky stated that one of the things that you are seeing right at the end of the median is really  
23 the main drop-off for the building. It has an extended canopy. You will see that in the following  
24 renderings. He stated that to the left, you are basically seeing the existing structure and the tower  
25 element, kind of maintaining the standing seam roof and the clay tile roofs, and as Jeff had  
26 mentioned, kind of filling in the ground level doors to that sanctuary and kind of filling that in  
27 with window groups now. He stated between the main entrance and that vertical tower on the  
28 left, you see the conservatory area that gives us that four-seasons room that we need.

29  
30 Mr. Nosky stated to hold on a minute. He thinks that he covered everything that he needs to  
31 cover here. The next rendering is taking another shot more towards the detox side of the building  
32 on the right. We have basically put a dimension to the overall height to this piece. It is about 27  
33 feet in height. It has a pitched roof to it, some white columns that are two-story that are tilted.  
34 You can't really see that in this particular view. It also picks up at the main entrance to the center  
35 which is to the left, and it basically has a prefinished metal canopy to it, kind of protection from  
36 the elements as you are coming in the main door. All of the things that we had talked about  
37 before in terms of the conservatory and the existing materials, you can see how the white of the  
38 stained brick helps to re-emphasize kind of what existing bones the building really has today.  
39 They become kind of the features for these outdoor courtyards that exist. They are pretty  
40 handsome, especially once we rework the interior landscaping to those areas. They will be  
41 exquisite places.

42  
43 Mr. Nosky stated that this view is on the sanctuary side of the building. It has multiple door  
44 entrances, but one that we basically saw as an asset for kind of large, outpatient groups is where  
45 the lady is standing in front of the doors underneath the canopy. Again, this canopy item is  
46 basically similar to what you see at the main entrance to the facility, downscaled in size. It  
47 basically functions as the front door for that outpatient area. Behind that is the large room for

1 events like that. Just beyond that, where the clay tile roof is here, that's kind of where the fitness  
2 and activity rooms, and Phys Ed offices and stuff like that are in. He stated to the left is another  
3 entrance that is used more for more maintenance, in the sense that it leads to restroom areas and  
4 the back of house functions for that sanctuary space.

5  
6 Mr. Nosky stated that this is an interior view of the main entrance coming down the main drive.  
7 He stated that looking out those windows, you are looking out towards 203<sup>rd</sup>. You would have  
8 the main entrance vestibule. This is the lounge and waiting area. It basically functions as a hinge  
9 point for going towards directors' offices or administration, reception, which is on the right-hand  
10 side. Also, on the right-hand side looking into the area of the conservatory gives you direct  
11 access to that. We are picking up some natural light there, as well as the front entrance where we  
12 are trying to use more two-story windows, and on the left-hand side, basically kind of leading to  
13 the conference room that's in plan.

14  
15 Mr. Nosky stated again, this is kind of a one and a half story space, helping to give information  
16 to people coming into the center, and also the main reception. It acts as kind of a lounge, waiting  
17 area, and gathering of information as we start to process customers coming in.

18  
19 Mr. Nosky stated that the next rendering is how we see the typical interior room layout of each  
20 two-bedroom unit. Each bedroom has two single beds with cabinetry between them, more as an  
21 element to seclude from the other tenant in the room. It has natural light. Further, we are reusing  
22 the windows that are there presently. It has its own interior sink and vanity area that you could  
23 have cosmetics and stuff like that. This center piece ends up as closet space for the tenants as  
24 well. We have done other views of this. He has kind of cut this down. There are a few other  
25 views that we have of these interior spaces. He stated just trying to understand how they will  
26 function. As we were working through the plan, trying to figure out some of the lessons that we  
27 have learned from other locations that we visited, and how that could apply to this particular  
28 facility.

29  
30 Mr. Nosky stated that the last view of the slides here, basically shows you more of an overall. It  
31 extenuates the interior courtyards that you see. It also shows you where that drop-off area for the  
32 detox entrance is on the right-hand side of the plan. The parking, that is pretty much strategically  
33 placed to kind of allow drop-off area, and you could park in that area easily enough that you are  
34 not parking in a remote parking lot. You can see how the ring road kind of changes as it moves  
35 around the building. The conservatory is really nestled in next to the old sanctuary space. That  
36 allows us to really kind of play off the form of the roof that makes up that portion of the  
37 building. He stated giving the nature of the site, and how this building sits, it has a lot of  
38 topography to the site as well. Areas where the maintenance garage is, kind of in the center back  
39 of this rendering, basically is an area that is more secluded. It is harder to find. This is the main  
40 view that you would see coming from 203<sup>rd</sup> or Governors Highway knowing that the detention  
41 area is on the left-hand side.

42  
43 Mr. Nosky stated that's what he has in terms of the overall rendering. He doesn't know how you  
44 could basically kind of show this building any better in terms of three dimension, because a two-  
45 dimensional view just couldn't tell the story that needs to be told here. If you have questions in  
46 regard to the building, we are trying to reuse basically the existing brick work, face brick that is  
47 on the building now, using that and the pre-cast elements that are on the building, and bringing

1 new glass elements onto the facades, two-story in some positions, and the conservatory as well to  
2 kind of bring natural light in. That's what he has got. He will turn this back to Andrew and Kelly  
3 to sum up.

4

5 Ms. Mottl stated thank you, Mark. Thank you, Jeff, and to your entire team. You guys have done  
6 a magnificent job of showing us the potential of this property and really bringing it to life for us.  
7 You have taken what is essentially, just an array of buildings that are in total disrepair and  
8 showing us what it can be and transforming it into something that will be a source of pride to the  
9 Village. Thank you very much for all that work. It's truly beautiful.

10

11 Ms. Mottl stated on that note, she is going to pass this over to John Vrba who is our COO. He is  
12 going to talk about operations and what is going to happen on the inside of this building.

13

14 Chairman Blackwell asked Mr. Vrba to spell his last name please, for the Court Reporter. Mr.  
15 Vrba stated yes, he sure can. John Vrba, V as in Victor-r-b as in boy-a. Chairman Blackwell  
16 stated thank you. You may proceed.

17

18 Mr. Vrba stated let me first of all, thank you for hosting this tonight. Obviously, it's much better  
19 than listening to the Presidential Debate. We will take this above that any day. He stated to Mark  
20 and Jeff, he thinks everyone on this call can see an unbelievable rendering that is still up on the  
21 screen of what we are looking to build and create in Olympia Fields.

22

23 Mr. Vrba stated a little background on himself. He has a Masters in Counseling/Psychology at  
24 Benedictine University. His early career he spent two years as an Addiction Therapist at one of  
25 the most rigorous and tough areas of Chicago at Loretto Hospital on the westside. As a young  
26 man bringing in his Masters Degree into that area, in his expertise in Addiction Therapy, and all  
27 he learned throughout his undergraduate school which was the College of St. Francis in Joliet,  
28 took numerous addition courses and then later went on to get his Masters as he stated. While  
29 working on his Masters, and as an Addictions Therapist at Loretto, it's kind of when your books  
30 come to life.

31

32 Mr. Vrba stated and what you see there is the rendering of the exterior and the interior of the  
33 building. What our team brings as COO of RoseHeart Renewal Center is the nuts and bolts, the  
34 backbone, the compassion, the empathy. There are a lot of people, when he says a lot, 12% of  
35 addicts across this country are getting treatment, and only 5% of people who are alcoholics are  
36 getting treatment. That's sinful. In our state it is rampant, as well as the increase in opioids.

37

38 Mr. Vrba stated that as he began his career at Loretto, he wants you to get a feel for who he is  
39 because he hopes to become a part of your community whether we operate this facility, or he  
40 assists in hiring other people who are going to operate this facility. As Henry Ford stated years  
41 ago, "I know healthcare." He started with Loretto back in the day there, and have a lot in  
42 common with those patients he was treating. He can remember one gentleman right now clear as  
43 day, and the second time he relapsed he was on my team, he had to get something in common  
44 with him. As you can see on Mark and Jeff's renderings there is an athletic area, an area where  
45 people can become physical. He stated and just being able to start a Basketball Program with the  
46 addicts at that time did wonders. He really believes that component alone helped cure some  
47 people.

1 Mr. Vrba stated that there are so many different facets of alcohol and substance abuse we can get  
2 into later on. He wanted to share just that one component because as a therapist, and as the  
3 therapists we hire on for our organization, you have to have a bonding with those patients you  
4 serve. That's how it began.

5  
6 Mr. Vrba stated from there he went into Skilled Nursing and Rehabilitation. It will be almost 28  
7 years next year. As stated earlier, Kelly mentioned that he is the COO and one of the owners of  
8 Burgess Square, which is in Westmont, Illinois. We are a five-star community. When he says,  
9 "five-star," CMS, which is the corporate governing body out of Washington, we are a five-star  
10 out of five-stars in all categories. The most important category is staffing. He stated with staffing  
11 comes the outcomes that we produce.

12  
13 Mr. Vrba stated from there, he is extremely excited to say we are one in four facilities in the  
14 United States of America to obtain the Malcolm Baldrige Gold Award this year. It is the most  
15 stringent guidelines, systematic based focus that a nursing facility can obtain. Again, he wants to  
16 restate, we are one of four in the United States to obtain that award, and the first ever in the State  
17 of Illinois. That's what we have planned for RoseHeart Renewal Center. We want to become the  
18 preeminent provider of addiction therapy.

19  
20 Mr. Vrba stated that he can get into their business model now. We are looking as of now to do an  
21 all-women's model. That could change. As of now, we want to become the preeminent women's  
22 model in the United States.

23  
24 Mr. Vrba stated that on top of Burgess Square Healthcare Centre, he is also a co-owner of Jordan  
25 Healthcare Group. We manage and consult facilities to assist them in their operations. He stated  
26 for example, with the COVID pandemic we live through now, it's been one of the most awful  
27 times in probably all of our lives. We have assisted a facility to become COVID free. We have  
28 cured numerous patients, put together incredible policies and procedures. He stated just to take  
29 out the garbage alone in a COVID unit, it's 15 steps. He won't get into those 15 steps. We are  
30 very detail oriented. We are very focused. And we again, with the Henry Ford theory, we  
31 surround ourselves with the best people. In the Jordan Healthcare Group, we have Internal  
32 Medicine, Geriatrician, and we have Nurse Practitioners. One of the most brilliant women he  
33 works with Kristin Turneraz who has an MBA and an MPH. Just phenomenally, intelligent  
34 women, MSWs, CPAs. The reason that we came up with the Jordan Healthcare Group, is we  
35 believe and maintain that we have a Michael Jordan in every area. So, if we have an issue, none  
36 of us know it all. He certainly doesn't know it all. He knows operations and healthcare he feels  
37 as well as anybody. He also knows that he has to surround himself with wonderful people. Mr.  
38 Vrba stated number one when we open RoseHeart Renewal Center, that would be our medical  
39 director, which we can get into later on.

40  
41 Mr. Vrba stated that he is also married for 26 years to a beautiful wife and has two boys in  
42 college, which is obviously trying during these crazy COVID times. That's kind of his  
43 background in a nutshell. He wants to hit upon two or three more points, and then he wants to  
44 open it up for questions to all of you on the screen.

45  
46 Mr. Vrba stated that he, along with Mark and Jeff took an extensive day and went up to Wayzata,  
47 Minnesota, if he is saying the name right. It is about 30 minutes outside of Minnesota. We visited

1 “The Retreat,” which John Curtiss, one of the preeminent providers of addiction therapy in the  
2 country owns and operates. It was at that point that Mark, Jeff, and Mr. Vrba created what you  
3 saw on the screen. You couldn’t see the creation of inside the building. There they had women  
4 on one side and men on another. It was a co-op agreement where you had some men patients and  
5 some women but they were separated. The beauty of the facility, the yoga studio, the athletic  
6 area, the quiet rooms, you could see it was an environment that was definitely something that  
7 was creative, passionate, and was an environment setup for people to rehab in. That day is what  
8 we want to bring to life.

9  
10 Mr. Vrba stated number three, Philosophies, and Mission Statements, and Vision Statements, he  
11 thinks all of you men and women on the screen have listened to Mission Statements. What we  
12 say is we do everything everyone else says they are going to do, and his philosophy his entire  
13 career has been two statements: Number one is, if you take care of the residents, patients,  
14 families, and staff, the rest will take care of itself. So, if and when we get approved to build this  
15 beautiful facility, that’s what we will do. We will staff it with the best people, and we will take  
16 care of the patients in that facility and we will take care of their family members. The second  
17 part of that philosophy is simple. It is one word and it is “Care.”

18  
19 Mr. Vrba stated in the addiction realm you have to be compassionate. You have to build empathy  
20 with your patients. You have to empathize because they are going through a really hard time and  
21 most people don’t want to seek that therapy. He doesn’t know if you have seen online, but he can  
22 show you a little sheet that he brought up. The State of Illinois even has something now where  
23 you can go online and just click “text,” believe it or not, that’s what it has come to, you can just  
24 text online if you need care. So, we believe there are going to be more and more people texting  
25 the help line in Illinois, and we want to be there as a venue to help cure those patients. He stated  
26 next is “Respect.” He thinks that is something, and he is going to try to put himself in some of  
27 your shoes. Addiction is a disease, like diabetes or cancer. He’s not somebody that’s making a  
28 commercial here. But it is a disease and those people need help. They aren’t criminals. He has  
29 been around people of addictions and substance abuse years and years. And not once has he  
30 come into an argument, a fight, or anything of that nature in his career. He is sure those things  
31 happen. We will prepare for those. We have to have Emergency Plans, Safety Plans, Abuse and  
32 Neglect Plans. We have to do everything that the Illinois Administrative Code tells us to do.  
33 Typically, we don’t just meet that code, we’ll exceed that code. Lastly, every day if we get into  
34 your beautiful community we will strive for excellence. There isn’t a day in his 30-year career  
35 that we haven’t tried to get better. He thinks if anything shares his background, if you look up the  
36 Malcolm Baldrige Gold criteria, he thinks that speaks for itself. Obviously, he can just be a man  
37 here with a sport coat on telling you what we are going to do. But we produced the outcomes in  
38 the last 30 years, and that’s what we would like to do at RoseHeart Renewal Center.

39  
40 Mr. Vrba stated with that being said, before he turns it over to you for questions, one, and if not  
41 the most integral positions obviously in the community will be that of the medical director. He  
42 meets with his medical director weekly. He has lunch with his medical director. He tours with his  
43 medical director. Our medical director knows our staff. He or she is vital in our organization. He  
44 or she will be the backbone of the care that is provided, because he or she is going to be the one  
45 directing all of the care. Thank you for the opportunity to present. He wants to open up to  
46 questions. He is sure there are many. Again, thank you.

47

1 Chairman Blackwell thanked Mr. Vrba. Chairman Blackwell stated before you get into  
2 responding to questions, he thinks it is appropriate for him to turn to Mike Hoffman from Teska.  
3 We greatly appreciate your presentation and your words. Typically, what we will do at this point  
4 is to kind of go back to the front of your presentation whereby the various architectural structures  
5 were exhibited, the building, the walkways, and that technical aspect of it that deals with the  
6 actual structure of the facility.

7  
8 Chairman Blackwell stated that first he wants to ask Mike Hoffman to give him his comments.  
9 Then he will turn to John McDonnell who is our Building Commissioner, who you probably had  
10 some contact with and interactions just to get your Plan developed. He stated, Mike.

11  
12 Mr. Hoffman stated thank you, Victor. Mr. Hoffman stated there is a lot involved in this project.  
13 Going back to the initial comments, they are asking for two things: 1. Rezoning to a Medical  
14 District. As you probably saw with his memo, he is supportive of that. He thinks it makes sense  
15 as a Medical Use in this area to rezone the area for Medical. We showed that in the  
16 Comprehensive Plan. He doesn't think, at least from his eyes, that is not a huge debate.

17  
18 Mr. Hoffman stated the debate is whether this is the right Special Use and appropriate Special  
19 Use, and whether it fits. He thinks that is what we need to drill down on and spend most of our  
20 time talking about. There are a lot of issues involved with this thing. He will say starting out, the  
21 Architectural Plans are attractive and beautiful. He thinks they have given a lot of thought to the  
22 facility and how to blend it with the character of the existing building and blend in the new  
23 structuring. He will also say that he thinks the Landscape Plans are well done as well. He thinks  
24 that they are attractive and the materials are nice. They do provide a variety of spaces for people  
25 to sit in small groups, as well as be alone and spend some time meditating, or praying, or  
26 whatever they choose to do. He thinks that those are all pluses for this.

27  
28 Mr. Hoffman stated that we did kind of go through all of the different components that were  
29 submitted. Mr. Hoffman inquired of Chairman Blackwell whether or not he wanted him to start  
30 going through questions or not. His biggest questions were really regarding the Market Impact  
31 Analysis and why they chose the comparables they did. He thinks a lot of the residents are going  
32 to be concerned about the impact of this project on the surrounding neighborhood. He thinks it  
33 would be helpful for them to speak to that issue, and probably talk a little bit about security and  
34 how that will operate as well. He is sure that they have given some thought as to how that will  
35 operate and function. He thinks for the benefit of the residents those might be good questions to  
36 start with.

37  
38 Chairman Blackwell stated okay, before we go back to the questions that you specifically may  
39 have, Mike, from the residents, he is going to ask John McDonnell to give us his perspective as  
40 our Building Commissioner on structural issues and those types of things before we go back to  
41 Teska for comments.

42  
43 Mr. McDonnell inquired on structural issues. Chairman Blackwell stated yes. Just in terms of  
44 your expertise as Building Commissioner, what's your perspective on this particular Plan that  
45 they have presented.

46



1 Mr. McDonnell stated well their plans for the building, like Mike said, they are very attractive  
2 plans. He doesn't think the plans are the topic of discussion. The renovation, naturally looks  
3 great. They spent a lot of time and money to put those together. He thinks it is quite a  
4 challenging building for what they want to do with it, and to bring it up to today's standards and  
5 today's Building Codes. That is going to be a large venture for sure.

6  
7 Chairman Blackwell stated sure. Mr. McDonnell stated that there are a lot of problems with the  
8 building. There has been for many years. The building, he doesn't think even at one time the  
9 building was ever fully occupied as its previous use. He thinks a lot of those rooms were there.  
10 He doesn't think they were ever used. They may have, maybe 80, 100 years ago, he doesn't  
11 know. Chairman Blackwell stated sure. Mr. McDonnell stated but definitely not in the past 30 or  
12 40 years he could say for sure.

13  
14 Chairman Blackwell inquired how old is the building. Mr. McDonnell stated that he doesn't even  
15 know how old the building is. Maybe they do. Maybe they did the research to find out how old  
16 the building is. He doesn't even know.

17  
18 Mr. Lietz stated that the drawings they got show details from 1960. Mr. Hoffman stated that he  
19 has seen something that said 1940. Chairman Blackwell stated that he thinks that 1940 might be  
20 more accurate. What is its current use? What is going on now with the building?

21  
22 Mr. McDonnell stated the building right now, it has no Certificate of Occupancy right now. The  
23 building is supposed to be vacant. The church is using it for some minor services, and he thinks  
24 they are answering phones there. He really is not sure what is going on inside the building right  
25 now. They don't have any type of Use Certificate to be even in the building. Just generally, a lot  
26 of problems with the building. Chairman Blackwell thanked Mr. McDonnell. He stated that he  
27 appreciates his perspective and opinion on those matters.

28  
29 Chairman Blackwell stated that before we go back to Mike Hoffman, he thinks it is appropriate  
30 now for preliminary questions from the Commissioners. He would like to start in this order. He  
31 would like to start with Commissioner Betts. Next, Trustee Pennington, followed by  
32 Commissioner Green, then Commissioner Jones, then Commissioner Bradshaw, and then  
33 Chairman Blackwell. Commissioner Blackwell inquired of Commissioner Betts if she would  
34 start with preliminary questions that she might have. He stated after we get through, he doesn't  
35 know if we will get through that tonight, but assuming we do, we will go back to Mike Hoffman  
36 for some of the public questions that may have been presented or addressed.

37  
38 Commissioner Betts thanked Chairman Blackwell. Commissioner Betts stated that her questions  
39 are based on the material that was sent out. She really does appreciate the presentation. The  
40 renderings are beautiful. She stated for a long-time resident of the Village it is sad to see the  
41 building in such disrepair. It is dilapidated, even the grounds are being let go. Anything that  
42 could be done with the building and blend into the surrounding community would be beautiful.  
43 Her questions are more about the program in itself. It was mentioned that this would be a female  
44 only program, and from the materials, that it would be inpatient only. But then she also heard  
45 some conversation surrounding outpatient. Can somebody just clarify that it is a female only,  
46 inpatient program?

47

1 Mr. Andrew Kolb, K-o-l-b stated that he is one of the principles of the Applicant. At this time,  
2 our business model is to have an all-female patient base. We are not interested in having that be a  
3 condition of the Special Use. We want to be fungible in our business plan. Our original business  
4 plan, is having looked at the market we think there is definitely an opportunity for an all-female  
5 facility to be a destination for daughters, and wives, and women who would prefer to have a  
6 same sex therapy situation. We think there will be a big demand and a big draw for that. We  
7 can't agree to that as a condition of our Special Use. He doesn't think such a condition would  
8 even be permissible by law and some of the other regulations in the Illinois Administrative Code.  
9

10 Mr. Kolb stated as far as outpatient services, we are not proposing an outpatient methadone  
11 clinic. He stated no outpatient where you stop by and you get some sort of prescription, or you  
12 get some sort of a methadone administrative dose and then leave. We are strictly an inpatient,  
13 residential alcoholism and substance abuse facility. That is going to be the extent of our business  
14 plan.  
15

16 Commissioner Betts stated that the second question is around your marketing. Will this be  
17 marketed in the Chicago area, or will it be marketed nationwide?  
18

19 Mr. Kolb stated that we had a lot of discussion in a lot of meetings with different groups over the  
20 past four or five months while the COVID has sort of delayed everything. Right now, we've  
21 actually drawn what we think the target market will be in the Chicago area, the suburban area all  
22 the way west. Obviously, if the standard of care that John describes brings us to the level of a  
23 Mayo Clinic or something in this arena, we certainly could draw nationally. While we think  
24 Olympia Fields definitely has a community to serve, like any community, he thinks every  
25 community is in need of this kind of care on a growing basis. He thinks if we provide excellence,  
26 he thinks they could be a draw.  
27

28 Commissioner Betts stated that question number three would be you mentioned that it is a  
29 private pay kind of facility, where patients, their own insurance companies, private insurance  
30 companies, or the patients themselves will pay for it. Can you confirm that her understanding is  
31 correct there? So, it will not be any from government, or somebody needs to be directed to your  
32 facility because they have gotten into difficulty with the law, or anything else, and they are now  
33 sent to your facility? So, this is a choice only.  
34

35 Mr. Kolb stated right. He guesses that he will start a couple steps back from that question to  
36 approach it. We've got a building there with a non-Code Compliant Fire Suppression System  
37 that has asbestos. We walked a structural engineer through that building who has also done  
38 \$20,000,000.00, \$30,000,000.00 construction projects and worked with us on those in the past.  
39 We are looking at about \$179.55 a square foot to renovate this project at a total cost of  
40 something around \$15.3 million bucks, plus the land acquisition in order to get it going. So, you  
41 know, we will not survive from a business standpoint very long as a Medicaid or Court directed  
42 facility. We can't sit here and discriminate against Medicaid patients. He believes that we can  
43 with respect to Court Administrated patients. As far as Medicaid there are rules with involuntary  
44 discharge and things like that. Our primary goal is to identify those patients who are going to pay  
45 out-of-pocket, or we will accept the prevailing rate from Blue Cross/Blue Shield or one of the  
46 big managed care organizations that have some per diem rates. We have done a lot of research to  
47 determine what the average reimbursable rate is to private health insurance for a night in detox.

1 That rate is quite different than at night just in general for general therapy and care. There are  
2 two different sort of acute levels that we are dealing with. When you do the math on that, he  
3 thinks we can support profitably our construction build-out costs and our interest carry on our  
4 initial credit facilities so we get the correct capital stack.

5  
6 Mr. Kolb stated to answer your question in a round about way, our goal is private pay and group  
7 health insurance. He stated that more and more group health insurance policies are covering  
8 substance abuse and alcoholism in their policy. That would be our primary market. We would  
9 screen patients based on the eligibility in Section 2060 of the Illinois Administrative Code from  
10 the Department of Human Services that has specific sections regarding bringing a patient in. He  
11 thinks when we do the patient screening process that's outlined in the Illinois Administrative  
12 Code, we are also going to be screening the patient financially to make sure that they can afford  
13 the care and have a source of payment, or else we just are not going to last long in the  
14 marketplace.

15  
16 Commissioner Betts inquired what is the average cost for the average treatment. How much  
17 would a patient or an insurance company pay? You sound like you are a for-profit model.

18  
19 Mr. Kolb stated yes, definitely we are a for-profit model. The average reimbursement rate, we  
20 looked at it about a year ago when this process started. We determined that through extrapolating  
21 data from managed care through Rosecrance. He has been General Counsel for a managed care  
22 organization in Chicago, one of the larger ones, for 15 years before it was sold. He understands  
23 those reimbursement rates. He stated without going on the record specifically, it is something  
24 north of \$700.00. Maybe \$650.00 to \$700.00 for acute detox care per night, per bed, per patient  
25 would be that reimbursement rate. We are building off of that model. There's a possibility our  
26 business model would change and we would come back and ask for additional Special Uses for  
27 perhaps some other types of care that would be useful in the building, behavioral health, or  
28 assisted living, or something like that. Right now, we think there's a growing demand as Kelly  
29 pointed out early on, for alcoholism and substance abuse. So, we are going to stick with that.

30  
31 Commissioner Betts stated that she has just one more question if she may, Victor. She knows  
32 that there are many more, but this is around the partnership with Franciscan Health who is just  
33 across the street, or down the street from your proposed facility on it. Are you planning to enter  
34 into any arrangements with Franciscan should the need arise for one of your patients, or how do  
35 you view that?

36  
37 Mr. Kolb stated that your code has a requirement in the Special Use that you affiliate with, he  
38 thinks the terminology is an underlying medical facility. We are a little unsure how to interpret  
39 that. We assume that means Franciscan. It doesn't say. It doesn't define "Underlying." It uses the  
40 word "the" though so he assumes you are referring to Franciscan. We have not reached out. Your  
41 last Applicant with a similar project was denied as he understands it. We want to make sure we  
42 actually have a zoned project that's viable before we sit down and meet with Administration over  
43 there and try to put a synergy together. We've also made some comments about that requirement  
44 in our Application. He stated but to-date, no, we have not filled any sort of formal arrangement.

45  
46 Commissioner Betts stated thank you for answering my questions. She will leave security  
47 questions to the rest of my Commissioners.

1 Chairman Blackwell stated thank you, Commissioner Betts. Trustee Pennington would you start  
2 with your preliminary questions, please.

3

4 Trustee Pennington stated thank you, Mr. Chairman. Let me say from the outset that  
5 Commissioner Betts took all of my questions. That's okay. He thinks that he can bring up a  
6 couple of others.

7

8 Trustee Pennington stated that he is looking at the materials that were presented to us early on.  
9 One question that came to his mind immediately was the fact that your materials state, and you  
10 mentioned it this evening during the course of your presentation, that this will be a 120-bed  
11 facility. Is there any chance that this number could increase over time? He inquired go from 120  
12 to say 150.

13

14 Mr. Kolb stated well, is there a chance. He thinks it would require them to come back through  
15 zoning and expand the existing Special Use we are asking for. Trustee Pennington stated that's  
16 true. Mr. Kolb stated that what we are asking for is approval for a 120-bed facility with the blend  
17 of detox and standard rehabilitation that we outlined in the Application. Mr. Kolb stated that he  
18 thinks your Code has minor changes to Special Use and major changes. He stated maybe he  
19 would defer to Teska on this one. He thinks if we had to propose a different use that expanded  
20 the Special Use, he thinks we would have to come back and ask for approvals for them.

21

22 Mr. Hoffman stated yes, you are correct. Trustee Pennington stated your investment in the  
23 property is substantial. Can you favor me with how you propose to finance this project?

24

25 Mr. Kolb stated well, we haven't put together our capital stack. Normally, what we would do  
26 would be if the property is zoned and is successful, we're certainly not going to go invite equity  
27 into our group before that happens. But we would invite some equity participants. Let's say the  
28 total cost of the project hypothetically, is \$18,000,000.00 to \$20,000,000.00 bucks. We would  
29 raise \$3,000,000.00 or \$4,000,000.00 from some additional members into our group who would  
30 be investors into the LLC. And we would then take it to different banks and with the projected  
31 financials be able to get a construction loan and an operating loan, with the idea of reaching  
32 project stabilization maybe within 24 months. He stated with a build-out period of maybe 15  
33 months he thinks would be a good estimate start to finish from the Grading Permits all the way  
34 through a final CFO unconditionally would be about a 15, 16-month process. He thinks from  
35 there you would need some interest carry to be able to get it all the way, maybe an interest only  
36 loan all the way through the end of the first two year stabilization, and then with some sort of  
37 debt to equity criteria that you would make after year two, and then you put some more  
38 permanent financing in place.

39

40 Mr. Kolb stated that if you think you can take 100-beds and get a mixed revenue of \$300.00 or  
41 \$400.00 a night, and for detox, \$600.00 or \$700.00 per night, and multiply that out, and bill it  
42 against your operating expenses, you can cut that debt down fairly quickly over time.

43

44 Mr. Kolb stated that we think there is definitely a business model that works. We went through  
45 the same analysis in St. Charles and had some success there. Yes, the idea is to get it entitled first  
46 and then really drill down and see what our financing looks like. He stated financing  
47 arrangements change daily. He stated with the politics, interest rates are good now, but he

1 doesn't know what they will be after the election, where things are headed and what our timing  
2 is.

3  
4 Trustee Pennington inquired how long did it take to fund the St. Charles project. Mr. Kolb  
5 inquired how long did it take to fund. Trustee Pennington stated yes. Mr. Kolb stated that project  
6 was actually sold straight out to another operator, Recovery Centers of America, who bought the  
7 entire project straight out from under the entitled piece of land based on all the criteria. He thinks  
8 that just opened. How long does it take to fund? We've got access to different investors that if  
9 we can show them the right returns would invest in a project like this. It has a good feeling to it  
10 too. It really helps society. A lot of people like the idea of these types of projects. It's  
11 unfortunate, but there's a growing demand for this type of care.

12  
13 Trustee Pennington inquired is it possible that RoseHeart could be a fallback position to be sold  
14 outright once the build-out has been completed. In other words, flip it. Would you intend to flip  
15 it? Is it a possibility?

16  
17 Mr. Kolb stated that he thinks that's a possibility. That's not our business model at this time. He  
18 hates to close off, go and give Public Hearing testimony and say that that's impossible. Yeah, we  
19 are building it up to run it. He has known John Vrba. He is trying to think of when he met him.  
20 Mr. Vrba stated 22 years. Mr. Kolb stated 22 years, yeah. He thinks he took piano lessons from  
21 his wife's mom when he was growing up. Mr. Vrba stated he wasn't that good. Mr. Kolb stated  
22 we've known John for a long time. He has worked with him in his current facility for a long  
23 time. He has known Kelly for a long time. We actually think we are going to make a run of this,  
24 build some capital. We've got some people that we know that are capital sources. If we can build  
25 the right set of financials and if our analysis is correct, this is a very profitable business. That's  
26 our goal. But is it possible we could sell it? It is, unless for some reason the Planning and Zoning  
27 Commission doesn't like that idea.

28  
29 Trustee Pennington stated okay, thank you. Your Rider to your Application lists All Nations  
30 Assembly Church, Incorporated as a co-Applicant. What is their action here? Are they a part of  
31 your group?

32  
33 Mr. Kolb stated no, not at all actually. The law requires that the property owner be on the  
34 Application as well and be a co-Applicant and actually have to consent to the Application with  
35 respect to their property. They acquired that property from another third party who sold the  
36 property without paying off a loan actually to a bank. Trustee Pennington stated yes, he  
37 remembers that. Mr. Kolb stated and so that bank has foreclosed. That foreclosure action is  
38 pending. We've worked arrangements with that bank to sit tight while we make efforts to kind of  
39 go through this process.

40  
41 Mr. Kolb stated that they originally asked to be a tenant in our property. He can't see how you  
42 would have parishioners of a church in the same building as alcoholism and substance abuse, and  
43 have that be any semblance of a reasonable project. He doesn't think it would ever get by the --  
44 Trustee Pennington stated that would be a conflict of interest, big conflict of interest. Mr. Kolb  
45 stated right, right. Trustee Pennington stated that his final question, of course, he has many more,  
46 but he will close it off here. Could you tell us again who are the principles within your group?

47

1 Mr. Kolb stated right now, there are four of us. He stated that John comes with his entire group,  
2 his healthcare group. There's Kelly and I, Ted Myers, and John. Kelly and I have experience in  
3 development, and expertise in medical development. We were exclusive zoning counsel for CVS  
4 and all their Minute Clinics. Spent many a night going around Illinois to different communities,  
5 and Wisconsin, and Indiana, getting projects approved and developing those sites, which  
6 ultimately turned into — CVS usually converts those to land leases.

7  
8 Mr. Kolb stated that we have a background in commercial real estate and development, and  
9 identifying value. We think this site has great value. The grounds are beautiful. Olympia Fields,  
10 even out in the western suburbs where we are, has just a wonderful reputation of being a fantastic  
11 community. He knows Tiger Woods was just there three or four weeks ago at that tournament.  
12 He thinks it is a great place. Throughout Chicagoland and extended, it carries a wonderful  
13 reputation of an upstanding, diverse, cultured, great community. We think it's a great spot, the  
14 proximity to the hospital, and the idea that this potentially could lead to the development of a  
15 future assisted living facility or a nursing home. We've kicked the tires on an animal hospital  
16 because that is kind of in line with therapy for alcoholism and substance abuse. There's plenty of  
17 land around to do some interesting things here. It's got some long-term potential we like.

18  
19 Mr. Kolb stated that he and Kelly identified the site. In fact, it was Kelly who identified the site  
20 first. Then he jumped onboard with it. Mr. Myers is our capital partner, Ted Myers. He has put a  
21 lot of the capital in to get us this far. It has been quite a bit to get through engineering, Site Plan,  
22 traffic, Land Use Studies, Fiscal Impact Studies, Market Analysis, just to get this Application in  
23 line is considerable costs, much less the earnest money to tie up the land, and all the hearing  
24 costs that we are paying each month to be able to carry our contract. So, Ted is our capital  
25 partner. Ted and John have known each other for how long? Mr. Vrba stated 25. Mr. Kolb stated  
26 25 years.

27  
28 Mr. Kolb stated that we brought John onboard conceptually right away. We said, "What do you  
29 think of this concept?" He has such success running his facility that he's our fourth partner from  
30 an operations standpoint. The four of us have blended together now to get this entitled. We may  
31 add additional investors who are going to bring equity in order to get some debt put in place.  
32 However, our ultimate capital stack works, but you could see additional names down that list.

33  
34 Mr. Kolb stated then we retained the best architects he knows. He worked with Mark Nosky back  
35 on CVS projects decades ago it seems like. They've done a fantastic job. We brought in the  
36 construction experts we know and engineers to take a look at it from V3 we've worked with. Our  
37 team is a family. It possibly could grow though with entitlement when we really get moving on  
38 this if we actually get an Ordinance approving a Special Use.

39  
40 Trustee Pennington stated Mr. Chair, he has one last question if he may. Mr. Kolb, you are an  
41 attorney, he takes it, right? Mr. Kolb stated, he is. He is also a real estate developer, but yeah, he  
42 is an attorney by trade. Trustee Pennington inquired would either you or your firm serve as the  
43 counsel of record for this project. Mr. Kolb inquired legal counsel of record. Trustee Pennington  
44 stated correct. Mr. Kolb stated he guesses we can do that, sure. Trustee Pennington inquired even  
45 though you are a partner. Mr. Kolb stated yeah, he doesn't think that is a conflict of interest, no.  
46 Trustee Pennington inquired you don't deem that to be a conflict. Mr. Kolb stated no, he doesn't.

1 Trustee Pennington inquired possible conflict. Mr. Kolb stated no. Trustee Pennington stated no,  
2 okay. Thank you. He stated that he yields, Mr. Chairman.  
3  
4 Mr. Kolb stated that he would like to clarify. Are you talking with respect to getting zoning  
5 entitlements? Is that the scope of the representation you are asking?  
6  
7 Trustee Pennington stated that he is speaking in terms of all aspects of this project. Mr. Kolb  
8 stated that the only aspect before you is an Application to Rezone the Property to the Medical  
9 District, and an Application for a Special Use. In that regard, we prepared the Application  
10 materials as part of our contribution to this project. The law firm has not incurred legal invoices  
11 in connection with this matter. We are coming at this as participants, just he and Kelly. We are  
12 the only ones involved from our firm. His emails will have his firm because that's his email. But  
13 we are not approaching this like a law firm is developing this at all. The Applicant is a Delaware  
14 LLC. It has four members. The fact that some of them are lawyers is just a part of it. Trustee  
15 Pennington stated all right. Thank you, Mr. Kolb. Mr. Kolb stated yep. Trustee Pennington stated  
16 that he yields.  
17  
18 Chairman Blackwell stated thank you Trustee Pennington. Next, Commissioner Green.  
19 Commissioner Green stated that he has a few questions. The first question would be, as he  
20 understands it, we showed the property. We showed the building. Are we talking about the entire  
21 property? The entire area? How much area are we talking about here?  
22  
23 Mr. Kolb inquired Jeff, do you want to cover that. Mr. Kolb stated it is a 22-acre site, but if Jeff  
24 wants to detail it. Commissioner Green stated 22. Mr. Kolb stated correct. Commissioner Green  
25 inquired are we talking about the entire, or just the building itself. Mr. Kolb stated that we  
26 submitted an ALTA Survey of the land. Go ahead, Jeff.  
27  
28 Mr. Lietz stated that we would have to touch almost the entire area of the property to get  
29 everything in from utilities to detention, to parking structures. There is going to be  
30 redevelopment in most of the 22 acres.  
31  
32 Commissioner Green stated that would be the question, yes. Also, next question would be are  
33 there going to be drugs on the facility?  
34  
35 Mr. Vrba stated yes, under the direction of the medical director and nurse practitioner, or RN's  
36 on staff, there will be drugs on premises. Obviously, they will be under double lock and key.  
37 There's a unit called an "Omnicell" which is a very secure machine that can only get into by  
38 nurses, which is double locked behind a locked door. There are numerous ways medications can  
39 be stored on site. There can also be pharmacies will deliver QID, or TID, two or three times a  
40 day. There are a couple different ways medications would be handled. But then obviously, would  
41 be extremely secure.  
42  
43 Mr. Lietz stated that there are locations on the Site Plan right now that shows disbursement of  
44 medication. It is all within the Administration areas.  
45  
46 Commissioner Green inquired are you aware that there is a school right across the street. Mr.  
47 Vrba stated yes, he can take that. He can take that in a different realm. He is excited. Maybe

1 some people on the street aren't excited. He stated with Professional Intergenerational  
2 Programming and not hiding behind some of the enormous numbers our country is seeing with  
3 alcoholism, and opioid epidemics, and addiction, he's not sure, maybe you can tell me more  
4 about the question. Yes, he is aware Rich Central he believes, is right across the street.

5  
6 Commissioner Green stated that next he is going to go with security of the facility with the  
7 school across the street being a high school, being open, and also an open area. Mr. Vrba stated  
8 that Andrew can take security.

9  
10 Mr. Kolb stated that his understanding right now, is that a patient in acute need of care with  
11 respect to alcoholism or substance abuse, an overdose, or what not, ends up at the emergency  
12 room at Franciscan Hospital, which is actually probably the only structure that is closer to the  
13 high school than we would be, which is sort of ironic. But we don't think that presents any sort  
14 of a problem at all, actually. We don't think that our patients present a risk to the high school. In  
15 fact, what John was indicating is they probably present a benefit. There are a couple other  
16 facilities that do drug and alcohol rehabilitation in the immediate area. Obviously, the closest is  
17 Franciscan Hospital. The others are over a 10-mile radius away. We think there is definitely a  
18 demand here. The proximity to the high school, we just don't think is an issue.

19  
20 Commissioner Green stated and you said this is only going to be female, and approximately 120-  
21 beds. Mr. Kolb stated yes. Our business model is female only. If we can't fill it with just female,  
22 we may have to switch that. Commissioner Green stated but you are not saying just females. You  
23 will be able to switch between the two. Mr. Kolb stated if we have to. But again, we like the  
24 business model of having an all-female facility. The more we've actually pitched that and talked  
25 about it, the more we think it has legs. There is not really a feasibility study out there that we  
26 researched. We talked to a couple consultants that can talk about a female only facility like this.  
27 The reactions we have gotten in the marketplace, it has presented some interesting reactions.  
28 People actually really like the concept. They say, "Well, gosh, if I had a daughter, or a spouse, or  
29 an aunt that needed this kind of care, would I travel a longer distance, or pay an extra out-of-  
30 pocket co-pay above and beyond my private carrier to have an all-female supported facility,  
31 where I don't have to worry maybe about an additional element going on during what needs to  
32 be focused care." The majority of people actually are extremely positive. He doesn't know if you  
33 guys have any viewpoints on that topic. He stated just from a layman's standpoint, he couldn't  
34 get over the positive reaction we've heard. He thinks that concept, and he thinks you do too, we  
35 think that concept has legs from a reputational standpoint. It really allows us to distinguish  
36 ourselves in the market. But if we get to the point where we are completely wrong about it, we  
37 want to be able to switch back to a traditional model. He stated make no bones about it, we want  
38 to be able to convert and stay alive. We are going to have a lot of debt to carry and we are going  
39 to need to fill the facility. The amount of marketing you have to do to get a facility like this open  
40 is pretty staggering too. We are learning as we look at some of the other facilities around who are  
41 functioning out in Arizona.

42  
43 Commissioner Green stated it is very hard to follow people, because most of the questions are  
44 already asked. However, just one more. You said the type of drugs, you are saying alcohol and,  
45 are you talking all drugs, or just certain drugs that you are going to handle? Are you going to  
46 handle all drugs?

47



1 Mr. Kolb stated yes, all of them. He stated what we are not going to do is handle outpatient  
2 methadone. If you look at some of the studies out, the problems that really accompany and  
3 provide a statement for these types of facilities are really attached to outpatient methadone  
4 clinics. That is not us. We are an inpatient, residential, private pay model, female only model  
5 facility. We are going to treat alcoholism, drug addiction, opioid addiction, and we think we are  
6 going to treat eating disorders as well. He stated eating disorders, both under eating and over  
7 eating is a growing facet of substance abuse. We think there is a growing need for that as well.  
8 Commissioner Green stated thank you. He yields, Mr. Chairman.

9  
10 Commissioner Blackwell stated thank you, Commissioner Green. Next is Commissioner Jones.  
11 Commissioner Jones stated yes, Victor. Just a couple questions presently. It seems like a lot of  
12 detail has been given to the actual architecture and construction. One thing that comes to mind,  
13 how long is the average patient going to stay at the facility?

14  
15 Mr. Vrba stated that will be driven by the medical director and the addiction therapist. He stated  
16 for the sake of conversation, typically there is maybe a 10 to 15-day detox overseen by the  
17 physician and the RN's. We would also be employing a nurse practitioner or two. After the  
18 detox, it is typically 30 to 40 days.

19  
20 Commissioner Jones stated going back to what Commissioner Green was mentioning about the  
21 high school being across the street, that is going to be a question or concern like myself as a  
22 citizen of Olympia Fields. So, you don't foresee that being an issue?

23  
24 Mr. Vrba stated that Andrew can speak after him if he would like. Again, he will reiterate. He  
25 sees that as a positive, not a negative. Addictions are a part of society, just like cancer, just like  
26 diabetes. He understands a lot of times we point the finger at addictions. It is a horrible event that  
27 people go through. He sees it as a positive. He thinks as a parent himself, again, not judging  
28 anybody, everyone has their own beliefs and he respects everyone's beliefs, he sees that as a  
29 tremendous positive to do intergenerational programming and further educate our young to stay  
30 away from addictions. He doesn't see the negative side of that at all himself. He respects it if you  
31 do, by all means. Commissioner Jones stated Victor he yields, currently.

32  
33 Commissioner Blackwell stated thank you. Commissioner Bradshaw. Commissioner Bradshaw  
34 inquired do the members of Recovery & Rehabilitation, LLC and Recovery & Rehabilitation,  
35 LLC as an entity, are they affiliated with any other operator of similar facilities?

36  
37 Mr. Vrba stated no. Commissioner Bradshaw stated that there was a question earlier about  
38 flipping the facility. So, right now, there are no plans to sell the facility to another owner-  
39 operator. Is that correct?

40  
41 Mr. Kolb stated we have a contract right to buy a piece of land that's not even entitled to do what  
42 we want to do. So, we have no plans to really do anything at this point other than try to convince  
43 you all that this is a good project for the community. As far as who's going to be able to operate  
44 something like that, he would just like to mention a lot of the operational aspects of this facility  
45 will be governed by Part 2060 from the Public Health, which is the Alcoholism and Substance  
46 Abuse Treatment and Intervention License Requirements. So, whoever is going to get a license,  
47 our group, or if we are going to contract out operations, is going to have to go through a rigorous

1 examination. The codified requirements of Section 2060 are extensive. The ownership will have  
2 to be disclosed. The owners will have to be vetted. All their backgrounds will have to be vetted.  
3 You will have to comply with a whole different -- There are pages and pages of emergency  
4 procedures, plans, and different interviews for counseling and administration. All the staff needs  
5 to be vetted.

6  
7 Mr. Kolb stated that the Department of Human Services has taken on that responsibility. He  
8 doesn't feel that it's within necessarily the purview of the Zoning Hearing to get into who can  
9 operate it and who can't. He really thinks Section 2060 of the Administrative Code lays out two  
10 inches of paperwork that talks about that.

11  
12 Commissioner Bradshaw stated so right now, the membership primarily consists of people  
13 experienced with medical facility developments and commercial real estate.

14  
15 Mr. Kolb stated and John who runs Burgess Square, which is a Skilled Nursing Assisted Living  
16 Facility. How many patients do you have?

17  
18 Mr. Vrba stated that we operate around 120 patients on a daily basis. We do more post-acute care  
19 where we are rehabbing patients. Typically, a length of stay is 13 to 14 days. We've chosen to  
20 concentrate more on rehab than we have the care of the elderly, because we believe it's  
21 appropriate to do so. Some homes choose to care for the elderly, as well as post-acute care. We  
22 tend to do more just on the post-acute care side. It's a specialty that we do very well at.

23  
24 Mr. Vrba stated in regards to the Administrative Code as well, the 2060, with our detail rated  
25 MBAs and MPHs which help get us the Malcolm Baldrige Gold criteria, we will dissect this  
26 page by page to ensure we meet or exceed the code. Typically, again, as he said earlier, we  
27 typically exceed the code.

28  
29 Commissioner Bradshaw inquired whether patients are allowed to leave the property and walk  
30 through the neighborhood while admitted.

31  
32 Mr. Kolb stated that the 2060 requires us to have Policies and Procedures put in place. If you  
33 take a look at the Policies and Procedures that are in the Code, they begin at Section 315, he  
34 believes of that section, and kind of run through the following sections. But yeah, we are a  
35 voluntary program. If you wanted to leave the program, we would have a protocol to be able to  
36 have a family member come and pick you up. As far as just walking out of the facility and  
37 walking around the community, no, we would probably require you to stay on. Certainly, if you  
38 are in the detox facility getting acute care would be a completely different story than if you were  
39 getting counseling for an eating disorder. He thinks it depends on your treatment plan, as far as  
40 what you can and can't do. We would develop that in connection with the code going forward as  
41 part of the Initial Patient Assessment when they come in, where you determine their level of  
42 acute care. The Patient Assessment is under Section 417. We would determine the level of care  
43 needed for that particular patient. We would develop a care plan for the patient using the  
44 protocols and procedures in place. If that allowed the patient to traverse the property that would  
45 be one thing. If they were in acute care, or a higher level of care, there could be restrictions in  
46 that.

47

1 Commissioner Bradshaw inquired how is the detox area secure from unauthorized exit by  
2 admitted patients.  
3  
4 Mr. Kolb inquired like physically secured. Commissioner Bradshaw inquired is there keyed, or  
5 key card access, or how are they secured. Is it a space where they are confined, or are they free to  
6 exit the detox space?  
7  
8 Mr. Kolb stated the detox space, Jeff, if you want to detail what you did from an architectural  
9 standpoint then he can talk about the process. Mr. Lietz stated that there is a dedicated entrance  
10 to detox through here, double door vestibule, interior vestibule. He stated has to pass by a fully  
11 manned reception counter. The only other way outside of this is either across from the nursing  
12 station, or out the exit door on the other side, which is a secondary exit required by code. The  
13 pathways, and the way that we have designed this is strategically located nursing centers. One  
14 right here, and one right here with full view of the entire space. Mr. Lietz stated so he said all  
15 that with nobody looking at the plan. He stated sorry. He thought it was still sharing.  
16  
17 Mr. Lietz stated so we have a double door access into the vestibule. The reception area has full  
18 view of anybody coming or going. You've got a nurse's station here that is the only area that has  
19 full view of people coming and going from the large group room. We have a nurse's station here  
20 that has full access to the detox dining area. Then you have the only exit door here which is  
21 required by code. The only way that someone can exit from this space is actually passing in front  
22 of a nurse's station, or a fully manned station.  
23  
24 Commissioner Bradshaw stated that there was a short mention of the facilities ability to  
25 potentially discriminate against Court Ordered Rehabilitation. Do the members or principles plan  
26 to make that limitation?  
27  
28 Mr. Kolb stated right. If you would like a legal opinion on that, we can put one together, whether  
29 or not that is something that the Applicant can do. We intend to comply with all applicable laws.  
30 Our business model is not necessarily focused on that demographic as being somebody that can  
31 keep the lights on for us, we certainly want to comply with laws. If the law requires us to accept  
32 those patients at a given volume, we will look at that. If you want to know what the answer to  
33 that question is, we can certainly look into that for you. Commissioner Bradshaw stated no, that's  
34 okay. That's all he has.  
35  
36 Chairman Blackwell stated thank you Commissioner Bradshaw. Chairman Blackwell stated that  
37 he has a few questions to kind of start with. First, he would like to say that he is certainly  
38 impressed with the amount of work, and expertise, and labor that went into this presentation. It  
39 appears to be quite comprehensive, as well as voluminous, and quite a bit to digest, but well put  
40 together he should say.  
41  
42 Chairman Blackwell stated that he wants to refer back to some issues that may be relevant to our  
43 consideration of your Petition as a Commission and a Board. Some of the questions, in fact, as  
44 Commissioner Green had pointed out, have been asked and answered heretofore. Let me just  
45 jump around a little bit because he made a few notes and he would like to go through them.  
46

1 Chairman Blackwell stated security. The issue of security came up. He understands that you have  
2 certain barriers and prevention, or constraints for people in a designated area and a territorial  
3 area. But so far as any patient particularly becoming unmanageable, such that you would need to  
4 use some force to restrain any given patient, what type of security would you have available, or  
5 do you expect to have available to manage such an event if, in fact, it occurs?  
6

7 Mr. Kolb stated well, we certainly will develop a Security Plan that complies with the  
8 Administrative Code Section 2060.  
9

10 Chairman Blackwell inquired what does that require, counsel? Mr. Kolb stated well, we can go  
11 through the different sections. He stated for instance, Section 405 requires for the detoxification  
12 wing at least two staff persons providing 24-hour observation, monitoring, and treatment. He can  
13 go through the entire code. It would probably take us all night. You've got different requirements  
14 in here. Chairman Blackwell stated no, that's not necessary. Just give me a summation of what  
15 your expected security will be based on your interpretation of the Administrative Code, Section  
16 2060. Just a summation. He won't need specific details to cover the entire code. But just how  
17 would you handle that particular incident, or those incidents?  
18

19 Mr. Kolb stated we've gotten this question before. We didn't contemplate fencing on the  
20 perimeter of the property. We think it sends the wrong message to someone trying to seek care.  
21 We just don't think the precautionary requirement is there where fencing would be something  
22 you would need, you know, with barbed wire or something. These aren't prisoners. These aren't  
23 people who have done something wrong. These are people in need of some help. So, we are  
24 going to staff the facility as required by the code. We are going to have security there on staff as  
25 the Department of Human Services requires. The exact Security Plan with the exact number and  
26 where they will be stationed, and where they are going to roam, and where they are going to be  
27 onsite, has not been determined. If you would like us to develop a Security Plan or have  
28 suggestions for that, we can certainly put one together for you.  
29

30 Mr. Kolb stated as far as staffing this facility, we haven't developed a Comprehensive Staffing  
31 Plan. We have a general sense of how many nurse practitioners. We know we need a medical  
32 director. We know we are going to need physician care. We know we are going to need orderlies.  
33 We are going to need cooks. We are going to need cafeteria workers, and janitors, and people  
34 who assist with mechanical equipment. We've done Preliminary Staffing Plans for facilities of  
35 this size. We don't have one yet. But what we can tell you is we are going to do what the  
36 Department of Human Services requires as far as staffing it. We'll have security personnel, as  
37 the department feels appropriate onsite.  
38

39 Mr. Kolb stated the physical amenities, you see them. The detox is a separate unit. It's  
40 segregated from the rest of the facility. That acute care has some different demands than the  
41 facility at large. Someone ideally, would move from detox into the rest of the facility and  
42 complete their therapy and their care in more of a group setting before being discharged. The  
43 security requirements are different between the two wings.  
44

45 Chairman Blackwell stated sure. Okay. Chairman Blackwell stated this might not be a fair  
46 question for you, Andrew. But he knows John is really the point person who has managed 28  
47 years plus of operational facilities of this nature, as well as you're currently at Burgess Square

1 where you manage that area, or you oversee operations there to that extent. Chairman Blackwell  
2 asked Mr. Vrba to give us some idea of what staffing would consist of in a typical unit such as  
3 this where 120 patients are there. There is a lot going on. There are a lot of moving parts, just to  
4 feed 120 people, to bed them down, to make sure that they have their proper medications, to have  
5 people to counsel them, if necessary, the security issues and those types of things. Can you just  
6 kind of give us what your expectation without us holding that to the letter of what you say, it's  
7 not necessary for you to be totally accurate, but you've got that level of experience where you  
8 can kind of give us an idea about how that would operate. He stated how you would handle 120  
9 people. How many staff would you expect to have? Nurses, doctor on-call, doctor there, security,  
10 what levels, those types of things. And then he wants to get a little bit into your patient base.

11

12 Mr. Vrba stated first of all, thank you for qualifying your question. You ask it very appropriately.  
13 He is going to be a little bit long-winded on this answer, but he does know staffing probably as  
14 well as most in the state level and the country. He will go back to his early training. One of his  
15 greatest lessons he learned is again, he has a Masters in Counseling/Psychology. He worked in  
16 addictions. He worked in healthcare his entire career. He will be approaching 30 years this  
17 coming April. Back in the '90s, he had a controller. He will give you a short story on this, but it  
18 is relevant to your question. He stated that .3464 was his RNPPD. He stated .7878 was his  
19 LPNPPD, and .2064 was his CNAPPD. The financial gentleman in the room, the controller said,  
20 "John, do you understand that?" This was back in 1995. He said, "Sure I do." And then he said,  
21 "Explain it." Mr. Vrba stated and he had no idea. He said, "Vrba, you have to know staffing."  
22 So, Alan, the controller got up there and taught him PPDs. He stated for those on the screen here  
23 who don't know PPDs, that is "Per patient day." So, you have to manage so many hours per  
24 patient day based on that patient's acuity. He believes that we would do a PPD Model instead of  
25 an FTE Model to make sure. He stated some FTE's, you may have patients who demand more  
26 care than other patients. If you just have an FTE, he will go back into sports. It is hard to keep  
27 Dennis Rodman off the backboards. He stated sorry to give an analogy with the Bulls. It is the  
28 same with a patient. Patients require different care.

29

30 Mr. Vrba stated in general terms, to answer your question, if you want an FTE, that's a "Full  
31 time equivalent." We look somewhere from one to 12. And one to 15 on the RN side, and then  
32 you supplement them with a Certified Nursing Assistant, somebody to help or a therapist,  
33 depending what their clinical needs are. Typically, the needs in addiction therapy is more  
34 therapist driven, not as quite CNA. Housekeeping, a lot of the housekeeping duties will go to the  
35 patient in time, because we want them to learn those skills. Some of the cooking will go to the  
36 patient. Those are part of our treatment plan. On the nightshift you have to have two people  
37 managing those patients. That staffing goes up obviously on the inpatient wing.

38

39 Chairman Blackwell stated thank you, John. That's excellent. Just a follow-up. Where is the  
40 doctor? Is the medical director the doctor as well? And is that person, in fact, in the facility, or is  
41 there a physician in the facility at any given time?

42

43 Mr. Vrba stated that the medical director will be in the facility. That will be part of our business  
44 plan when we choose that medical director. That person will be in the facility typically, a couple  
45 times a week as needed. They will be leading the treatment over all the physicians. But also, if  
46 we have an agreement with Franciscan across the street, or other physicians, there will be other  
47 doctors in the facility. There will be nurse practitioners in the facility, as well as we are going to

1 tie with Telemedicine. He stated that Telemedicine Addictions is just getting started. We're not  
2 sure how that is going to work in addictions. Most of our reserve staff is going to be onsite.

3  
4 Chairman Blackwell stated, I see. I see. Mr. Vrba stated let me further that too. On the security  
5 side, he was going to jump in but he didn't want to interrupt Mr. Kolb. We will have a set  
6 schedule as well. So, 7 o'clock in the morning at breakfast, then a little cleanup. Then a group.  
7 There will be a structure all the way to bedtime. There won't be a lot of time for not focusing on  
8 treatment or our treatment plan.

9  
10 Commissioner Blackwell stated exactly. Thank you so much, John. He knows this whole synergy  
11 thing so far as St. Francis is concerned, has not actually been initiated nor developed, because it  
12 might be preliminary since you haven't gotten approvals to move forward on all the other nuts  
13 and bolts that you have out there. Is there an expectation that you would make some sort of pact,  
14 or some sort of contract with St. Francis, it obviously being the nearest hospital? He doesn't  
15 know if they are Acute Stage 1, or a Trauma Unit. He knows they have done a lot to develop  
16 that. He inquired to what extent do you feel that that is going to be fairly easy for you to work  
17 out and establish, and to what extent do you believe with 120 patients just based on your  
18 experience, that you would need particular emergency room treatment? He noticed that you had  
19 a triage unit and a nursing station within the facility that you planned. But for opioid OD  
20 situation where you need say surgery, or certain surgical procedures to have this patient recover  
21 on medications, and he is sure you would have certain medications at the facility, but to what  
22 extent do you expect, or would plan to use St. Francis? Do you have any previous relationships  
23 with anyone near to help you establish that as a support and synergy backup hospital for your  
24 program?

25  
26 Mr. Vrba stated yeah, for the question in regards to emergency services he wouldn't feel  
27 comfortable answering that. He doesn't feel he has the physician background to answer that. In  
28 regards to Franciscan Hospital, the physician we choose could be on staff at Franciscan Hospital.  
29 It would be wonderful. He likes to use the term "vertical integration." He would be meeting the  
30 CEO, the CFO, the COO. The CNO he thinks is most important out of those four. He stated  
31 typically a woman. That being said, he will be dealing with the care side of it. And we will be  
32 putting together Policies and Procedures if something happens, how do we get that patient to the  
33 emergency room., when do you get to the emergency room. Our goal, obviously, would be not to  
34 utilize the emergency room. But then again, we'll have a Plan in place. Again, with  
35 communication where it's at today with our wonderful iPhones, there is HIPPA compliant  
36 texting. There is so much that we can do to get people available now. He can press a button and  
37 have a doctor on the line within five seconds. We will put together those protocols. But he  
38 couldn't honestly answer how much we would have to use the emergency room. It's a great  
39 question.

40  
41 Chairman Blackwell stated that he wouldn't expect you to know every detail with that. He just  
42 wanted to get a general feel about how that would be handled. He stated that he had another  
43 question. Chairman Blackwell stated that he thought Mr. Vrba had said the stay was for seven to  
44 10 days or something of that nature. He stated for the average person their stay would be seven  
45 to 10 days. Mr. Vrba stated for detox. Chairman Blackwell stated yes, for detox. Outside of  
46 detox, how long would a person who needed detox typically, again, we are doing estimates here,

1 who came into the facility, they were opioid addicted. They needed detox. He inquired with the  
2 detox, how long does that program run just basically for detox?

3  
4 Mr. Vrba stated that he would say basically, for the sake of conversation, and again not judging,  
5 but in general term, probably around 15 days. And then the total stay would be approximately 45  
6 days. Chairman Blackwell stated 45 days, okay. That's the most. Mr. Vrba stated that it could go  
7 up to 60. He will say this, he sees a lot of Victor's, so he is sorry if he says it. This is very  
8 important.

9  
10 Chairman Blackwell stated that he is the Victor that counts. He is the one with gray hair and bags  
11 under his eyes. Mr. Vrba stated Victor, he would answer it this way too. He is bleeding his  
12 sincerity through the screen. It would be about length of need, not length of stay. If we have to  
13 keep someone 75 days and that's what the physician and the critical team wants, we will keep  
14 that patient. If we can get a patient out in 20 days appropriately, then we will get them out in 20  
15 days. He would say on averages, he would say that answers your question.

16  
17 Chairman Blackwell stated okay. These patients, he knows they have visitors. He knows a lot of  
18 them are wanting to be in a remote situation because of the pain, of the suffering, maybe there is  
19 shame involved, there's physical pain as well. This is a real illness. He knows that some of them  
20 don't want people running in and out visiting. What are your visiting provisions? And how much  
21 traffic would that bear with 120 people? If each one had a visitor once a month, what does your  
22 numbers look like for in and out? He is just curious on traffic.

23  
24 Mr. Vrba stated that when we were at "The Retreat," they really did not allow a lot of family  
25 intervention in their program. He would venture that we will allow more than they do. He stated  
26 nothing against their treatment program. He stated that John Curtiss does a phenomenal job. But  
27 we would base it off of the physician and the treatment plan for that individual. He doesn't think  
28 it would be a lot of visiting. But towards the end of their stay to get them nurtured back into  
29 society, that's where we would look at some visiting. At the beginning of treatment, from his  
30 resources and the team that he consults with from medical to addiction therapists, we don't want  
31 a lot of that interruption or white noise during the early treatment. It would be more towards later  
32 in their stay. He doesn't think it would be that often.

33  
34 Chairman Blackwell stated okay. He stated back to the security question with the irate patient, or  
35 patient that has just gone totally off the cliff, and is physically struggling and fighting with the  
36 nurses, how would that patient be handled. What's your security? Do you have a security guard  
37 there? You don't need one, or you call the Olympia Fields Police, or you would sedate them?  
38 How do you deal with that?

39  
40 Mr. Vrba stated through the treatment plan, again, as he stated earlier, he hasn't come in touch  
41 with much aggression to the point where security is needed because our patients are coming to us  
42 because they are seeking treatment. Now granted, again, he doesn't have a crystal ball, nor do  
43 you. But things could happen, but through the treatment plan, there are ways to talk people  
44 down. There are all sorts of therapy: Bulgarian type therapy, addictions. There's Motivational  
45 Therapy. There's LOTT's Breathing Therapy. There's a lot we can do. He won't get into all that.  
46 But we will have security on the premises. We will have staff on the premises around the clock.  
47 Again, we would meet that code to make sure that we have what we need to care for those

1 patients. On top of that, he wants to further address that. He stated with the intellect of our team  
2 that we are going to have inside that facility, driven by our medical director, again he or she is  
3 going to be the backbone, even if we have a patient that we believe may act out, we will put  
4 more time and effort into that patient too. If we have to bring in an extra staff person, we can do  
5 that.  
6  
7 Mr. Vrba stated again, he will use his example because you chuckled with Dennis Rodman. You  
8 might need two guys to box him out, but we will be aware of that. Chairman Blackwell stated  
9 okay, that's fair. That's fair.  
10  
11 Mr. Vrba stated that one thing Andrew whispered in his ear too, we do a thorough pre-screening  
12 as well. He is not going to go through all the forms. There's a three to five-page questionnaire  
13 that we pre-screen to see if they are having any ideations, if they are aggressive, so on and so  
14 forth. We talk to the family. There's a lot that goes into that prior to coming in.  
15  
16 Chairman Blackwell stated so you are at Burgess Square. Are you planning on running this  
17 facility, or hiring people to run it?  
18  
19 Mr. Vrba stated great question. He hasn't made that decision yet. He has seven administrators  
20 licensed at his facility. We are an enigma. Again, please research the Malcolm Baldrige Gold  
21 Award. We are so proud. You just don't get that. We love our patients. We take great care of our  
22 patients. His record is outstanding. His entire team has been with him 20 years. We have an  
23 outstanding team. He is very proud to say that. So, could he run this? Yes. Again, he goes back  
24 to his Henry Ford theory. He would hire the best in every area. We will have the best building in  
25 the country.  
26  
27 Chairman Blackwell inquired of Mr. Vrba whether or not he was involved with the St. Charles  
28 facility. Mr. Vrba stated he was not. Chairman Blackwell stated oh, okay. He would have to  
29 bring somebody else on. Forget that for now. Forget that. No, I don't need him now because  
30 you are the operational person. You can really tell us the nuts and bolts about what you are  
31 doing. Now, let's talk a little bit. He won't take too long because he wants to get other questions  
32 in for people. He just wants to finish up here, briefly. Your clientele, these are people who you  
33 would be a for-profit model. Your clientele, you're saying predominantly would consist of  
34 women who have addictions, who have substantial, or sufficient, or let's just say adequate  
35 insurance coverage and/or their own personal funds to afford this. Where are these folks coming  
36 from? Do you have a targeted area? He is asking this in sincerity to try and understand. He  
37 knows there are people who might fly from Atlanta or Washington, D.C. to come to Olympia  
38 Fields, because that whole connection between kind of separating themselves from what might  
39 have driven them into those conditions or just getting away, you know, is significant. Are these  
40 people coming from other states? Illinois? Kind of mixed around? What's the deal?  
41  
42 Mr. Vrba stated that we believe the majority, and again in all sincerity, the majority will come  
43 from our outlying area. If you look in your community, or any community, there are a lot of  
44 people who are in need of this care. He stated a fact earlier, 5% are getting treatment, when only  
45 5% are getting treatment, how many really need it? We believe most of it will be coming locally.  
46 But again, Midway Airport isn't too far. There are going to be some people, if our program goes  
47 well, that we will draw from some other areas. He thinks that's a positive. He hopes your Board



1 does as well. We would probably go from other areas. Once our word of mouth gets out there, if  
2 we do as well as we believe we are going to do, the word will get out. We don't want to just be  
3 another addiction center. He thinks that you can see by not just what Jeff and Mark presented,  
4 but with the effort of the inside of the building, the building is going to be beautiful, but it is  
5 going to be the care on the inside that makes it incredible.

6  
7 Chairman Blackwell stated that he thinks that your philosophy to deal with this as an illness and  
8 to help people is admirable. His wife is a social worker so he has to kind of believe in that.

9  
10 Mr. Vrba stated he might hire her. Chairman Blackwell stated no, no. She's looking to quit work  
11 more than work. Let's talk about the community a little bit. You talked about when you were  
12 asked a question regarding Rich Central and the proximity to the students across the street, he  
13 liked when you said it could, in fact, be a positive situation that could develop into better things  
14 for more people. We are predominantly African-American. We are mixed culturally and racially  
15 as well, but predominantly African-American. Are there some opportunities that you've  
16 established or could establish where externships or internships could be provided to south  
17 suburban kids who are interested in nursing, et cetera? It is his understanding, because he kind of  
18 works with the people who know, he doesn't know this area that well, so, he asks people  
19 questions and folks who are in the business. It is his understanding that there are a substantial  
20 number of youths in the south suburbs that have addictions. You could provide, being a part of  
21 the community if you were let in with this project, to assist our kids in the area amongst the 11  
22 schools out here from Crete to Rich Township, et cetera, and give them some discount, and work  
23 with the schools and the social workers out here to assist our youth. In other words, what can you  
24 do for us with your group?

25  
26 Mr. Vrba stated that he will give you not a short and not a long answer on this one. One of his  
27 failures in life was when Governor Blagojevich was in office. Many of our Governors go to jail  
28 which is sad in Illinois. He sat across the table from Governor Blagojevich and was trying to  
29 present a program where high school students would get credit hours for history for coming to  
30 the nursing home. He goes back. This is probably the mid '90s. He had a teacher, Karen, from  
31 Willow Brook High School. She was teaching the Bataan Death March. And Motts Tonelli who  
32 went to Notre Dame was in the Bataan Death March. He saw Americans beheaded. When he  
33 walked into the classroom, this is my gosh, 25 years ago. He walked in the classroom. He is  
34 walking in with him. He must be 85 years old. And he tapped the kid, "Hey, I played with those  
35 guys." The guy had the four horsemen of Notre Dame on his jersey. These kids came to life.  
36 That would be a very hot button with him. A very passionate one. Yes, we would want to involve  
37 the students. One thing he tried to pitch to the Governor at that point, and he continued to try to  
38 do it with our past Governor, and with Governor Pritzker, is that we can then look at State  
39 Scholarships, Scholarships getting in the healthcare professions. He stated sophomores become  
40 juniors, and juniors become seniors.

41  
42 Mr. Vrba stated that he has two boys. A freshman in college and a junior in college. He wishes  
43 when they were juniors and seniors, especially the seniors because some of them kind of blow  
44 off their senior years a little bit. If they could come to the nursing home or to the addiction center  
45 and be a part of that here, they see the pain. They see the suffering. It could be their mom. It  
46 could be their aunt. Yes, he is very passionate about that. If you approve this, that will definitely  
47 be a part as long as he is involved.

1 Chairman Blackwell stated that he appreciates that. Chairman Blackwell stated that he is not  
2 asking for affirmative action. However, amongst the individuals that are out here, because we  
3 have a lot of professional people out here that are nurses, physicians, technicians, and work in  
4 the hospitals here, St. Luke's, Rush, et cetera, would you consider sort of insuring, and he knows  
5 this is not Chick-fil-A in Homewood, where we are only hiring kids that go to H-F, we are not  
6 going to go to that level. But amongst the professionals that are out here, would you consider  
7 some preference for professional people who are RNs, emergency room nurses, sociologists, or  
8 psychologists, out here, and sort of give us some sort of reliance that you would at least take full  
9 consideration of those Applicants from Olympia Fields, particularly from this area, for work that  
10 they qualify for and are capable of doing because of their location and familiarity with the area?  
11 He stated that he is just putting that out there, John. He is not trying to get you to sign a contract.  
12

13 Mr. Vrba stated that he will give you his high-level viewpoint on that. Let me go back to the  
14 prevalence of addictions in the young, you mentioned it is going to become more and more  
15 rampant with this COVID. God help us that we can get through this and not have another second  
16 wave. When you look at the collegiate area, especially in the Midwest, these kids are drinking.  
17 He is living it now. He has a freshman and a junior and no one is perfect. He stated that he has  
18 good kids. Anyhow, it is starting earlier.  
19

20 Chairman Blackwell stated that it is a different world now too. Mr. Vrba stated it is. It is starting  
21 earlier. He thinks that so many of us are blind to what's happening. He's not blind to what's  
22 happening. He won't go into all the stories. He has many stories about trying to be the best father  
23 he can be.  
24

25 Mr. Vrba stated so, in regards to the staffing, staffing is mission critical now everywhere. So, we  
26 will look in the local area. We will hire the best candidates. But we will also look from afar. We  
27 may even look at some people to hopefully maybe purchase in the area, because we want to grow  
28 the area, and personnel is so hard. Again, in the COVID area. Let's hope we get through this  
29 after the fall.  
30

31 Chairman Blackwell stated yeah, we will, one day. Mr. Vrba stated that we are going to hire the  
32 most qualified. You don't get the Gold Award without having rigorous training, and general  
33 orientation, and so on and so forth. Chairman Blackwell stated John, thank you so much. He  
34 really appreciates your answers and responses to questions that are kind of sometimes off the  
35 wall and goofy for him. He just comes up with things and people are like, "Why did you ask him  
36 that?" It was on his mind. Mr. Vrba stated no day in healthcare is the same. He can tell you that.  
37

38 Chairman Blackwell stated that you might need to bring in some of your technical experts, and  
39 your attorney, and all those high-flying folks to refer to some of his further questions. He stated  
40 for instance, on Page 11 of your Rider to the Application, there he is, Attorney Andrew Kolb.  
41 Chairman Blackwell stated Andrew, on Page 11 of your Rider, he was looking at the last full  
42 paragraph as it regards Positive Fiscal Impact. One of the things that he noticed that he read, was  
43 if you look up maybe four lines from the last full paragraph you talk about, "The MaRous Study  
44 estimates that Applicant's proposed use of the Subject Property will generate approximately  
45 \$585,364.00 in real estate tax revenue." He would take it that that is per annum. "... the greater  
46 part of which would be payable to Rich Township School District 227 and to Matteson School  
47 District 162. These revenues would all be generated without increasing the number of students in

1 the district.” Chairman Blackwell stated that he knows you guys ran the numbers because he saw  
2 where you ran the numbers on the real estate values and all that. He knows that you guys are  
3 experts at all that stuff. Can you talk a little bit about that, and what would it take to get that level  
4 is that after a year, or how does it work? Tell us a little bit about it.

5  
6 Mr. Kolb stated well, a couple of points there. The property was previously used and taxed as a  
7 not-for-profit. He thinks the Cook County Assessor has determined recently that notwithstanding  
8 many years of Not-for-Profit tax status on this property, the property was actually being used by  
9 four tenant profits, and has actually back billed the All Nations Assembly of God Church  
10 something like \$700,000.00 in real estate tax liability. Chairman Blackwell stated, Wow. Mr.  
11 Kolb stated that he is told that number is essentially fictitious and will be cleared up by the time  
12 we intend to acquire the property, because that will change the economics of our acquisition  
13 substantially if we have to clean up, because he doesn’t know what the back penalties are on  
14 those taxes. Chairman Blackwell stated sure. Mr. Kolb stated maybe it’s just that they put some  
15 sub-tenants in there that were actually for-profit businesses. As you guys probably know, if you  
16 are going to have a not-for-profit tax-exempt status in Cook County, you have to be 100%  
17 not-for-profit. His point was simply, that we are going to convert the property from a  
18 not-for-profit status, or in this case, a partially For-Profit status with an insolvent pair, into a  
19 for-profit venture that has an enterprise value. He knows our construction budget, he doesn’t  
20 know where it is at, it was sitting around here, is like \$15.3, and he thinks we are another  
21 \$3,000,000.00 or \$4,000,000.00 on the acquisition. Cook County will definitely tax that. We did  
22 talk with some experts, specifically Brent Denzin, he thinks, about some of the programs that are  
23 available in Cook County to reduce the tax liability. He doesn’t think at first glance we qualify.  
24 We haven’t really vetted it completely. We would need the Village’s support to even get that.  
25 And something tells him that is not something you all would be very interested in since this is a  
26 use that’s a bit challenging to accept to begin with.

27  
28 Mr. Kolb stated that we are looking he hates to say worst case, because Cook County has some  
29 of the highest taxes in the U.S., but we are assuming we are going to get fully assessed here. The  
30 majority of those tax dollars go to the School Districts, and it goes to the Court System. A small  
31 portion goes to the Library District and the Fire Protection District, and the Park District. The  
32 majority of it is in the schools. He stated and unlike a residential community that we are  
33 building, if we put a housing development in here, we are not adding to the burden. We are just  
34 adding to the revenue. That was the point we were making here in this paragraph.

35  
36 Mr. Kolb stated now, Mr. MaRous, he can bring Mr. MaRous to the next hearing and you can  
37 drill down on his Market Impact Study. He is an expert. We certainly retained him and put some  
38 time, and effort, and money into getting this data for you.

39  
40 Chairman Blackwell stated that might not be a bad idea, but he wouldn’t be the person to drill  
41 down. Mr. Kolb stated that he is sure Teska could do it. Chairman Blackwell stated that it would  
42 be Mike Hoffman or somebody else doing it.

43  
44 Chairman Blackwell stated Andrew, in your proposed Alcoholism and Substance Abuse  
45 Treatment Facility Package, the big one with the PIN Number at the bottom in partial, could you  
46 turn to Page 33 of that where you start in “Rich Township ..?” This is right above where you cite

1 the Permanent Index Number. This is Mr. MaRous' stuff too probably. He just wants to bring  
2 this up to everybody's attention. When you get there, let me know when you are there.

3  
4 Mr. Kolb stated can you tell us again what you are referring to? Chairman Blackwell stated this  
5 is your proposed Alcoholism and Substance Abuse Treatment Facility Package, the big one. Mr.  
6 Kolb stated that's Mr. MaRous' study. Chairman Blackwell stated that he thinks it is Exhibit 10.  
7 Mr. Kolb stated yeah, with respect to Mr. MaRous' Market Impact Study.

8  
9 Chairman Blackwell stated yeah, this is kind of what you were talking about earlier. He thinks  
10 this reiterates some of the things that you were saying about the numbers. But in there, Mr.  
11 MaRous talks about, "However, it appears that the property has been reclassified as tax-exempt  
12 based upon information currently available from the Cook County Assessor," like you said. Then  
13 he noticed, jump down it says, "If the estimated market value of the subject property were to be  
14 equal to the \$4.5 million purchase price set forth by the pending contract," he would imagine this  
15 is the amount that you would have to pay to acquire the property from Reverend Oliver, or All  
16 Nations Assembly Church.

17  
18 Mr. Kolb stated that there are a number of permutations that can happen between the bank, the  
19 assessor, and the -- Chairman Blackwell stated oh, yeah, he is not trying to manage your  
20 finances. He has his own checkbook to worry about. He is just kind of reading off of what you  
21 got here. Mr. Kolb stated it's dicey, yeah. Chairman Blackwell stated yeah, he knows that you  
22 had talked about the financing and the different avenues for that. That's obviously subject to  
23 banking and other types of issues. "... based upon an assessment ratio of 25 percent for  
24 commercial properties, an assessed value of \$1.125 million would be indicated." And then you  
25 go on to talk about utilizing the 2018 tax multiplier rate, back at that number \$585,364.00. That's  
26 consistent in the documents that he reviewed about potential, and he knows it is not exact, but  
27 it's the potential revenue per annum that would be paid out in property taxes. A lot of it going  
28 into the County, and not out here as you've indicated because you've got the library, you've got  
29 the Park District, and everything else. But Olympia Fields would be able to obtain or acquire  
30 some of that revenue from the breakout. Is that correct? Mr. Kolb stated yes. Chairman  
31 Blackwell stated that he doesn't need for you to tell him how much. He is just trying to get this  
32 out there to try and understand it.

33  
34 Mr. Kolb stated that he can bring Mr. MaRous. He does a lot of the valuations on like the O'Hare  
35 Eminent-Domain Cases when the airport expands. We went and got the best to put this report  
36 together for you. He hates to talk about his report. He would rather just bring him before you  
37 guys.

38  
39 Chairman Blackwell stated no, he doesn't want you to talking out of school. He knows that you  
40 don't do just that. You do legal stuff and a lot of other things in a development. Let me just ask  
41 Mike Hoffman, will you unmute? Do you think it would be a good idea for Mr. MaRous to come  
42 and we can kind of go over some of these figures to get a better clarification on potential — He  
43 can maybe even show us the breakout of what the Park District will get and so forth. But you  
44 would have to ask him the questions. That's why he is asking you.

45  
46 Mr. Hoffman stated no problem. He can come up with a list of questions. He thinks it would be  
47 good for multiple reasons. The big part of this study was looking at the impact of this project on

1 surrounding property values, which he is sure a lot of the residents want to hear about. So, if  
2 nothing else, for that, he thinks it would be helpful for him to explain his study a little bit and  
3 give us a chance to ask him some questions. Chairman Blackwell stated okay.  
4

5 Trustee Pennington stated and certainly the proportionate share that the Village of Olympia  
6 Fields would garner from his analysis would be important too. It doesn't appear here, but  
7 certainly he could provide that. Mr. Hoffman stated that's an easy number. Chairman Blackwell  
8 stated you're right, Trustee Pennington. Chairman Blackwell stated Attorney Kolb, he thinks it  
9 would be a good idea for him to come to our second meeting, just to be able to give us a better  
10 perspective and a little bit more breakdown on that revenue issue so we can see it for ourselves.  
11 He stated not that it's a deal breaker, or a deal maker, it's just information we need to probably  
12 know that is going to be relevant to the Petition.  
13

14 Chairman Blackwell stated that he has another question. He is going to cut you loose here in a  
15 minute because he has taken long enough already. This deals with property values. In your  
16 position statement, he thinks it was on Page 36 of that same exhibit. But, at any rate, there was  
17 some language that referred to a potential increase in property values as a result of this facility  
18 going up and being established adjacent and near certain properties. Can you talk about that a  
19 little bit, or should he just wait? Chairman Blackwell stated that he is just throwing out questions  
20 he has got. He is not asking the person that he is speaking to at the time to know all the answers.  
21 But this is something else. He would like to see a little bit more exploration regarding potential  
22 increase in property values and studies as a consequence of this facility specifically, and others  
23 like it. Even if he doesn't use, you know, stuff he has done before you guys have planned, to give  
24 us some numbers on how property values might, in fact, increase with a clear understanding that  
25 this is not in concrete. Because everything has to be kept in perspective about the current market  
26 values, density, et cetera. He would like to hear from him on that. He thinks that is something of  
27 interest, particularly when we might very well have residents who fear their property values will  
28 devalue. But you have clearly made the point that in most instances that you are aware of, or  
29 your experience with your group, they have, in fact, increased. He would like to hear more from  
30 Mr. MaRous regarding that.  
31

32 Chairman Blackwell stated that he has one more question and he is going to turn it back over to  
33 Teska because we are going to have to wrap up here sooner than later. Chairman Blackwell  
34 stated that his other question was, you and Kelly have worked together for a number of years,  
35 and you do this for a living. This is what you do. You clearly, and obviously, are quite expert at  
36 doing this. What other facilities have you had established through your zoning efforts for  
37 different organizations? He knows that you have a pretty extensive history of doing this stuff and  
38 you have been doing it for years. Can you give us you and Kelly's kind of background on how  
39 many you've done? What areas? Are they all in Illinois? Are they in different states? Tell us a  
40 little bit about that.  
41

42 Mr. Kolb stated well, sure. Mr. Kolb stated that he and Kelly have done zoning and entitlement  
43 work for CVS Caremark he guesses over the course of 10 years maybe three dozen or more of  
44 those. Chairman Blackwell stated wow, okay. Mr. Kolb stated that involves driving to Ottawa,  
45 Illinois and sitting with the Mayor at 11 P.M. at a bowling alley and telling him how CVS is  
46 going to benefit the community, and trying to get a Minute Clinic passed. We are currently  
47 working hand-in-hand with a nationwide reach that acquires truck terminal property for logistics,

1 which is a very difficult thing. He stated not many people want to bring trucks into their  
2 community. That requires a lot of care and finesse in order to get those properties entitled. He  
3 stated a whole number of different medical buildings affiliated with Sherman Hospital. Medical  
4 Buildings affiliated with Delnor, which is now part of Northwestern Memorial. Residential  
5 projects, we did one of the largest residential projects that ever came through St. Charles in the  
6 last 10, 20 years. It was a 300-unit residential development and got that entitled for another  
7 client. We do zoning and development work for Export Fitness. They have 63 gyms nationwide.  
8 We are their counsel for identifying new sites and new opportunities. Mr. Kolb stated yeah, and  
9 we have certainly done residential developments for the owners of Fisher Nuts, a good client of  
10 ours, the Sanfilippo Family. We are well-versed in Land Use and entitlement work. If you do it  
11 for others long enough, you begin to see value.

12  
13 Mr. Kolb stated that he was just on this site a couple weeks ago. He can just see it when it's  
14 developed. He sees the community around it. He thinks this could be good. He knows you were  
15 talking on property values. He couldn't even drive down the driveway of this property because it  
16 had so many potholes. You had to like meander in and out of it. He thought this is really ripe for  
17 redevelopment. He knows maybe some on the staff wanted a hotel or some different uses to it.  
18 He understands that you really only can develop a property like this once in a very long time.  
19 And then you get one shot at it. Maybe this isn't your favorite use for the property. He thinks  
20 there is a demand for it. He thinks it is a lot of money to build it. He thinks if we can support the  
21 numbers, he thinks it could be a good business model and get it up and running.

22  
23 Chairman Blackwell stated that he takes it that Kelly is an attorney and a partner in your law firm  
24 as well. Is that correct?

25  
26 Mr. Kolb stated that she has been with us about 10 years. She's a paralegal. Commissioner  
27 Blackwell stated oh. Mr. Kolb stated she's excellent though. Commissioner Blackwell stated oh,  
28 absolutely. Mr. Kolb stated that he considers her as good as anybody that he has worked with.  
29 She's a lot better than he is.

30  
31 Chairman Blackwell stated and you guys, this whole issue came up about and a question was  
32 asked about transferability of facilities. At one point his mind kind of ran a little bit away from  
33 him and he was thinking, well, are you guys kind of like a unit and a professional group that goes  
34 in and makes these acquisitions through doing the zoning, and then you bring in these great  
35 experts like John, who knows his stuff hand and glove, and then it's purchased and then it's  
36 sold? He thought about, after years of being on the Planning Commission, what people say and  
37 what people do. Sometimes he finds that it's not necessarily surreptitious on their part to do  
38 things that are inconsistent with what they initially thought and planned to do, but it does happen.  
39 He stated for instance, one of the representatives from Wal-Mart came when they petitioned us to  
40 build a Wal-Mart down the street. One lady, a resident from the community asked, "Now, sir, are  
41 you planning to close the Wal-Mart on Cicero?" And he answered it very specifically and very  
42 clear. He said, "At this time, Ma'am, we have no plans to close the Wal-Mart on Cicero." And  
43 guess what happened after the Wal-Mart was built in Olympia Fields? He stated but to say that is  
44 to say, he knows plans change, and financing results, and different things happen. The question  
45 he guesses, is do you guys go out and make these acquisitions? And you got this team of great  
46 people. And you get these places established, and your group, and your financial folks, Mr.  
47 Myers comes in, and whomever else you need to utilize, and you purchase these, and then they

1 are flipped out in two years, and then we don't see John anymore. We know we won't see you.  
2 But John, who is involved in the operational stuff disappears. Does that happen? Or is this, we  
3 plan to stay, or how does that work?  
4

5 Mr. Kolb stated yeah, so, we thought a lot about that because that is a common business model  
6 with any developer, right. You buy property. It's common for a developer to buy property, tie it  
7 up, re-entitle it, put the blue sport coat on it and sell it based on the increase that you have added.  
8

9 Chairman Blackwell stated that's what he is asking because it happens. It's okay. Mr. Kolb  
10 stated that there are a lot of developments that are operated by national retailers that started out  
11 someone has to put in the time, and energy, and effort it takes to convince someone that the use  
12 of the property makes sense. That this is really a best use for Medical District and that this  
13 facility looking like this, turnkey, is something that could work. He stated because a lot of  
14 national operators that operate medical facilities or hospitals, they don't specialize in the two  
15 years it takes to get architectural drawings put together, and to tie up the land, and deal with the  
16 assessor, and the All Nations Assembly. Chairman Blackwell stated absolutely?  
17

18 Mr. Kolb stated what they want to do is come in and build their fill in the blank, right? He  
19 guesses, yes, that is something that we've done. We have done it for clients for 20 years. But we  
20 did meet together, and we did look at this and think. We are actually excited about it. Can we  
21 ensure that this is going to be the group? The goal is to try to operate this really. There are a lot  
22 of dominoes that have to fall in order, in order to make that happen, from capital, to timing of  
23 closing, to zoning entitlements, to whatever conditions are going to be on this Special Use if it is  
24 granted. Can we get the bank onboard? There's a very small world at the top as far as managed  
25 care organizations go that have these relationships too. We have to get into Cigna, Etna, Blue  
26 Cross/Blue Shield and get on their list of preferred facilities where they are going to send  
27 patients and negotiate subscriber agreements with them, where we have a fixed rate pursuant to a  
28 certain amount. All of that has to be done before we can even build the set of financials that an  
29 investor looks at to throw money into our group to be able to staff this thing. You can't just staff  
30 it up and open day one, like a lemonade stand and hope people come.  
31

32 Mr. Kolb stated to answer your question, yeah, we can't sit here and tell you that if we were to  
33 entitle it fully that that possibility is off the table. He thinks we would be shooting ourselves in  
34 the foot. He stated but with that being said, our group has looked at operating this. We've also  
35 looked at taking a portion of our land and building like a nursing home on it, or assisted living  
36 facility similar to what John operates right near it. So, we would have two accessory facilities.  
37 We thought this could be a real Medical Campus. Who owns the property to the west of us? He  
38 thinks the hospital owns it. It seems like a whole bunch of vacant land. Maybe they want to  
39 acquire some of that and do a Master Site Plan for future medical buildings. We've looked at a  
40 long-term presence here. Right now, we are on first base. We are trying to get the property zoned  
41 to medical, and try to get a Special Use for this.  
42

43 Chairman Blackwell stated so, John, John, the operational expert, you are a part of their traveling  
44 team. Is that correct? You've known these people. You use to cut their hair, or they use to cut  
45 your grass, or something you said earlier.  
46

1 Mr. Vrba stated like he said, he has known Andrew for 22 years. He knew his parents. Chairman  
2 Blackwell stated the piano, that's right. Mr. Vrba stated that he has known the family. They are  
3 great people. They are church going people. They are community people. He is excited. When  
4 they brought him in, he met with Ted out in their offices. Mr. Vrba stated that he was excited  
5 about this opportunity. He stated that when he, Mark, and Jeff got to go out to The Retreat in  
6 Minnesota, when you see it first-hand, that's the eyeopener. He sees the elderly every day. He  
7 sees the passion. He understands.

8  
9 Chairman Blackwell inquired how long have you been with this group in terms of doing  
10 acquisitions, or zoning, and putting forth your Petitions. How long have you been working with  
11 them?

12  
13 Mr. Vrba stated that this is our first project. Chairman Blackwell stated oh, okay. That was his  
14 question.

15  
16 Chairman Blackwell stated that he will reserve any further questions he has for a later date. We  
17 are really running late folks. At this point, he has to go back to formalities. He knows that the  
18 Commissioners have more questions. So, guys, don't get mad at him for shutting things down  
19 right now, but it is getting late. You will certainly have an opportunity to ask follow-up questions  
20 as we've indicated at our next meeting, as we've got that scheduled.

21  
22 Chairman Blackwell stated that he is going to ask Mike Hoffman to load in his questions. He  
23 stated John, what we are planning on doing is getting some questions to you so you won't get  
24 them thrown at you at the last second like he has been doing all night. He doesn't apologize for it  
25 though. And then the Commissioners will come back and ask questions as well. You'll get a list  
26 of questions that you guys can kind of shake out. He would like to see Mr. MaRous to have him  
27 print some more numbers, and just give us a little bit better perspective about some of the more  
28 positive things that could come out of this if, in fact, you approve.

29  
30 Chairman Blackwell stated that the other thing he would like to have happen, he is going to  
31 direct John McDonnell, our Building Commissioner, because one thing that caught him a little  
32 bit awry, was that St. John's Hospital, a corporate group, a hospital, that is a part of this  
33 community has no representative here. And they might very well have out of 26 or 30 people  
34 whatever, someone listening in. He is going to direct our Building Commissioner, John  
35 McDonnell, under our Ordinance, to serve Due Process Notice. You might want to put your  
36 lawyer back on. He is taking notes. He is sure he is listening. Sir, Due Process Notice, an  
37 additional Notice to the hospital and adjoining residents, by putting Notice on their door. There  
38 might be 10 or 15 different residents in that area, but specifically to serve the Rich Township  
39 District. What are we, 162? The Rich Central group. They closed one school. So Rich Central is  
40 going to have more students ultimately, serve them with Notice for our next meeting. And at  
41 least, bring it to their attention where we serve proper Due Notice to them to afford them an  
42 opportunity to weigh-in regarding their perspective since they are adjoining neighbors to this  
43 potential facility being established.

44  
45 Chairman Blackwell inquired of John McDonnell whether he could hear him. Mr. McDonnell  
46 stated yes, he can. Chairman Blackwell stated okay, John, if you would, and we've done this  
47 before, and with this particular situation with this COVID, and the whole discombobulation and



1 disconnection people have faced with remote, he would feel more comfortable if we would  
2 pursue the provision in our Ordinance that would allow us to serve specific Due Process Notice  
3 to adjoining businesses and residents in the area, to at least give them the opportunity to weigh-in  
4 with questions, or to contact you or Teska, and say, "Hey, I'd like to get on and actually say  
5 some things." We will see how that plays out. He thinks that is appropriate Due Process and  
6 consideration for fairness to all individuals.

7  
8 Mr. McDonnell stated yes, we want to make sure that the public has every opportunity to ask  
9 their questions. Chairman Blackwell stated absolutely. Mr. McDonnell stated we all know that  
10 this is a very uncommon time right now. It's becoming a common practice, but it's really a little  
11 bit unorganized if you ask him. That we need to kind of get everybody from the public's  
12 questions and get them across. We are, from our meeting tonight, any questions that have come  
13 through the chat thing there, Mike Hoffman is gathering those up. We've also given a website  
14 that people can send questions to. We will certainly forward those on to Mr. Kolb's office. So  
15 that like you said, they are not blindsided with any questions. We are giving them a chance in  
16 these uncommon times to answer those questions also from the public. It's going to be difficult.  
17 We are going to try to not have duplicate questions on the same thing. But we certainly don't  
18 want anybody to tell us that we did not give them the opportunity to ask their question, or to give  
19 their comment.

20  
21 Chairman Blackwell stated absolutely. Thank you, John. If you would take that under  
22 advisement. He knows that you have staff who can handle that. He would certainly want the  
23 hospital, and whomever is CEO, he thinks one of the top administrators actually lives in the  
24 Village. But nevertheless, he would like them to be served with Notice of our next meeting. And  
25 if they are interested in, and we find it feasible for them to come on Zoom to ask specific  
26 questions if they have that level of questions, we would see if we could accommodate that. He  
27 can't make that promise.

28  
29 Chairman Blackwell stated but the Rich Township Schools, since Rich Central is directly across  
30 the street, we need to serve the Superintendent and let him know that we are having these  
31 hearings, and give him an opportunity, and the School Board, to at least weigh-in. If they have  
32 nothing to say, that's fine. But it's still appropriate for us to give them that Notice, as well as  
33 residents as we did before that are nearby or adjoin that particular location. He thinks in the back,  
34 he doesn't know if that is Arcadia, or whatever. But there are some residents who are nearby, and  
35 those people should have Notices placed in their door. He doesn't think we have to call them.  
36 But you know how to do all this, John, so he can't tell you how to do your job. Mr. McDonnell  
37 stated okay. Chairman Blackwell stated so do what you have to do there.

38  
39 Chairman Blackwell stated that he thinks the other thing we need to do is, he is going to make a  
40 Motion that we continue the Public Hearing regarding this matter for purposes of having  
41 questions asked and answered by the Petitioner that have come in through our bifurcated, new  
42 way system of Zoom Chat, and emails that would come to the Village Administration, for  
43 purposes of forwarding those to the Petitioner, and giving them adequate opportunity to address  
44 those prior to our October 20<sup>th</sup> meeting.

45  
46 Mr. McDonnell inquired is that meeting date okay with Andrew Kolb. Mr. Kolb stated yes, that  
47 works for us.

1 Chairman Blackwell stated great, and that way you can get those questions ahead of time, so you  
2 don't have to bounce off the top of your head and answer stuff.

3

4 Mr. Kolb inquired of Chairman Blackwell whether or not he wants written responses. Chairman  
5 Blackwell stated no, no. This is just for your purposes so you can designate to whomever you  
6 like on your staff to answer those. We didn't want to hit you with a bunch of questions and  
7 people are like, you know. We don't want to hit you with some potentially off the wall questions  
8 like he did.

9

10 Mr. McDonnell stated that we are going to have to read those into the record. At least it gives  
11 you a chance to think about an answer to the questions.

12

13 Chairman Blackwell stated right. He inquired of Mr. Kolb whether he could at least invite Mr.  
14 MaRous. He knows that Mr. Kolb can't do his schedule and make him come. He is his own boss.  
15 If you would ask him politely, we would love to invite him to weigh-in on your team to answer  
16 some of those questions that regard the property values. Is that sufficient and adequate, Andrew?

17

18 Mr. Kolb stated yes, that's more than fine. Do you want our traffic engineer too? He knows you  
19 had some questions about traffic.

20

21 Chairman Blackwell stated yeah, this traffic thing was in his mind. He does a multiplier out, and  
22 you talk about 120 people with two visitors a month, he starts running numbers up in his head  
23 and it gets him crazy. Yes, bring him anyway if he is available. He might not even have any  
24 further questions regarding that. Maybe some of the other Commissioners or others will have  
25 those so it doesn't hurt.

26

27 Chairman Blackwell stated that he is going to restate his Motion to the Commissioners.  
28 **Motion by Chairman Blackwell, Second by Commissioner Green to Continue the Public**  
29 **Hearing for October 20<sup>th</sup>, and Resume the Hearing, and at that Time Following Responses**  
30 **and Questions, we will have the Commissioners Resume Questions that they may have, as**  
31 **well as Floating Questions from the Public.**

32

33 Chairman Blackwell stated that we need a roll call voice vote because we are on Zoom. He asked  
34 Commissioner Green to do a roll call voice vote based on that Motion.

35

36 **Roll Call Vote by Commissioner Green:**

37 **Commissioner Jones: Yes.**

38 **Commissioner Betts: Yes.**

39 **Commissioner Bradshaw: Yes.**

40 **Commissioner Green: Yes.**

41 **Chairman Blackwell: Yes.**

42

43 Chairman Blackwell stated and Trustee Pennington can vote too, because he's not voting on the  
44 matter, he's voting on procedure.

45

46 **Trustee Pennington: Aye.**

**Motion Carried.**

47

1 Chairman Blackwell stated very well. We have a unanimous vote to continue the Public Hearing  
2 until October the 20<sup>th</sup>, and pursue further questions. And have the Petitioner give us a brief  
3 summary, and then we will go back to the regular course of business that we have outlined. At  
4 this point, he will entertain a Motion to Adjourn.

5

6 **ADJOURNMENT:**

7

8 **Motion by Trustee Pennington, Second by Commissioner Betts to Adjourn the Meeting at**  
9 **10:07 P.M.**

10

11 **Roll Call Voice Vote by Commissioner Green.**

12

13 **Commissioner Jones: Yes.**

14 **Commissioner Betts: Yes.**

15 **Commissioner Bradshaw: Yes.**

16 **Commissioner Green: Yes.**

17 **Chairman Blackwell: Yes.**

18 **Trustee Pennington: Yes.**

**Motion Carried.**

19

20 Chairman Blackwell stated that we are hereby adjourned. We will follow-up with our next  
21 meeting on October 20<sup>th</sup>. Thank you very much folks. Appreciate your time.

22

23 Respectfully submitted by Faith Stine.

24

25