STATE HEALTH PLANNING AND DEVELOPMENT AGENCY

100 NORTH UNION STREET, SUITE 870

MONTGOMERY, ALABAMA 36104

CON APPLICATION ADVERTISEMENT FORM (410-1-7-.06)

NOTE: The party seeking a Certificate of Need (CON) must publish the notice in a newspaper of general circulation once a week for two consecutive weeks in the affected area. The size of the font must be at least 12. **Proof of publication of this notice must be filed with SHPDA within thirty days of the filing of a CON application.** (See SHPDA Rule 410-1-7-.06)

[*insert name of applicant*] has filed a Certificate of Need (CON) application for:

> [*insert a short description of the project for which CON authority is sought, including a reference to the affected service area. Please get SHPDA staff approval for the description*].

Individual's seeking further information regarding the Certificate of Need application may contact:

Bradford Williams, Health Planning Administrator
State Health Planning and Development Agency
100 North Union Street, Suite 870
P.O. Box 303025
Montgomery, Alabama 36130-3025
(334) 242-4103
Fax: (334) 242-4113