**STATE HEALTH PLANNING AND DEVELOPMENT AGENCY**
100 NORTH UNION STREET, SUITE 870
MONTGOMERY, ALABAMA 36104

# SAMPLE LETTER

Emily T. Marsal, Executive Director
State Health Planning and Development Agency
P.O. Box 303025
Montgomery, AL 36130-3025

RE: Act No. 98-339

Dear Ms. Marsal:

In accordance with Act No. 98-339, _____ is notifying you that we are
Home Health Agency

you that we are now receiving referrals in _____ as of _____.
Referral County Date of First Referral

_____ is contiguous to _____ for which we currently hold
Referral County CON County

an active Certificate of Need.

_____ has no intention of establishing a branch office in _____.
Home Health Agency Referral County

_____ has no intention of incurring a capital expenditure in excess of five
Home Health Agency

hundred dollars ($500.00) in _____.
Referral County