



GEORGIA DEPARTMENT OF
COMMUNITY HEALTH

Submit plans to: Georgia Department of Community Health
Healthcare Facility Regulation Division
Architectural Review Unit
2 Peachtree Street, NW; 5th Floor
Atlanta, GA 30303
ehotton@dch.ga.gov
ewilkins@dch.ga.gov
FAX 770-344-4282

2012 DCH PLANS TRANSMITTAL LETTER

PLEASE COMPLETE ALL OF THE FOLLOWING and PROVIDE ACTIVE MAILING ADDRESSES

DATE SUBMITTED: May 11, 2012 (MINIMUM 45 DAYS PRIOR TO DESIRED START OF CONSTRUCTION)
CON, LNR or DET NUMBER: DET 2011041 (REQUIRED - SEE CHECKLIST BELOW)

FACILITY NAME: Peach Regional Medical Center (PEACH 06)
PROJECT NAME: Replacement Hospital for Peach Regional Medical Center (Early Release Package)
STREET ADDRESS: 1960 Highway 247 Connector
CITY: Byron, **GEORGIA** ZIP CODE: 31008 - COUNTY: Peach
CONTACT PERSON: (Dr./Mr./Mrs./Ms.) Nancy Peed PHONE NUMBER: (478) 825-8691
E-MAIL: npeed@peachregional.com

OWNER: (COMPANY NAME) Peach County Hospital Authority
MAILING ADDRESS: 601 Blue Bird Blvd.
CITY: Ft. Valley STATE: Georgia ZIP CODE: 31030
CONTACT PERSON: (Dr./Mr./Mrs./Ms.) Nancy Peed PHONE: (478) 825-8691
E-MAIL: npeed@peachregional.com

SUBMITTED BY: (COMPANY NAME) Hinson Miller Kickirillo Architects PLLC
MAILING ADDRESS: 5300 Maryland Way, Suite 109
CITY: Brentwood STATE: Tennessee ZIP CODE: 37027
CONTACT PERSON: (Dr./Mr./Mrs./Ms.) Don Miller PHONE: (615) 369-6020
E-MAIL: dmiller@hmka.com

? Are you the: Architect Owner Consultant Contractor Other
Architects Name & Georgia Registration Number: Donald C. Miller - GA Registration No. RA009843

TYPE OF FACILITY

HOSPITAL: NURSING HOME: AMBULATORY SURGERY CENTER: OTHER:

PURPOSE OF SUBMISSION

PRELIMINARY or DESIGN DEVELOPMENT REVIEW: ADDENDUM:
FINAL REVIEW and CONSTRUCTION PERMIT: REVISIONS:

Estimated Construction Cost: \$16,800,000.00 Total Square Footage of Project: 69,904 SF
Estimated Start of Construction: May - 2012 Estimated Completion: June - 2013

Specifications and Structural Drawings are not required.
(Include any Door, Hardware or Finish Schedules from Specifications.)

CHECKLIST OF ITEMS TO BE INCLUDED WITH FINAL PLAN REVIEW SUBMITTAL

FAILURE TO SUBMIT ALL ITEMS BELOW MAY DELAY ACCEPTANCE OF FINAL PLANS FOR REVIEW AND APPROVAL
(Plans will not be logged in for final review prior to CON, LNR or DET approvals)

- 1) DCH PLANS TRANSMITTAL LETTER
- 2) DCH PROGRAM NARRATIVE FORM
- 3) ONE SET OF CONSTRUCTION PLANS - SIGNED & SEALED AS REQUIRED
- 4) AN ELECTRONIC COPY OF THE PLANS ON CD or DVD (ADOBE .PDF FORMAT)
- 5) A COPY OF ANY DCH REGULATORY APPROVAL LETTER: CON , LNR or DET

DCH USE ONLY: Date Received: 5-14-2012 DCH Project Number: PEACH-06