



NC DEPARTMENT OF HEALTH AND HUMAN SERVICES

ROY COOPER • Governor
MANDY COHEN, MD, MPH • Secretary
MARK PAYNE • Director, Division of Health Service Regulation

January 30, 2020

Richard Welch
Colony Capital
590 Madison Avenue
New York NY 10022

No Review

Record #: See Attachment A
Facility Name: See Attachment A
FID #: See Attachment A
Business Name: See Attachment A
Business #: See Attachment A
Project Description: Change in operator of the facility
County: See Attachment A

Dear Mr. Welch:

The Healthcare Planning and Certificate of Need Section, Division of Health Service Regulation (Agency) received your correspondence regarding the above referenced proposal. Based on the CON law in effect on the date of this response to your request, the proposal described in that correspondence is not governed by, and therefore, does not currently require a certificate of need. If the CON law is subsequently amended such that the above referenced proposal would require a certificate of need, this determination does not authorize you to proceed to develop the above referenced proposal when the new law becomes effective.

You may need to contact the Agency's Adult Care Licensure Section to determine if they have any requirements for development of the proposed project.

This determination is binding only for the facts represented in your correspondence. If changes are made in the project or in the facts provided in the correspondence referenced above, a new determination as to whether a certificate of need is required would need to be made by this office.

Please do not hesitate to contact this office if you have any questions.

Sincerely,

Handwritten signature of Michael J. McKillop
Michael J. McKillop
Project Analyst

Handwritten signature of Martha J. Frisone
Martha J. Frisone
Chief

cc: Adult Care Licensure Section, DHSR

NC DEPARTMENT OF HEALTH AND HUMAN SERVICES • DIVISION OF HEALTH SERVICE REGULATION
HEALTHCARE PLANNING AND CERTIFICATE OF NEED SECTION

LOCATION: 809 Ruggles Drive, Edgerton Building, Raleigh, NC 27603
MAILING ADDRESS: 809 Ruggles Drive, 2704 Mail Service Center, Raleigh, NC 27699-2704
https://info.ncdhhs.gov/dhsr/ • TEL: 919-855-3873

Attachment A

Name of Facility	County	FID	New Operator of the Facility	Business #	Record #
Carillon Assisted Living of Lincolnnton	Lincoln	000456	GA HC REIT II Lincolnnton ALF TRS Sub, LLC	3174	3196
Carillon Assisted Living at Indian Trail	Union	080125	GA HC REIT II Indian Trail ALF TRS Sub, LLC	3175	3197
Carillon Assisted Living of Knightdale	Wake	000453	GA HC REIT II Knightdale ALF TRS Sub, LLC	3176	3198
Carillon Assisted Living of Durham	Durham	100294	GA HC REIT II Durham ALF TRS Sub, LLC	3177	3199
Carillon Assisted Living of Fuquay-Varina	Wake	000461	GA HC REIT II Fuquay-Varina ALF TRS Sub, LLC	3178	3200
Carillon Assisted Living of Fayetteville	Cumberland	080399	GA HC REIT II Fayetteville ALF TRS Sub, LLC	3179	3201



Colony Capital, Inc.
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VIA CERTIFIED MAIL

January 10, 2020

Martha Frisone
Chief, Healthcare Planning and Certificate of Need
Division of Health Service Regulation
North Carolina Department of Health and Human Services
2704 Mail Service Center
Raleigh, NC 27699-2704
Martha.Frisone@dhhs.nc.gov

Re: Notice of Change of Ownership / Adult Care Homes

Dear Martha:

The purpose of this letter is to provide notice of the intent of the Current License Holders of the North Carolina adult care homes identified on Attachment A (the “Facilities”) to transfer the ownership and operations of the Facilities to the Prospective License Holders (also listed on Attachment A). The transfer of ownership and operations is anticipated to occur on or after January 1, 2020 upon issuance of the licenses. Ownership of the buildings will not change. The Prospective License Holders will be submitting the change of ownership applications for the transfer of ownership and operations.

We appreciate very much your attention to this matter.

Sincerely,

Richard Welch

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Martha Frisone
 Chief, Healthcare Planning and Certificate of Need
 Division of Health Service Regulation
 North Carolina Department of Health and Human Services
 2704 Mail Service Center
 Raleigh, NC 27699-2704
 Re: Notice of Change of Ownership / Adult Care Homes (continued)
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ATTACHMENT A

Current License Holder and License Number	Prospective License Holder	Facility Name	Address
Carillon Assisted Living of Lincolnton, LLC/ HAL-055-011	GA HC REIT II Lincolnton ALF TRS Sub, LLC	Carillon Assisted Living of Lincolnton	440 Salem Church Road Lincolnton, NC 28092
Carillon Assisted Living of Monroe, LLC/ HAL-090-031	GA HC REIT II Indian Trail ALF TRS Sub, LLC	Carillon Assisted Living at Indian Trail	5306 Secrest Short Cut Rd Monroe, NC 28110
Carillon Assisted Living of Knightdale, LLC/ HAL-092-166	GA HC REIT II Knightdale ALF TRS Sub, LLC	Carillon Assisted Living of Knightdale	2408 Hodge Road Knightdale, NC 27545
Carillon Assisted Living of Durham, LLC/ HAL-032-124	GA HC REIT II Durham ALF TRS Sub, LLC	Carillon Assisted Living of Durham	4713 Garrett Road Durham, NC 27707
Carillon Assisted Living of Fuquay Varina, LLC/ HAL-092-159	GA HC REIT II Fuquay-Varina ALF TRS Sub, LLC	Carillon Assisted Living of Fuquay Varina	6516 Johnson Pond Road Fuquay-Varina, NC 27526
Carillon Assisted Living of Fayetteville, LLC/ HAL-026-056	GA HC REIT II Fayetteville ALF TRS Sub, LLC	Carillon Assisted Living of Fayetteville	1164 71 st School Road Fayetteville, NC 28314