



NC DEPARTMENT OF  
**HEALTH AND  
HUMAN SERVICES**  
Division of Health Service Regulation

ROY COOPER • Governor  
MANDY COHEN, MD, MPH • Secretary  
MARK PAYNE • Director

July 10, 2018

Charles E. Trefzger, Jr.  
PO Box 2568  
Hickory, N.C. 28603-2568

**No Review**

**Record #:** 2647  
**Facility Name:** Hertford House  
**FID #:** 160064  
**Business Name:** Perquimans Opco Holdings, LLC & Perquimans Propco Holdings, LLC  
**Business #:** 2346 & 2345  
**Project Description:** Change indirect ownership interests  
**County:** Perquimans

Dear Mr. Trefzger:

The Healthcare Planning and Certificate of Need Section, Division of Health Service Regulation (Agency) received your letter of June 29, 2018 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 your correspondence is not governed by, and therefore, does not currently require a certificate of need. However, please note that 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.

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

It should be noted that this determination is binding only for the facts represented in your correspondence. Consequently, if changes are made in the project or in the facts provided in your correspondence referenced above, a new determination as to whether a certificate of need is required would need to be made by this office. Changes in a project include, but are not limited to: (1) increases in the capital cost; (2) acquisition of medical equipment not included in the original cost estimate; (3) modifications in the design of the project; (4) change in location; and (5) any increase in the number of square feet to be constructed.

Please contact this office if you have any questions. Also, in all future correspondence you should reference the Facility ID # (FID) if the facility is licensed.

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: 2704 Mail Service Center, Raleigh, NC 27699-2704  
www.ncdhhs.gov/dhsr/ • TEL: 919-855-3873

Sincerely,



Jane Rhoe-Jones  
Project Analyst



Martha J. Frisone, Chief  
Healthcare Planning and Certificate of Need Section

cc: Adult Care Licensure Section, DHSR  
Amy Craddock, Assistant Chief, Healthcare Planning, DHSR

***Perquimans Opco Holdings, LLC &  
Perquimans Propco Holdings, LLC***

*Post Office Box 2568  
Hickory, North Carolina 28603-2568*

June 29, 2018

Ms. Martha Frisone, Chief  
Division of Health Service Regulation  
Healthcare Planning and Certificate of Need Section  
North Carolina Department of Health & Human Services  
2704 Mail Service Center  
Raleigh, NC 27699-2704



Re: Request for Non-Withdrawal of Certificate of Need for Project ID #R-11126-16 by Perquimans Propco Holdings, LLC and Perquimans Opco Holdings, LLC for Hertford House, Facility ID #160064

Dear Ms. Frisone:

I am writing on behalf of Perquimans Propco Holdings, LLC (“Lessor”) and Perquimans Opco Holdings, LLC (“Lessee”), North Carolina limited liability companies with their principal place of business located at 400 Second Avenue NW, Hickory, North Carolina 28601. Lessor and Lessee are currently developing Project ID #R-11126-16 (the “Project”), which involves the construction of Hertford House in Perquimans County, North Carolina (the “Facility”). The Project’s certificate of need was issued to Lessor and Lessee on May 19, 2016.

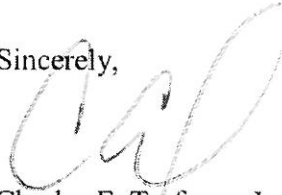
Lessor has obtained financing and, as part of the terms of the financing, the corporate structure of Lessor and Lessee will change. Please refer to the attached Exhibit A that shows the current corporate structure, as well as the new corporate structure after the finance transaction is complete. Other than the changes reflected in Exhibit A, no other changes are contemplated.

Parties to the Project believe it is in the best interests of the community for the transaction to take place. Lessor and Lessee will continue to act as Lessor and Lessee, respectively. The proposed change only relates to the entity that ultimately holds the ownership interests in the Lessor and Lessee. No transfer of the certificate of need is contemplated by this transaction. The financing will provide the Project with the capital necessary to develop the Facility.

In accordance with N.C. Gen. Stat. § 131E-189(c), I intend for this letter to serve as prior written notice to the Agency of the proposed transaction by which the corporate structure of the Lessor and Lessee is changing. Furthermore, I request that the Agency find good cause for the proposed ownership change and conclude that the Project’s certificate of need will not be withdrawn as a result of such change.

Should you need additional information in order to make a decision on this matter, please do not hesitate to contact me directly.

Sincerely,

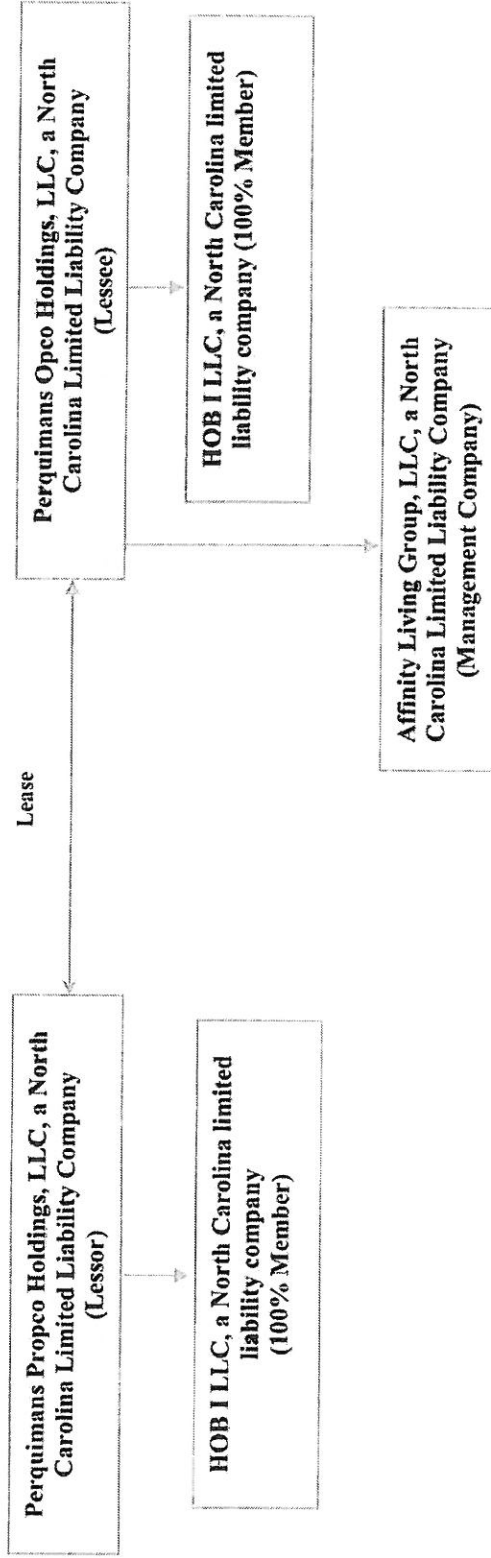
A handwritten signature in black ink, appearing to read 'CET', is positioned above the typed name.

Charles E. Trefzger, Jr.  
Authorized Representative  
Perquimans Opco Holdings, LLC  
Perquimans Propco Holdings, LLC

Exhibit A:  
Proposed Changes to Corporate Structure

**EXHIBIT A**

**Hertford House  
Current Corporate Structure**



# Hertford House Proposed New Corporate Structure

