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— DETAILED INFORMATION SIGNATURE MATRIXTM —

Acquisition Materials Check List for Cambridge Realty Capital Companies for Independent Living and Assisted Living Facilities

--- Privacy Statement ---

We at Cambridge Realty Capital Companies ("Cambridge" or "we") understand the sensitivity of your personal and corporate financial information. Our business depends on your trust. Thus, we take steps to ensure the privacy and security of your personal and corporate financial information. Information is not released to anyone except Cambridge employees who have a need to know in order to perform their functions, to our client's personnel or to others as needed to fulfill our or your business operations and financial requests. Cambridge uses reasonable efforts to establish and maintain administrative, technical and physical safeguards to protect the security, confidentiality and integrity of all personal and corporate financial and other information.

Your Name:	
Name of Facility:	
City / State:	

	Attached	Received	Open
1.MANAGER INFORMATION			
Narrative of Management Company — The narrative shall include a summary of			
previous and current management experience by project name, location, and			
number of units. The narrative should also include the Company's management			
strategies and strategic growth opportunities.			
Management Organizational Chart — The organizational chart should show			
names, titles and reporting structure of the management company.			
Resume of President / CEO			
Resume of Chief Financial Officer			
Resume of Director of Operations			
Resume of Director of Marketing			
Copy of Existing Property Management Agreement			
Sample Reports of Facility Performance			
Self-Auditing. Please discuss			
Mock Surveys. Please discuss frequency and share format.			
Quality Control Measures			
Social Security Number — for members of ownership entity, senior officers of			
management company and all Guarantors (if applicable).			
Credit Report Authorization — Cambridge will order standard credit reports on			
members of ownership entity, senior officers of management company and all			
Guarantors.			
Corporate Brochure			
Corporate Financial Statement and Balance Sheet for last two years.			

2. FACILITY FINANCIAL INFORMATION:		
Facility Name and Address: If more than one facility, please list.		

Ownership Type (LLC, LP, etc.) Image: Comparison of the second secon		Attached	Received	Open
Tax ID Numbers for Borrowing Entities Image: Comparison of the set of the set of similar facilities in the area. Detailed Property Description (for each facility) including the following: Image: Comparison of the set of the	Ownership Type (LLC, LP, etc.)			1
Neighborhood and Area Data – including description of market occupancy rates of simular factivities in the area.				
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	Attached	Received	Open
Payor Sources			
 Private Pay % 			
Third Party Payor, if any %			
 Names of third party payors 			
 Two contacts from each third party payor and full contact information 			
 Timing of payment by payor in days, from submitting billing and invoice 			
 State healthcare association contact information; Executive Director 			
 States historic financial condition 			
• Bond rating			
• Time to pay bill			
• Reputation			
Balance sheet of the operating entity: The balance sheet should clearly identify all			
assets and liabilities. All statements need to be accompanied by documentation stating that the information is certified and true.			
Last three fiscal years			
•			
• Most recent interim period along with prior year's comparable interim period			
Income Statement and Balance Sheet of the Borrowing Entity (if different from the Operating Entity).			
 Last three fiscal years 			
 Most recent interim period (along with prior year's comparable interim period) 			
Budget of the operating entity for the current year showing variances from actual.			
Projections for the next two fiscal years.			
State Survey & Plan of Corrections for Years Ending			
 2015 	1		
• 2016			
• 2017			
Life Safety inspections for last 5 years.			
Fire clearances – recent			
Sprinkler/Alarm/Smoke inspections - recent			
	· ·		
3. CAPITAL IMPROVEMENTS AND EXPENDITURES			
 Last five years 			
 Listing of recent upgrades 			
 Listing of immediate repairs and maintenance 			
 Listing of future pending improvements 			
	· ·		
4. COPIES OF ALL PERTINENT CONVEYANCE DOCUMENTS			
Title Reports			
 Title Insurance Policies 			
Release Docs for Existing loans			
 Easements 			
Legal Description			
5. COPIES OF ALL BUILDING & SITE DRAWINGS & PLANS			•
 Architectural drawings 			
 Engineering and construction drawings 			
 Electrical / Alarm or Sprinkler drawings 			
Site Plans			1
			+
 "As built" plans and specifications for the property including room types & sizes 			
(V NIZES			1

& sizes

	Attached	Received	Open
6. SURVEYS AND APPRAISALS			
 ALTA Surveys 			
 Most recent Property Appraisals 			
 Market Study 			

7. PERMITS, CLEARANCES, AND ZONING	
 Certificate of Occupancy 	
 Construction and/or other warranties pertaining to Facility 	
 Conditional use permits 	
 Construction / Building Approvals & Permits (elevator / food service 	
etc.)	
 Engineering report 	
 Fire Clearances (fire, safety) - ambulatory vs. Non-ambulatory access 	
 Electrical / alarm certificates: sprinkler/alarm/smoke 	

8. ENVIRONMENTAL DOCUMENTS				
•	Phase I Environmental Study (Phase II, if completed)			
-	Citations/Notices of violations from federal, state re: Environmental			

9. PHYS	9. PHYSICAL PROPERTY CONDITION			
•	PCNA (Current Ownership)			
•	Structural Inspection Reports			
	Kitchen Inspection Reports			
	Pest / Termite Inspection Reports			
	Flood Plain Certification			
	Property Condition Report and / or feasibility studies performed on the properties			
	Citations/Notices of violations from federal, state re: Physical Condition			
•	Mold Report (If available)			

10. GENERAL INFORMATION:			
 Detail of any accounts receivable financing that is in place (if applicable) 			
 Residents Emergency Call List 			
 List of full- and part-time employees 			
 Three most recent payroll sheets 			
 Facility Employee Handbook 			
 Corporate Employee Handbook 			
• Any payor contracts / rate letters, or any other optional plans available.			
 Resident agreements: 			
Lifetime rate contracts?			
Community fees guaranteeing rents?			
Future month free?			
Any rent concessions			

11. O TI	11. OTHER INFORMATION:			
•	Notice of any violation of regulation governing the maintenance, operation,			
	use or occupancy of the real estate.			
	Municipal Police Report on Property			
	Lawsuits or regulatory claims filed in last 5 years (including resident care			
	ombudsman, employees EEOC, and all other)			
-	Listing of all by date			
•	Settlements or verdicts			
•	What is your strategy for addressing future minimum wage increases? Please			
	share your pro forma as to how it will address future minimum wage			
	increased in the future.			

	Attached	Received	Open
Photographs: Minimum of 12: 6 exterior, 6 interior. <i>Digital pictures strongly</i>			
preferred.			

12. MEDICARE AND MEDICAID DOCUMENTS (IF APPLICABLE):	
 Medicare and Medicaid cost reports for the last two fiscal periods. 	
 Medicare and Medicaid survey and plan of correction for the last two years. 	
 Medicare Rate Letter and analysis of the rate following purchase (if applicable). 	

13. INSURANCE:		
 Proof of Property and Liability Insurance 		
 Claims history for last 60 months – property, liability, auto, umbrella 		
FEMA Form		
 Flood Insurance (if applicable) 		

14. TAXES

Real Estate Tax Bill

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