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**Clinic Administrator’s Attestation**

The Clinic Administrator must ensure and attest that the clinic meets all local, state, and federal regulations, since such governmental regulations may supersede QUAD A Standards. Please note, however, that the stricter regulation applies, whether it is the federal, state, or local regulation, or the QUAD A standard.

Please complete and sign the following document and return to the QUAD A office:

**Clinic Administrator's Attestation**

As Director of the (name of clinic) \_\_\_\_\_,  
located at \_\_\_\_\_, I attest that  
this facility meets all applicable local, state, and federal zoning and construction codes and  
regulations, including Certificate of Need requirements, as mandated. I further acknowledge that  
wherever governmental regulations or codes supersede QUAD A Standards, the stricter rule is  
applicable, whether it is the local, state, federal regulation or code or QUAD A Standard.  
Furthermore, I authorize QUAD A to release accreditation reports and corrective action plans to  
the state Board or Federal government upon request.

\_\_\_\_\_  
Clinic Administrator

\_\_\_\_\_  
Date