



pennsylvania
DEPARTMENT OF HUMAN SERVICES

CERTIFICATE OF COMPLIANCE

This certificate is hereby granted to **TRI-COUNTY RESPITE INC**

LEGAL ENTITY

To operate **NEW VITAE QUAKERTOWN HOUSE**

NAME OF FACILITY OR AGENCY

Located at **219 EAST BROAD STREET, QUAKERTOWN, PA 18951**

(COMPLETE ADDRESS OF FACILITY OR AGENCY)

ADDRESS OF SATELLITE SITE/SERVICE LOCATION

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To provide **Personal Care Homes**

TYPE OF SERVICE(S) TO BE PROVIDED

The total number of persons which may be cared for at one time may not exceed **65**
or the maximum capacity permitted by the Certificate of Occupancy, whichever is smaller.

(MAXIMUM CAPACITY)

Restrictions:

This certificate is granted in accordance with the Human Services Code of 1967, P.L. 31, as amended, and Regulations

55 Pa.Code Chapter 2600: Personal Care Homes

(MANUAL NUMBER AND TITLE OF REGULATIONS)

and shall remain in effect from **September 15, 2026** until **May 21, 2027**,
unless sooner revoked for non-compliance with applicable laws and regulations.

No: **126810**

Janette Biderup
ISSUING OFFICER

Juliet Marsala
DEPUTY SECRETARY

NOTE: This certificate is issued for the above site(s) only and is not transferable
and should be posted in a conspicuous place in the facility.

HS 628 – 04/23



Pennsylvania Department of Human Services

Emailing Date: September 14, 2026



Tri County Respite Inc
219 East Broad Street
Quakertown, Pennsylvania 18951

RE: New Vitae-Quakertown House
License #: 126810

Dear [REDACTED]:

As a result of the legal entity's request to change the name of the home from Tri-County Respite-Quakertown House to New Vitae-Quakertown House, a revised license is being issued under the authority of 55 Pa. Code Ch. 2600 (relating to Personal Care Homes). The expiration date of the license remains unchanged. Your revised license is enclosed.

Sincerely,

A handwritten signature in black ink that reads "Juliet Marsala".

Juliet Marsala
Deputy Secretary
Office of Long-term Living

Enclosure
License