

COMMONWEALTH OF PENNSYLVANIA  
DEPARTMENT OF PUBLIC WELFARE

# CERTIFICATE OF COMPLIANCE

This Certificate is hereby granted to MENTOR ABI LLC LEGAL ENTITY

To operate NEURORESTORATIVE PENNSYLVANIA NAME OF FACILITY OR AGENCY

Located at BUILDING 2, 6816 WEST LAKE RD, FAIRVIEW, PA 16415 (COMPLETE ADDRESS OF FACILITY OR AGENCY)

ADDRESS OF SATELLITE SITE \_\_\_\_\_ ADDRESS OF SATELLITE SITE

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ADDRESS OF SATELLITE SITE \_\_\_\_\_ ADDRESS OF SATELLITE SITE

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 16 (MAXIMUM CAPACITY)  
or the maximum capacity permitted by the Certificate of Occupancy, whichever is smaller.

Restrictions: \_\_\_\_\_

This certificate is granted in accordance with the Public Welfare 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 June 16, 2013 until June 16, 2014,  
unless sooner revoked for non-compliance with applicable laws and regulations.

No: 442050

*Robert E. Robinson*

ISSUING OFFICER

*R. C. King*

DIRECTOR

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.

PW628 - 01/11



**pennsylvania**  
DEPARTMENT OF PUBLIC WELFARE

Mailing Date: **MAR 11 2013**

Ms. Jody Crowley, Vice President of Operations  
Mentor ABI, LLC  
639 Granite Street, Suite 215  
Braintree, Massachusetts 02184

RE: Neurorestorative Pennsylvania  
Building 2, 6816 West Lake Road  
Fairview, Pennsylvania 16415  
# 442050

Dear Ms. Crowley:

On February 1, 2013, the Department of Public Welfare (Department) streamlined and modernized the human services licensing process such that licenses to operate are issued to currently-licensed providers upon receipt of their annual renewal application for licensure.

The Department has received your March 4, 2013 renewal application to operate the above Personal Care Home pursuant to 55 Pa. Code § Ch 2600. A regular license is being issued in response to your application. Your license is enclosed.

Please be advised that, pursuant to 55 Pa.Code § 20.31 relating to annual inspection, the Department is required to conduct an onsite inspection of the above Personal Care Home at least once every twelve months. The Department will conduct an inspection of Neurorestorative Pennsylvania within the next twelve months. If evidence of noncompliance with 55 Pa. Code § Ch 2600 relating to Personal Care Homes is found during the inspection, the Department will take appropriate enforcement action.

If you have any questions about the Department's revised process, please contact the Bureau of Human Services Licensing's Provider Support Hotline at 1-866-503-3926 or by electronic mail at [ra-pwarheadquarters@state.pa.us](mailto:ra-pwarheadquarters@state.pa.us).

Sincerely,

A handwritten signature in black ink, appearing to read "Ronald Melusky".

Ronald Melusky  
Director

Enclosure  
License