

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF PUBLIC WELFARE

CERTIFICATE OF COMPLIANCE

This Certificate is hereby granted to LASOSKYS PERSONAL CARE HOME INC

LEGAL ENTITY

To operate LASOSKY'S PERSONAL CARE HOME, INC.

NAME OF FACILITY OR AGENCY

Located at 23 MAIN STREET, CLARKSVILLE, PA 15322

(COMPLETE ADDRESS OF FACILITY OR AGENCY)

ADDRESS OF SATELLITE SITE ADDRESS OF SATELLITE SITE

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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 25
or the maximum capacity permitted by the Certificate of Occupancy, whichever is smaller.

(MAXIMUM CAPACITY)

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 February 22, 2014 until February 22, 2015,
unless sooner revoked for non-compliance with applicable laws and regulations.

No: 418580

Robert E. Robinson

ISSUING OFFICER

Michael J. [Signature]

ACTING 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.

PW 628 - 10/13



Mail Date: NOV 01 2013

Ms. Lori Lasosky, Administrator/ Owner
Lasoskys Personal Care Home, Inc.
200 Nobles Road
Brownsville, Pennsylvania 15417

RE: Lasosky's Personal Care Home, Inc.
23 Main Street
Clarksville, Pennsylvania 15322
418580

Dear Ms. Lasosky:

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 October 25, 2013 renewal application to operate the above Personal Care Home pursuant to Title 55, PA Code, Chapter 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 Lasosky's Personal Care Home, Inc. within the next twelve months. If evidence of noncompliance with Title 55, PA Code, Chapter 2600 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-pwarlheadquarters@state.pa.us.

Sincerely,

A handwritten signature in black ink that reads "Matthew J. Jones". The signature is written in a cursive style.

Matthew J. Jones *MJ*
Acting Director

Enclosure
License