



**pennsylvania**  
DEPARTMENT OF HUMAN SERVICES

**CERTIFICATE OF COMPLIANCE**

This certificate is hereby granted to SENIOR CARE ON MARKET ST LLC  
LEGAL ENTITY

To operate AUTUMN HOUSE OF YORK  
NAME OF FACILITY OR AGENCY

Located at WEST, 914 WEST MARKET STREET, YORK, PA 17401  
(COMPLETE ADDRESS OF FACILITY OR AGENCY)

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

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

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 132  
or the maximum capacity permitted by the Certificate of Occupancy, whichever is smaller. (MAXIMUM CAPACITY)

**Secure Dementia Care Unit - 55 Pa.Code §§ 2600.231-239 - Capacity 18**

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 November 30, 2016 until November 30, 2017,  
unless sooner revoked for non-compliance with applicable laws and regulations.

No: **332350**

Robert E. Robinson  
ISSUING OFFICER

Jay Bank  
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



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November 15, 2016

Ms. Lisa R. Sikes, Director of Operations  
Senior Care on Market St. LLC  
6157 28<sup>th</sup> Street SE, Suite #7  
Grand Rapids, Michigan 49546

RE: Autumn House  
West  
914 West Market Street  
York, Pennsylvania 17401  
Certificate #: 332350

Dear Ms. Sikes:

The Department has received your November 15, 2016 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 Autumn House 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](mailto:ra-pwarlheadquarters@state.pa.us).

Sincerely,

A handwritten signature in black ink that reads 'J. Rowe'.

Jacqueline L. Rowe  
Director

Enclosure  
License