



**pennsylvania**  
DEPARTMENT OF HUMAN SERVICES

**CERTIFICATE OF COMPLIANCE**

This certificate is hereby granted to MORAVIAN MANORS INC  
LEGAL ENTITY

To operate MORAVIAN MANOR  
NAME OF FACILITY OR AGENCY

Located at 300 WEST LEMON STREET, LITITZ, PA 17543  
(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

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ADDRESS OF SATELLITE SITE ADDRESS OF SATELLITE SITE

To provide Assisted Living  
TYPE OF SERVICE(S) TO BE PROVIDED

The total number of persons which may be cared for at one time may not exceed 40  
(MAXIMUM CAPACITY)  
or the maximum capacity permitted by the Certificate of Occupancy, whichever is smaller.

**Special Care Unit - 55 Pa.Code §§ 2800.231-239 - Capacity 40**

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 2800: Assisted Living Residences  
(MANUAL NUMBER AND TITLE OF REGULATIONS)

and shall remain in effect from January 1, 2018 until January 1, 2019,  
unless sooner revoked for non-compliance with applicable laws and regulations.

No: **333090**

Robert E. Robinson  
ISSUING OFFICER

Jay Baulk  
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.

HS 628 - 5/17



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DEC 29 2017

Mr. David Swartley,  
President & CEO  
Moravian Manor, Inc.  
300 West Lemon Street  
Lititz, Pennsylvania 17543

RE: Moravian Manor  
License #: 333090

Dear Mr. Swartley:

As a result of the Department of Human Services' licensing inspection on September 19, 2017, of the above facility, we have found that your facility is in substantial compliance with the regulations, set forth in 55 Pa.Code Ch. 2800 (related to assisted living residences), that can be adequately assessed at this time. The licensing inspector was unable to complete a full inspection because the home is new and not yet serving four or more residents.

In accordance with 55 Pa.Code § 2800.11(b) (relating to procedural requirements for licensure or approval of assisted living residences) a re-inspection of your newly licensed facility will be conducted within 3 months of the effective date of this license. Complete compliance with all applicable regulations is required in order to maintain your license.

Your NEW license is enclosed.

In an effort to improve our licensing processes, the Bureau of Human Services Licensing is soliciting feedback about your recent human services provider application submission experience. To participate in the online applicant survey, launch your web browser and go to [https://www.surveymonkey.com/r/BHSL\\_Application](https://www.surveymonkey.com/r/BHSL_Application).

The survey is brief and will only take about 5 minutes to complete. Your participation in the survey is completely voluntary and all of your responses will be kept confidential. The responses will be reviewed as part of an aggregate of provider applicant responses. Thank you in advance for providing feedback.

Sincerely,

A handwritten signature in black ink, appearing to read "J. Rowe". The signature is fluid and cursive, with the first letter of the first name being a large, stylized capital "J".

Jacqueline L. Rowe  
Director

Enclosure  
License