



pennsylvania
DEPARTMENT OF HUMAN SERVICES

CERTIFICATE OF COMPLIANCE

This certificate is hereby granted to MAPLE WINDS HEALTHCARE AND REHABILITATION CENTER LLC
LEGAL ENTITY

To operate MAPLE WINDS PERSONAL CARE
NAME OF FACILITY OR AGENCY

Located at 4112 SPRINGHILL ROAD, PORTAGE, PA 15946
(COMPLETE ADDRESS OF FACILITY OR AGENCY)

<small>ADDRESS OF SATELLITE SITE</small>	<small>ADDRESS OF SATELLITE SITE</small>
<small>ADDRESS OF SATELLITE SITE</small>	<small>ADDRESS OF SATELLITE SITE</small>
<small>ADDRESS OF SATELLITE SITE</small>	<small>ADDRESS OF SATELLITE SITE</small>

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 22
(MAXIMUM CAPACITY)
or the maximum capacity permitted by the Certificate of Occupancy, whichever is smaller.

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 August 1, 2018 until August 1, 2019,
unless sooner revoked for non-compliance with applicable laws and regulations.

No: 333250

Robert E. Robinson
ISSUING OFFICER

Carolyn K. Ellison
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.



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May 15, 2018

Ms. Mendy Piller
Manager
Maple Winds HealthCare and Rehabilitation Center LLC
99 W Hawthorne Avenue, Suite 508
Valley Stream, New York 11580

RE: Maple Winds Personal Care
4112 Springhill Road
Portage, Pennsylvania 15946
Certificate #: 333250

Dear Ms. Piller:

The Department has received your May 15, 2018 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 Maple Winds Personal Care 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 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,

Jacqueline L. Rowe
Director

Enclosure
License