



pennsylvania
DEPARTMENT OF HUMAN SERVICES

CERTIFICATE OF COMPLIANCE

This certificate is hereby granted to **CHELTEN CHRISTIAN CRUSADE FOR ALL PEOPLE INC**
LEGAL ENTITY

To operate **CHELTEN CHRISTIAN CRUSADE II**
NAME OF FACILITY OR AGENCY

Located at **4518 NORTH BROAD STREET, PHILADELPHIA, PA 19141**
(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 **14**
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 **May 18, 2020** until **May 18, 2021**,
unless sooner revoked for non-compliance with applicable laws and regulations.

No: **123280**

Robert E. Robinson
ISSUING OFFICER

[Signature]
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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DEPARTMENT OF HUMAN SERVICES

February 5, 2020

Ms. Diane Williams
Administrator
Chelten Christian Crusade For All People, Inc.
605 East Chelten Avenue
Philadelphia, Pennsylvania 19144

RE: Chelten Christian Crusade II
4518 North Broad Street
Philadelphia, Pennsylvania 19141
Certificate #: 123280

Dear Ms. Williams:

The Department has received your February 5, 2020 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 Chelten Christian Crusade II 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-pwarheadquarters@state.pa.us.

Sincerely,

A handwritten signature in black ink, appearing to read "Kevin Hancock".

Kevin Hancock
Deputy Secretary
Office of Long-term Living

Enclosure
License