



STATE OF MICHIGAN
DEPARTMENT OF HUMAN SERVICES
BUREAU OF CHILDREN AND ADULT LICENSING



JENNIFER M. GRANHOLM
GOVERNOR

ISMAEL AHMED
DIRECTOR

October 11, 2010

Diane Stauffer
Birch AFC Inc
193 Half Mile Road
Athens, MI 49011

RE: License #: AM750091929
Birch AFC Inc
30895 King Rd.
Po Box 85
Leonidas, MI 49066

Dear Mrs. Stauffer:

Attached is the Addendum to the Original Licensing Study Report for the above referenced facility.

Please review the enclosed documentation for accuracy and feel free to contact me with any questions. In the event that I am not available and you need to speak to someone immediately, please feel free to contact the local office at (269) 337-5066.

Sincerely,

Kenneth Tindall, Licensing Consultant
Bureau of Children and Adult Licensing
322 E. Stockbridge Ave
Kalamazoo, MI 49001
(269) 337-5264

enclosure

**MICHIGAN DEPARTMENT OF HUMAN SERVICES
BUREAU OF CHILDREN AND ADULT LICENSING
ADDENDUM TO ORIGINAL LICENSING STUDY REPORT**

I. IDENTIFYING INFORMATION

License #:	AM750091929
Licensee Name:	Birch AFC Inc
Licensee Address:	193 Half Mile Road Athens, MI 49011
Licensee Telephone #:	(269) 729-5282
Administrator/Licensee Designee:	Diane Stauffer, Designee
Name of Facility:	Birch AFC Inc
Facility Address:	30895 King Rd. Po Box 85 Leonidas, MI 49066
Facility Telephone #:	(269) 496-8014
Capacity:	10
Program Type:	AGED

II. Purpose of Addendum

The licensee submitted a written request to increase capacity from 9 to 10 residents.

III. Methodology

I conducted an on-site inspection on 8/20/2010.

IV. Description of Findings and Conclusions

The licensee is in compliance with all applicable rules to be licensed for 10 residents.

V. Recommendation

Increase capacity from 9 to 10 residents.

Kenneth Tindall

10.11.2010

Kenneth Tindall
Licensing Consultant

Date