



RICK SNYDER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

SHELLY EDGERTON
DIRECTOR

April 24, 2017

Lemelif Julian
1635 Millard Avenue
Madison Heights, MI 48071

RE: License #: AF630380168
Genesis Adult Foster Care Home
1635 Millard Avenue
Madison Heights, MI 48071

Dear Ms. Julian:

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

Please review the enclosed documentation for accuracy and contact me with any questions. In the event that I am not available and you need to speak to someone immediately, please contact the local office at (248) 975-5053.

Sincerely,

A handwritten signature in blue ink, appearing to read "K. Lewis".

Kenyatta Lewis, Licensing Consultant
Bureau of Community and Health Systems
4th Floor, Suite 4B
51111 Woodward Avenue
Pontiac, MI 48342
(248) 296-2078

enclosure

**MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
BUREAU OF COMMUNITY AND HEALTH SYSTEMS
ADDENDUM TO ORIGINAL LICENSING STUDY REPORT**

I. IDENTIFYING INFORMATION

License #:	AF630380168
Licensee Name:	Lemelif Julian
Licensee Address:	1635 Millard Avenue Madison Heights, MI 48071
Licensee Telephone #:	(248) 635-7685
Administrator/Licensee Designee:	Lemelif Julian
Name of Facility:	Genesis Adult Foster Care Home
Facility Address:	1635 Millard Avenue Madison Heights, MI 48071
Facility Telephone #:	(248) 635-7685
Capacity:	5
Program Type:	AGED ALZHEIMERS PHYSICALLY HANDICAPPED

II. Purpose of Addendum

The purpose of this addendum is to increase the resident capacity to six residents.

III. Methodology

02/10/2017	Contact- Document Received Ms. Julien sent a letter to licensing consultant, Felicia Townsend regarding increasing the home capacity to six residents.
04/03/17	Comment I reviewed the licensing file.
04/20/2017	Inspection Completed On-site

IV. Description of Findings and Conclusions

I completed an onsite inspection at the Genesis Adult Foster Care home on 04/20/2017. The inspection was completed for the home's license renewal. Ms. Julien stated that she would like to increase the license capacity to six residents. I received a written request from Ms. Julien on 04/20/17, dated 02/10/17, to increase the capacity to six residents. Ms. Julien stated that she sent a letter to Ms. Townsend in February 2017. The request was signed by Ms. Julien.

On 04/20/17, during the onsite renewal inspection, I observed and measured bedroom #4, which is 132 square feet. I also observed the private family residence, located in the basement of the home.

The home will remain in compliance with the one additional resident, to increase the family home capacity to six residents. Mr. and Mrs. Julien and five residents are currently the only individuals residing in the home.

V. Recommendation

I recommended that the status of the license remain the same. The capacity for the Genesis Adult Foster Care Home license is increased to six residents.

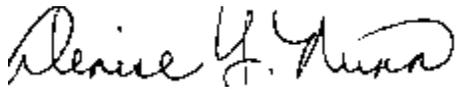


04/24/17

Kenyatta Lewis
Licensing Consultant

Date

Approved By:



04/24/2017

Denise Y. Nunn
Area Manager

Date