



JENNIFER M. GRANHOLM
GOVERNOR

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

MARIANNE UDOW
DIRECTOR

April 7, 2005

Barbara Guritz-Houser and Kenneth Houser
P.O. Box 241
Lawrence, MI 49064

RE: Application #: AF800269501
Guritz-Houser Home
124 S. Second St.
Lawrence, MI 49064

Dear Barbara Guritz-Houser and Kenneth Houser:

Attached is the Original Licensing Study Report for the above referenced facility. The study has determined substantial compliance with applicable licensing statutes and administrative rules. Therefore, a temporary license with a maximum capacity of 1 is issued.

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,

Kelly Williams, Licensing Consultant
Office of Children and Adult Licensing
322 E. Stockbridge Ave
Kalamazoo, MI 49001
(269) 337-5274

enclosure

**MICHIGAN DEPARTMENT OF HUMAN SERVICES
OFFICE OF CHILDREN AND ADULT LICENSING
LICENSING STUDY REPORT**

I. IDENTIFYING INFORMATION

License #:	AF800269501
Applicant Name:	Guritz-Houser, Barbara and Houser, Kenneth
Applicant Address:	124 S. Second St. Lawrence, MI 49064
Applicant Telephone #:	(269) 674-8272
Administrator/Licensee Designee:	N/A
Name of Facility:	Guritz-Houser Home
Facility Address:	124 S. Second St. Lawrence, MI 49064
Facility Telephone #:	(269) 674-8272
Application Date:	08/24/2004
Capacity:	1
Program Type:	DEVELOPMENTALLY DISABLED

II. METHODOLOGY

08/24/2004	Enrollment
08/24/2004	Application Received Original
08/24/2004	Fee Received Original
01/07/2005	Inspection Completed On-site
03/30/2005	Inspection Completed On-site
03/30/2005	Inspection Completed-BFS Full Compliance

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

A. Physical Description of Facility

This is a two-story home located near downtown Lawrence. The main floor of the home consists of a kitchen, dining room, living room, full bath, one bedroom for resident use, and an office/den. The one bedroom intended for resident use has appropriate square footage for one resident. The upstairs of the home contains the licensees' bedroom and a guest bedroom. Laundry facilities are located in the basement. The home has a large, fenced in yard and an enclosed porch. Additionally, a wheelchair ramp has been installed which is in compliance with rule requirements.

This facility is connected to city water and sewage disposal. There is interconnected smoke detection with smoke detector heads located in appropriate areas of the home. Because of the gas furnace located in the basement, the appropriate floor separation was installed. Proof of ownership is on file.

The licensees also have two small, very friendly dogs as well as a cat and birds.

B. Program Description

Barbara and Kenneth will be the licensees and primary care givers. Record clearances indicate no criminal convictions. Medical clearances for both indicate compliance with rule requirements. Both Barbara and Kenneth are currently working with the Van Buren County ISD program. The licensees have identified Rainelle Shaw as their responsible person in their absence. Appropriate medical documentation has been provided for Ms. Shaw.

The licensees prefer to care for women with developmental disabilities. Smokers are not accepted. The licensees will offer local transportation for outings and medical appointments. Van Buren Transit and emergency transportation via 911 are also available. The licensees plan to offer activities such as videos, games, walks, and outings to the mall, library, for movies, and out to eat.

The licensees have been provided with all necessary resident record and facility record keeping forms to achieve compliance with rule requirements.

