



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



JENNIFER M. GRANHOLM
GOVERNOR

MARIANNE UDOW
DIRECTOR

January 23, 2007

Mr. John Strayer, Licensee Designee
Tanglewood Assisted Living Inc
19086 Tipsico Lake
Fenton, MI 48430

RE: License #: AM470094319
Tanglewood Assisted Living Inc
19086 Tipsico Lake
Fenton, MI 48430

Dear Mr. Strayer:

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 secretary at the Midland office at (989) 835-7241.

Sincerely,

A handwritten signature in cursive script that reads "James Zalba".

James Zalba, Licensing Consultant
Office of Children and Adult Licensing
(517) 373-8805

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AM470094319
Licensee Name:	Tanglewood Assisted Living Inc
Licensee Address:	19086 Tipsico Lake Fenton, MI 48430
Licensee Telephone #:	(810) 629-6098
Licensee Designee:	John Strayer
Administrator:	Gail Strayer
Name of Facility:	Tanglewood Assisted Living Inc
Facility Address:	19086 Tipsico Lake Fenton, MI 48430
Facility Telephone #:	(810) 750-2833
Capacity:	12
Program Type:	PHYSICALLY HANDICAPPED AGED ALZHEIMERS

II. Purpose of Addendum

The purpose of this addendum is to increase the capacity of this facility from the present nine (9) residents to twelve (12) residents.

III. Methodology

3/20/2006	Contact – Telephone call received Consultant talked to administrator regarding an addition to the present facility to add three more residents.
3/21/2006	Contact – Telephone call made Consultant alerted Office of Fire Safety regarding facility addition.
8/07/2006	Inspection Report Requested – Fire OCAL-1712 form faxed to Office of Fire Services.
1/17/2007	Inspection Completed On-Site
1/19/2007	Inspection Completed-Fire Safety: A
1/19/2007	Inspection Completed-OCAL Full Compliance
1/23/2007	Modify Terms Recommend: Increase from 9 residents to 12 residents.

IV. Description of Findings and Conclusions

An addition was added on to the present building, which more than adequately housed nine residents. This addition consists of three bedrooms and a living room area, which were measured as follows:

Bedroom #10 measured 104 square feet (one resident),
Bedroom #11 measured 104 square feet (one resident), and
Bedroom #12 measured 105 square feet (one resident).

The additional living room measured 394 square feet, which is more than adequate for the three added residents.

The Office of Fire Services of the Department of Labor & Economic Growth gave a Full Approval (A-rating) to the addition on 1/19/2007. Also, on 3/30/2006 the

Township of Tyrone approved a special land use permit to Tanglewood Assisted Living, Inc. to expand the present facility from 9 residents to 12 residents under Permit #001-06.

During the on-site inspection on 1/17/2007 this consultant observed the addition to be completely furnished and ready for the addition of three residents.

V. Recommendation

I recommend that this facility's capacity be increased from nine (9) residents to twelve (12) residents under the licensing rules for Adult Foster Care Small Group Homes (12 or less).



January 23, 2007

James Zalba
Licensing Consultant

Date