



JENNIFER M. GRANHOLM
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF CONSUMER & INDUSTRY SERVICES
LANSING

DAVID C. HOLLISTER
DIRECTOR

September 5, 2003

Lance Livingston
14221 E M89
Augusta, MI 49012

RE: License #: AF390253659
Stoney Oaks
14221 E M89
Augusta, MI 49012

Dear Mr. Livingston:

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) 544-4445.

Sincerely,

Kenneth Tindall, Licensing Consultant
Bureau of Family Services
2nd Floor
890 North 10th Street
Kalamazoo, MI 49009
(269) 544-1275

enclosure

**MICHIGAN DEPT. OF CONSUMER & INDUSTRY SERVICES
BUREAU OF FAMILY SERVICES
ADDENDUM TO ORIGINAL LICENSING STUDY REPORT**

I. IDENTIFYING INFORMATION

License #:	AF390253659
Licensee Name:	Lance Livingston
Licensee Address:	14221 E M89 Augusta, MI 49012
Licensee Telephone #:	(269) 731-4025
Administrator/Licensee Designee:	N/A
Name of Facility:	Stoney Oaks
Facility Address:	14221 E M89 Augusta, MI 49012
Facility Telephone #:	(269) 731-5819
Capacity:	6
Program Type:	MENTALLY ILL DEVELOPMENTALLY DISABLED AGED TRAUMATIC BRAIN INJURED ALZHEIMERS PHYSICALLY HANDICAPPED

II. Purpose of Addendum

On 8-13-2003 a written request was received to increase capacity on this home from 5 to 6.

III. Methodology

On 8-13-2003 an on-site inspection was conducted.

IV. Description of Findings and Conclusions

This home is in compliance with adult family home licensing rules for a capacity of 6 residents.

V. Recommendation

Increase capacity from 5 to 6 residents.

Kenneth Tindall
Licensing Consultant

Date