



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

August 15, 2025

Matthew Wallin
Sun Haven Housing LLC
25262 Eureka Dr
Warren, MI 48091

RE: License #: AS500418836
Sun Haven Housing
25262 Eureka Dr.
Warren, MI 48091

Dear Mr. Wallin:

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) 972-9136.

Sincerely,

A handwritten signature in cursive script that reads "L. Reed".

LaShonda Reed, Licensing Consultant
Bureau of Community and Health Systems
Cadillac Place, Ste 9-100
Detroit, MI 48202
(586) 676-2877

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AS500418836
Licensee Name:	Sun Haven Housing LLC
Licensee Address:	25262 Eureka Dr Warren, MI 48091
Licensee Telephone #:	(773) 984-6753
Administrator/Licensee Designee:	Matthew Wallin
Name of Facility:	Sun Haven Housing
Facility Address:	25262 Eureka Dr. Warren, MI 48091
Facility Telephone #:	(586) 381-7651
Capacity:	4
Program Type:	DEVELOPMENTALLY DISABLED MENTALLY ILL AGED ALZHEIMERS

II. Purpose of Addendum

To modify the original licensing study report as follows: To accept both genders, change the age range, increase the capacity and new populations served.

III. Methodology

On 07/25/2025, I received an email from Matthew Wallin, licensee designee/administrator requesting the process to modify the original licensing study report terms. I informed Mr. Wallin that he must submit a request to modify the terms and capacity.

On 07/31/2025, I scheduled the onsite inspection to measure the one bedroom that will be licensed as a resident bedroom. The room was originally an office space.

On 08/07/2025, I conducted an onsite inspection. I measured the bedroom. I observed that the bedroom had all the licensing requirements.

On 08/14/2025, Mr. Wallin emailed a finalized modification request and an updated Program Statement.

IV. Description of Findings and Conclusions

Resident bedrooms were measured during the on-site inspection and have the following dimensions:

Bedroom #	Room Dimensions	Total Square Footage	Total Resident Beds
1	12.5 x 14.9	183.15	2
2	8.2 x 9.7	78.5	1
3	9.7 x 9.7	91.84	1

Total beds:4

The living room areas measure a total of 176 square feet of living space. This exceeds the minimum of 35 square feet per resident requirement.

Based on the above information, it is concluded that this facility can accommodate **four** (4) residents. It is the licensee's responsibility not to exceed the facility's licensed capacity.

B. Program Description

Sun Haven Housing LLC is being established to help those individuals requiring adult foster care where supervision, encouragement, and wellness define our focus and mission. Sun Haven Housing, LLC will support male and female adults with high support needs due to developmental disabilities, mental illness, and

aged residents who may need AFC services. Sun Haven Housing LLC will provide services for residents that are diagnosed with Alzheimer's Disease or other causes of dementia. The intent of this specialized residential home is to create self-belonging within their own community and create growth and purpose in the residents' life.

Sun Haven Housing LLC will have a minimum of one staff member working onsite per shift in accordance with the manager. Additional staff will be available during key periods of the day. The home will be staffed according to the needs of each individual in order to carry out the plan of service. Sun Haven Housing LLC will arrange Adult Day Care and will be available on request.

Sun Haven Housing believes every person living with Alzheimer's disease or related conditions deserves dignity, respect, and the comfort of a true home. Our care is guided by compassion, safety, and meaningful connection.

Sun Haven Housing LLC's mission is to provide exceptional, personalized care in a safe and nurturing home for individuals with Alzheimer's and related conditions. To ensure that all admissions, transfers, and discharges are conducted in a manner that protects the rights, safety, and well-being of residents with Alzheimer's disease or related conditions, while complying with Michigan State licensing regulations.

Prospective residents may be admitted if they have a diagnosis of Alzheimer's disease or a related dementia confirmed by a qualified healthcare provider. Sun Haven Housing LLC will conduct initial screenings to review diagnosis, medical history, and functional abilities. An in-person assessment will be conducted by an administrator or designee to evaluate cognitive status, mobility, personal care needs, and compatibility with current residents. Residents may be transferred when their needs exceed the home's staffing or medical capabilities

Sun Haven LLC intends to provide 24-hour supervision, protection and personal care to **four** (4) male or female ambulatory adults age 50+ whose diagnosis is developmentally disabled, mentally impaired, aged and Alzheimer's Disease in the least restrictive environment possible.

V. Recommendation

It is recommended that Sun Haven Housing LLC provide services to male and female residents age 50 to 99 years old. It is recommended that Sun Haven Housing LLC capacity is increased from three to four residents whose diagnoses are developmentally disabled, mentally impaired, aged and Alzheimer's Disease.

L. Reed

08/15/2025

LaShonda Reed
Licensing Consultant

Date