



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

June 10, 2026

Maritza Wolf
6555 College Ave
GRAND RAPIDS, MI 49548

RE: License #: AF410419133
Maritza's Home
6555 College Ave
GRAND RAPIDS, MI 49548

Dear Ms. Wolf:

Attached is the Renewal Licensing Study Report for the facility referenced above. The violations cited in the report require the submission of a written corrective action plan. The corrective action plan is due 15 days from the date of this letter and must include the following:

- How compliance with each rule will be achieved.
- Who is directly responsible for implementing the corrective action for each violation.
- Specific dates for each violation as to when the correction will be completed or implemented.
- How continuing compliance will be maintained once compliance is achieved.
- The signature of the licensee or licensee designee or home for the aged authorized representative and a date.

A six-month provisional license is recommended. If you do not contest the issuance of a provisional license, you must indicate so in writing; this may be included in your corrective action plan or in a separate document. If you contest the issuance of a provisional license, you must notify this office in writing and an administrative hearing will be scheduled. Even if you contest the issuance of a provisional license, you must still submit an acceptable corrective action plan in 15 days.

Please contact me with any questions. In the event that I am not available and you need to speak to someone immediately, you may contact the local office at (616) 356-0100.

Sincerely,

A handwritten signature in black ink, appearing to read "Gene Coulter". The signature is written in a cursive style with a long horizontal flourish at the end.

Gene Coulter, Licensing Consultant
Bureau of Community and Health Systems
Unit 13, 7th Floor
350 Ottawa, N.W.
Grand Rapids, MI 49503

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**MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
BUREAU OF COMMUNITY AND HEALTH SYSTEMS
RENEWAL INSPECTION REPORT**

I. IDENTIFYING INFORMATION

License #: AF410419133

Licensee Name: Maritza Wolf

Licensee Address: 6555 College Ave
GRAND RAPIDS, MI 49548

Licensee Telephone #: (616) 855-0961

Licensee/Licensee Designee: Maritza Wolf

Administrator:

Name of Facility: Maritza's Home

Facility Address: 6555 College Ave
GRAND RAPIDS, MI 49548

Facility Telephone #: (616) 855-0961

Original Issuance Date: 06/10/2025

Capacity: 5

Program Type: DEVELOPMENTALLY DISABLED
MENTALLY ILL
ALZHEIMERS
AGED
TRAUMATICALLY BRAIN INJURED

II. METHODS OF INSPECTION

Date of On-site Inspection(s): 06/05/2026

Date of Bureau of Fire Services Inspection if applicable: na

Date of Health Authority Inspection if applicable: na

No. of staff interviewed and/or observed 0

No. of residents interviewed and/or observed 0

No. of others interviewed [redacted] Role: [redacted]

- Medication pass / simulated pass observed? Yes No If no, explain.
the facility has no residents in care
- Medication(s) and medication record(s) reviewed? Yes No If no, explain.
the facility has no residents in care
- Resident funds and associated documents reviewed for at least one resident?
Yes No If no, explain. the facility has no residents in care
- Meal preparation / service observed? Yes No If no, explain.
the facility has no residents in care
- Fire drills reviewed? Yes No If no, explain.
the facility has no residents in care
- Fire safety equipment and practices observed? Yes No If no, explain.
the facility has no residents in care
- E-scores reviewed? (Special Certification Only) Yes No N/A
If no, explain.
- Water temperatures checked? Yes No If no, explain.
the facility has no residents in care
- Incident report follow-up? Yes No If no, explain.
- Corrective action plan compliance verified? Yes CAP date/s and rule/s:
N/A
- Number of excluded employees followed-up? N/A
- Variances? Yes (please explain) No N/A

III. DESCRIPTION OF FINDINGS & CONCLUSIONS

This facility was found to be in non-compliance with the following rules:

MCL 400.717 Provisional license

(1) A provisional license may be issued to an adult foster care facility that has previously held a temporary or regular license under this act or an act repealed by this act. A provisional license may be issued for 6 months if an adult foster care facility is temporarily unable to conform to the requirements of this act for a regular license and may be renewed not more than 2 consecutive times as provided in subsections (2) and (4). The issuance of a provisional license shall be contingent upon the submission to the department of an acceptable plan of correction for the adult foster care facility within the time limitations of the provisional period.

Finding: The facility was issues a temporary license on 12/10/2025. Since the original issuance, there have not been any residents admitted into the facility, therefore I was unable to determine compliance with quality of care.

Exit Conference: Licensee Maritza Wolf was informed that a provisional license would be issued on 6/10/2026. Maritza Wolf stated that she understood the reasons for a provisional license and plans on contacting outside agencies for placement. Martiza Wolf stated that she accepted the issuance of a Provisional License.

A corrective action plan was requested and approved on 6/10/2026. It is expected that the corrective action plan be implemented within the specified time frames as outlined in the approved plan. A follow up evaluation may be made to verify compliance. Should the corrections not be implemented in the specified time, it may be necessary to reevaluate the status of your license.

IV. RECOMMENDATION

A acceptable corrective action plan was received on 6/5/2026, it is recommended the license be modified to a provisional.



6/10/2026

Gene Coulter
Licensing Consultant

Date