



JENNIFER M. GRANHOLM  
GOVERNOR

STATE OF MICHIGAN  
FAMILY INDEPENDENCE AGENCY  
OFFICE OF CHILDREN AND ADULT LICENSING



MARIANNE UDOW  
DIRECTOR

July 15, 2004

Karl Schoeneweis  
3564 - 144th Avenue  
Holland, MI 49424

RE: Application #: AF700266253  
**NORTH HOLLAND MANOR**  
3564 144th Avenue  
Holland, MI 49424

Dear Mr. Schoeneweis:

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 6 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 (616) 356-0100.

Sincerely,

Terry Buit, Licensing Consultant  
Office of Children and Adult Licensing  
Unit 13, 7th Floor  
350 Ottawa, N.W.  
Grand Rapids, MI 49503  
(616) 356-0110

Enclosure

**MICHIGAN FAMILY INDEPENDENCE AGENCY  
OFFICE OF CHILDREN AND ADULT LICENSING  
LICENSING STUDY REPORT**

**I. IDENTIFYING INFORMATION**

**License #:** AF700266253

**Applicant Name:** Karl Schoeneweis

**Applicant Address:** 3564 - 144th Avenue  
Holland, MI 49424

**Applicant Telephone #:** (616) 994-0226

**Administrator/Licensee Designee:** N/A

**Name of Facility:** **NORTH HOLLAND MANOR**

**Facility Address:** 3564 - 144th Avenue  
Holland, MI 49424

**Facility Telephone #:** (616) 994-0226

**Application Date:** 04/16/2004

**Capacity:** 6

**Program Type:** DEVELOPMENTALLY DISABLED  
AGED

## II. METHODOLOGY

04/16/2004	Enrollment
04/21/2004	Inspection Report Requested - Health
05/07/2004	Inspection Completed On-site
05/07/2004	Inspection Completed-BFS Full Compliance
05/24/2004	Contact - Document Received Required documents

## III. DESCRIPTION OF FINDINGS & CONCLUSIONS

### A. Physical Description of Facility

The facility is an existing structure in suburban Holland. Zoning approval is not required.

The facility is a bi-level. Wheelchair residents and residents of limited mobility cannot be accommodated. The lower level contains three double-occupancy AFC bedrooms, AFC bathroom, laundry room, and storage room. The upper level contains an AFC activity room, dining area, kitchen, and licensee living quarters.

There is an aboveground pool with deck adjoining the facility. The pool has a fence and locked gate. Resident use of the pool is restricted to when a caregiver is present to provide supervision.

Approval of the septic system was granted on 04/30/04. The facility has city water.

### B. Program Description

Karl Schoeneweis is the licensee and will be the primary provider of resident care and supervision. Most transportation will be provided by the licensee. Heidi Jaeger will be the relief staff person.

The licensee will accept adult residents of most ages and disabilities. The initial residents will be a developmentally disabled woman, a mentally ill woman, and a mentally ill/physically handicapped man.

Community outings will be offered. Each resident has a day program.

The licensee is a certified chef.

