

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



March 3, 2004

Amos Hamilton 5551 E Mosherville Jonesville, MI 49250

RE: License #: AF300016254

Shady Hills Care Home 5551 E. Mosherville Rd. Jonesville, MI 49250

Dear Mr./Ms. Hamilton:

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 (517) 780-7159.

Sincerely,

Patricia Sperti, Licensing Consultant Office of Children and Adult Licensing Suite 200 209 E Washington Jackson, MI 49201 (517) 780-7579

enclosure

MICHIGAN FAMILY INDEPENDENCE AGENCY OFFICE OF CHILDREN AND ADULT LICENSING ADDENDUM TO ORIGINAL LICENSING STUDY REPORT

I. IDENTIFYING INFORMATION

License #: AF300016254

Licensee Name: Amos Hamilton

Licensee Address: 5551 E Mosherville

Jonesville, MI 49250

Licensee Telephone #: (517) 563-2678

Administrator/Licensee Designee: N/A

Name of Facility: Shady Hills Care Home

Facility Address: 5551 E. Mosherville Rd.

Jonesville, MI 49250

Facility Telephone #: (517) 563-2678

Capacity: 6

Program Type: PHYSICALLY HANDICAPPED

DEVELOPMENTALLY DISABLED

MENTALLY ILL

AGED

II.	Purpose of Addendum
III.	Methodology
IV.	Description of Findings and Conclusions
V.	Recommendation
	atricia Sperti Date censing Consultant