



STATE OF MICHIGAN  
DEPARTMENT OF HUMAN SERVICES  
OFFICE OF CHILDREN AND ADULT LICENSING



JENNIFER M. GRANHOLM  
GOVERNOR

MARIANNE UDOW  
DIRECTOR

September 29, 2005

Brown, Randy and Brown, Kimberly  
5011 Townsend  
PO Box 4  
Applegate, MI 48401

RE: Application #: AS760277553  
Brown  
3737 VanDyke  
Decker, MI 48426

Dear Mr. And Mrs. Brown:

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 (248) 975-5053.

Sincerely,

Vince Ferreri, Licensing Consultant  
Office of Children and Adult Licensing  
Suite 358  
41000 Woodward  
Bloomfield Hills, MI 48304  
(586) 412-6831

enclosure

**MICHIGAN DEPARTMENT OF HUMAN SERVICES  
OFFICE OF CHILDREN AND ADULT LICENSING  
LICENSING STUDY REPORT**

**I. IDENTIFYING INFORMATION**

**License #:** AS760277553

**Applicant Name:** Brown, Randy and Brown, Kimberly

**Applicant Address:** 5011 Townsend  
Applegate, MI 48401

**Applicant Telephone #:** (989) 872-2508

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

**Name of Facility:** Brown

**Facility Address:** 3737 VanDyke  
Decker, MI 48426

**Facility Telephone #:** (989) 872-2508

**Application Date:** 07/19/2005

**Capacity:** 6

**Program Type:** MENTALLY ILL  
DEVELOPMENTALLY DISABLED  
AGED

## II. METHODOLOGY

07/19/2005	Enrollment
08/02/2005	Inspection Completed On-site
08/05/2005	Application Complete/On-site Needed
08/05/2005	Inspection Report Requested - Health
08/12/2005	Application Incomplete Letter Sent No proof of ownership.
08/31/2005	Inspection Completed On-site
08/31/2005	Inspection Completed-BFS Full Compliance

## III. DESCRIPTION OF FINDINGS & CONCLUSIONS

### A. Physical Description of Facility

This facility is a two story colonial style home located on approximately six acres of land in rural Decker, MI. The first floor of the home has three resident bedrooms; a living room; a family room; a kitchen and a large dining room. A bathroom with an attached shower is also on this level. The second level of the home has two resident bedrooms and two bedrooms for the licensee and family. Two full bathrooms are on the second level. The furnace and hot water are located in the basement along with a laundry room. The basement has two means of egress to the outside and is partially finished. The home has over 493 sq. ft. of multipurpose space and will accommodate six residents. The facility has wheelchair ramps at the front and rear exits. A detached pole barn and two-car garage are also on the property. The neighborhood is rural/farm in character.

The bedrooms are designated as follows:

- Bedroom # 1 contains 83.9 sq. ft. and will accommodate one resident.
- Bedroom # 2 contains 80.4 sq. ft. and will accommodate one resident.
- Bedroom # 3 contains 82.8 sq. ft. and will accommodate one resident.
- Bedroom # 5 contains 170.5 sq. ft. and will accommodate two residents.
- Bedroom # 6 contains 129.6 sq. ft. and will accommodate one resident.

The facility is served by a private water and sewer system. They were inspected by the Sanilac County Health Department on 08/15/2005. The facility was determined to be in substantial compliance with applicable rules.

The consultant conducted a fire safety inspection on 08/31/2005 and found the facility to be in full compliance with all applicable fire safety rules and regulations. The facility has an electrically powered interconnected hard-wired smoke detection system with a battery back up. The plumbing, electrical and heating systems were all in good working condition at the time of the inspection.

The home is being purchased by the applicants, Mr. and Mrs. Brown. This is their first licensed facility. However, the applicants have been managers and worked at the Ball AFC Home for the last four years. They thus have extensive work experience with the mentally ill, developmentally disabled and elderly residents of the home.

The licensee will be Randy and Kimberly Brown. Kimberly Brown will act as the Administrator and be the chief person responsible for the care of the residents. Randy Brown and part time staff as needed will assist her. Good Moral Conduct requirements were explained to the applicants and they indicated their intention to comply.

Zoning approval is not required for this facility as it meets the requirements of the Federal fair Housing Amendment.

## **B. Program Description**

All application materials were reviewed either onsite or in the office. Upon review, the consultant has determined the applicant was in full compliance with all applicable rules and regulations. In addition, the program statement, Admission /Discharge Policy, Refund Policy, Personnel Policy and Staffing Plan were reviewed and found to be acceptable.

This facility offers a program for Mentally Ill, Developmentally Disabled and Elderly Adults. Both male and female residents are accepted at the home.

The home is currently licensed as the Ball AFC Home # AS760015244. All residents currently residing in the facility are expected to remain.

Record keeping requirements were explained to the applicant, Kimberly Brown. She expressed her understanding and intent to comply with the requirements.

## **IV. CONCLUSIONS**

On the day of the final inspection, 08/31/2005, no rule violations were observed.

## **V. RECOMMENDATION**

