

# STATE OF MICHIGAN DEPARTMENT OF HUMAN SERVICES BUREAU OF CHILDREN AND ADULT LICENSING



November 26, 2007

Martin Skokan 5335 Butternut Tree Ct Flint, MI 48532

RE: Application #: AF250292854

Cornerstone AFC 5335 Butternut Tree Ct

Flint, MI 48532

Dear Mr. Skokan:

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 (989) 835-7241.

Sincerely,

James Clark, Licensing Consultant Bureau of Children and Adult Licensing 2320 W. Pierson Rd. Flint, MI 48504 (810) 787-7034

enclosure

# MICHIGAN DEPARTMENT OF HUMAN SERVICES BUREAU OF CHILDREN AND ADULT LICENSING LICENSING STUDY REPORT

#### I. IDENTIFYING INFORMATION

**License #:** AF250292854

Applicant Name: Martin Skokan

**Applicant Address:** 5335 Butternut Tree Ct

Flint, MI 48532

**Applicant Telephone #:** (810) 733-3186

Responsible Person: Bonnie Skolan

Name of Facility: Cornerstone AFC

Facility Address: 5335 Butternut Tree Ct

Flint, MI 48532

**Facility Telephone #:** (810) 733-3186

09/20/2007

**Application Date:** 

Capacity: 6

Program Type: MENTALLY ILL

#### II. METHODOLOGY

| 09/20/2007 | Enrollment   |
|------------|--|
| 10/01/2007 | Application Incomplete Letter Sent                 |
| 10/22/2007 | Contact - Document Received Permission to inspect. |
| 10/30/2007 | Inspection Completed On-site Initial inspection    |
| 11/20/2007 | Inspection Completed-BFS Full Compliance           |

## III. DESCRIPTION OF FINDINGS & CONCLUSIONS

## A. Physical Description of Facility

The house is a two-story in a residential subdivision north of W. Court St. and west of Dye Rd. The house has an attached garage and a full basement. It is served by municipal water and sewage systems.

The living space available in the home is as follows:

| <u>Room</u>                          | <u>Dimensions</u> | Square Footage |  |  |  |
|--------------------------------------|-------------------|----------------|--|--|--|
| Den                                  | 12' X 12'         | 144 sq. ft.    |  |  |  |
| Living Room                          | 13' X 20'         | 260 sq. ft.    |  |  |  |
| Dining Rm./Family Rm.                | 19' X 15'         | 285 sq. ft.    |  |  |  |
| Total of 689 sq. ft. of living space |                   |                |  |  |  |

## The bedroom spaces are:

| Location   | <u>Dimensions</u>      | Square footage | <u>Capacity</u> |  |  |
|--|------------------------|----------------|-----------------|--|--|
| 1 <sup>st</sup> . floor*   | 11' X 12'              | 131 sq. ft.    | 0               |  |  |
| SW bedroom   | 12' X 11' irregular    | 132 sq. ft.    | 2               |  |  |
| SE bedroom   | 10.9' X 9.5' irregular | 103 sq. ft.    | 1               |  |  |
| North bedroom  | 12' X 17'              | 204 sq. ft.    | 3               |  |  |
| Master suite   | Not measure            | ?              | 0               |  |  |
| Total Capacity = 6 residents   |                        |                |                 |  |  |
| * The first floor bedroom (converted dining room) will be used by a family member. |                        |                |                 |  |  |

## **B. Program Description**

The Cornerstone AFC home will serve mentally ill men over the age of 21. The program to be offered will be in compliance with the Administrative Rules for Adult Foster Care Family Homes.

Both the licensee and her responsible person meet the requirements for good morale character and health.

#### C. Fire Safety

The home is equipped with an interconnected smoke detector system and the licensee has provided fire extinguishers on each floor. A furnace room has been created in the basement to provide the required separation.

#### IV. RECOMMENDATION

The study has determined substantial compliance with applicable licensing statutes and administrative rules. Therefore, a temporary license with a maximum capacity of 6 is recommended.

| mount                | 44/04/0007 |
|----------------------|------------|
| <u> </u>             | 11/21/2007 |
| James Clark          | Date       |
| Licensing Consultant |            |

Approved By:

11/26/2007

Barbara Smalley Area Manager Date