



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



JENNIFER M. GRANHOLM  
GOVERNOR

ISMAEL AHMED  
DIRECTOR

February 19, 2009

Lee Ann Williams  
Emmaus Corp.  
P.O. Box 1064  
224 S Grand  
Fowlerville, MI 48836-1064

RE: License #: AL330093906  
Haven Of Rest  
2447 N Williamston  
Williamston, MI 48895

Dear Mrs. Williams:

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) 241-2585.

Sincerely,

Barbara K. Williams, Licensing Consultant  
Bureau of Children and Adult Licensing  
7109 W. Saginaw  
P.O. Box 30650  
Lansing, MI 48909  
(517) 241-0978

Enclosure

**MICHIGAN DEPARTMENT OF HUMAN SERVICES  
BUREAU OF CHILDREN AND ADULT LICENSING  
ADDENDUM TO ORIGINAL LICENSING STUDY REPORT**

**I. IDENTIFYING INFORMATION**

**License #:** AL330093906

**Licensee Name:** Emmaus Corp.

**Licensee Address:** P.O. Box 1064  
224 S Grand  
Fowlerville, MI 48836-1064

**Licensee Telephone #:** (517) 256-7922

**Administrator/Licensee Designee:** Lee Ann Williams, Designee

**Name of Facility:** Haven Of Rest

**Facility Address:** 2447 N Williamston  
Williamston, MI 48895

**Facility Telephone #:** (517) 655-8953

**Capacity:** 18

**Program Type:** ALZHEIMERS  
AGED

**II. Purpose of Addendum**

The Licensee Designee, LeeAnn Williams requested the facility capacity to be increased from seventeen to eighteen.

**III. Methodology**

- 12/04/2008 Fire Safety Approval
- 12/16/2008 Environmental Health Approval
- 01/23/2009 Onsite Inspection completed
- 01/23/2009 Document received – updated floor plan

**IV. Description of Findings and Conclusions**

The facility now has eight private and five semi-private resident bedrooms all on the main floor meeting the square footage requirement. The facility has ample living room and dining room space to accommodate the eighteen residents. The facility has an ample number of bathrooms throughout the facility meeting above the bathroom requirement. Twelve residents are currently living in the facility. Ms. Williams agreed to have sufficient direct care staff on duty at all times for the supervision, personal care and protection of residents as required by Rule 400.15206 (2). The facility received a fire safety approval from the Bureau of Fire Services on 12/4/2008 and an Environmental Health approval form Ingham County Health Department on 12/16/2008. The facility has zoning approval from Wheatfield Township.

**V. Recommendation**

It is recommended that the licensing capacity be increased from seventeen to eighteen.

*Barbara K. Williams*

02/19/09

Barbara K. Williams  
Licensing Consultant

Date