



pennsylvania

DEPARTMENT OF HUMAN SERVICES

CERTIFICATE OF COMPLIANCE

This certificate is hereby granted to MORAVIAN MANORS INC

LEGAL ENTITY

To operate MORAVIAN MANOR

NAME OF FACILITY OR AGENCY

Located at 300 WEST LEMON STREET, LITITZ, PA 17543

(COMPLETE ADDRESS OF FACILITY OR AGENCY)

ADDRESS OF SATELLITE SITE/SERVICE LOCATION

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To provide Assisted Living

TYPE OF SERVICE(S) TO BE PROVIDED

The total number of persons which may be cared for at one time may not exceed 40
or the maximum capacity permitted by the Certificate of Occupancy, whichever is smaller.

(MAXIMUM CAPACITY)

Restrictions: _____

This certificate is granted in accordance with the Human Services Code of 1967, P.L. 31, as amended, and Regulations

55 Pa.Code Chapter 2800: Assisted Living Residences

(MANUAL NUMBER AND TITLE OF REGULATIONS)

and shall remain in effect from January 1, 2024 until January 1, 2025,
unless sooner revoked for non-compliance with applicable laws and regulations.

No: **333090**

Junita Siderup
ISSUING OFFICER

Juliet Marsala
ACTING DEPUTY SECRETARY

NOTE: This certificate is issued for the above site(s) only and is not transferable and should be posted in a conspicuous place in the facility.



Emailing date: October 31, 2023

Moravian Manor, Inc.
300 West Lemon Street
Lititz, Pennsylvania 17543

RE: Moravian Manor
Certificate #: 333090

Dear Moravian Manor, Inc.,

The Department has received your September 11, 2023 renewal application to operate the above Assisted Living Home pursuant to Title 55, PA Code, Chapter 2800. A regular license is being issued in response to your application. Your license is enclosed.

Please be advised that, pursuant to 55 Pa.Code § 20.31 (relating to annual inspection), the Department is required to conduct an onsite inspection of the above Assisted Living Home at least once every twelve months. The Department will conduct an inspection of Moravian Manor within the next twelve months. If evidence of noncompliance with Title 55, PA Code, Chapter 2800 is found during the inspection, the Department will take appropriate enforcement action.

If you have any questions about the Department's process, please contact the Bureau of Human Services Licensing's Provider Support Hotline at 1-866-503-3926 or by electronic mail at ra-pwarheadquarters@state.pa.us.

Sincerely,

A handwritten signature in black ink that reads "Juliet Marsala". The signature is written in a cursive style.

Juliet Marsala
Deputy Secretary
Office of Long-term Living

Enclosure
License