



**pennsylvania**  
DEPARTMENT OF HUMAN SERVICES

**CERTIFICATE OF COMPLIANCE**

This certificate is hereby granted to **GREEN RIDGE PERSONAL CARE LLC**  
LEGAL ENTITY

To operate **THE GARDENS OF GREEN RIDGE**  
NAME OF FACILITY OR AGENCY

Located at **2751 BOULEVARD AVENUE, SCRANTON, PA 18509**  
(COMPLETE ADDRESS OF FACILITY OR AGENCY)

ADDRESS OF SATELLITE SITE ADDRESS OF SATELLITE SITE

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To provide **Assisted Living-Special Care**  
TYPE OF SERVICE(S) TO BE PROVIDED

The total number of persons which may be cared for at one time may not exceed **74**  
(MAXIMUM CAPACITY)  
or the maximum capacity permitted by the Certificate of Occupancy, whichever is smaller.

**Special Care Unit - 55 Pa.Code §§ 2800.231-239 - Capacity 40**

Restrictions: \_\_\_\_\_

This certificate is granted in accordance with the Public Welfare 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 **November 5, 2015** until **November 5, 2016**,  
unless sooner revoked for non-compliance with applicable laws and regulations.

No: 225160

*Robert E. Robinson*  
ISSUING OFFICER

*Matthew J. [Signature]*  
DIRECTOR

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.



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DEPARTMENT OF HUMAN SERVICES

AUG 0 5 2015

Mr. George S. Repchick, President  
Green Ridge Personal Care, LLC  
26691 Richmond Road  
Bedford Heights, Ohio 44146

RE: The Gardens of Green Ridge  
2751 Boulevard Avenue  
Scranton, Pennsylvania 18509  
Certificate #: 225160

Dear Mr. Repchick:

The Department has received your July 20, 2015 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 The Gardens of Green Ridge 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 revised process, please contact the Bureau of Human Services Licensing's Provider Support Hotline at 1-866-503-3926 or by electronic mail at [ra-pwarlheadquarters@state.pa.us](mailto:ra-pwarlheadquarters@state.pa.us).

Sincerely,

A handwritten signature in black ink, appearing to read "Matthew J. Jones", with a long horizontal flourish extending to the right.

Matthew J. Jones  
Director

Enclosure  
License