

## CERTIFICATE OF COMPLIANCE

This certificate is hereby granted to ACTS RETIREMENT-L	IFE COMMUNITIES INC	**************************************
To operate OAKBRIDGE TERRACE AT FORT WASHINGTON ESTATES		
NAM	E OF FACILITY OR AGENCY	
Located at _735 SUSQUEHANNA ROAD FORT WASHINGTON, PA_1		
(COMPLETE.	ADDRESS OF FACILITY OR AGENCY)	
ADDRESS OF SATELLITE SITE	ADDRESS OF SATELLITE SITE	West of the second seco
ADDRESS OF SATELLITE SITE	ADDRESS OF SATELLITE SITE	AND COLOR BOOK OF THE STATE OF
ADDRESS OF SATELLITE SITE	ADDRESS OF SATELLITE SITE	
To provide Assisted Living		
TYPE OF SERVICE(S) TO B		
The total number of persons which may be cared for at one time may n	not exceed 18 (MAXIMUM CAPACITY)	DEWAYARE CONTROL OF THE PROPERTY OF THE PROPER
or the maximum capacity permitted by the Certificate of Occupancy, when the maximum capacity permitted by the Certificate of Occupancy, when the maximum capacity permitted by the Certificate of Occupancy, when the capacity permitted by the Certificate of Occupancy, when the capacity permitted by the Certificate of Occupancy, when the capacity permitted by the Certificate of Occupancy, when the capacity permitted by the Certificate of Occupancy, when the capacity permitted by the Certificate of Occupancy, when the capacity permitted by the Certificate of Occupancy, when the capacity permitted by the Certificate of Occupancy, when the capacity permitted by the Certificate of Occupancy, when the capacity permitted by the Certificate of Occupancy, when the capacity permitted by the Certificate of Occupancy, when the capacity permitted by the Certificate of Occupancy permitted by the Occupancy permitted	nicnever is smaller.	
Restrictions:		
	a of 1067 D.L. 21, as amonded, and Regulation	2.5
This certificate is granted in accordance with the Human Services Code	e of 1907, P.L. 51, as afficiated, and Regulation	15
55 Pa.Code Chapter 2800: Assisted Living Residences		
(MANUAL NUMBER AND TIT	ILE OF REGULATIONS)	
and shall remain in effect from May 24, unless sooner revoked for non-compliance with applicable laws and reg		2020 ,
14.00.40		
No: <b>138940</b>		
	Q. (16 all')	
Kobert E. Kobinson	Carolyn K Ellish	

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.



FFR 2 5 2019

Ms. Holly Schade Sr. VP Health & Home Services ACTS Retirement - Life Communities, Inc. 375 Morris Road West Point, Pennsylvania 19486

RE: Oakbridge Terrace at Fort Washington Estates

735 Susquehanna Road

Fort Washington, Pennsylvania 19034

Certificate #: 138940

Dear Ms. Schade:

The Department has received your February 8, 2019 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 Oakbridge Terrace at Fort Washington Estates 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-pwarlheadquarters@state.pa.us.

Sincerely

Jacqueline L. Rowe

Director

Enclosure License