



December 02, 2014

John Pearl, Director
Applied Skills Industries
827 Glenside Avenue, Suite 100
Wyncote, PA 19095

RE: Applied Skills Industries
License # 285240 - Regular

Dear Mr. Pearl:

The Department of Aging received your Application for License on 12/01/2014. The purpose of the Application for License was relocation from 101 Tomlinson Road, Huntingdon Valley, PA 19006 to 827 Glenside Avenue, Suite 100, Wyncote, PA 19095.

As a result of an abbreviated licensing inspection on 11/21/2014, we have found the above named facility to be in compliance with applicable statutes, ordinances and regulations. Therefore, a Regular license reflecting the facility's new location and capacity is enclosed.

Thank you for your continued effort to provide quality older adult daily living services. If you have questions, please contact me at (717) 214-6716.

Sincerely,

A handwritten signature in black ink, appearing to read "Kevin Longenecker", is written over a light blue horizontal line.

Kevin Longenecker
Director

Enclosures

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF AGING

LICENSE

This license is hereby granted to KENCREST SERVICES
LEGAL ENTITY

To operate APPLIED SKILLS INDUSTRIES
(NAME OF CENTER)

Located at 827 GLENSIDE AVENUE, SUITE 100 WYNCOTE, PA 19095
(COMPLETE ADDRESS OF CENTER)

To provide older adult daily living services.

The total number of persons which may be served at one time may not exceed 168
(MAXIMUM CAPACITY)

Restrictions: _____

This license is granted in accordance with the Act of July 11, 1990 (P.L. 499, No. 118) and Regulations.
TITLE 6. PA CODE. CHAP. 11. OLDER ADULT DAILY LIVING CENTER Dated July 03, 1993
(NUMBER AND TITLE OF REGULATIONS)

and shall remain in effect from December 01, 2014 until May 31, 2015

unless sooner revoked for non-compliance with applicable laws and regulations.

No: 285240 - Regular



ISSUING OFFICER

NOTE: This license is issued for the above address only and is not transferable. This license should be posted in a conspicuous place in the center.

Issued On: December 02, 2014

AGL01

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER LICENSE NUMBER: 285240	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 11/21/2014
NAME OF PROVIDER OR SUPPLIER Applied Skills Industries		STREET ADDRESS, CITY, STATE, ZIP CODE 827 GLENSIDE AVENUE, SUITE 100 WYNCOTE, PA 19095		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
1 000	Initial Comments A State licensure relocation inspection was completed on November 21, 2014. It was determined that Applied Skills Industries was in compliance with the requirements of 6 PA Code, Chapter 11, Older adult Daily Living Centers Regulations.	1 000		

AUTHORIZED PROVIDER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

DEPARTMENT OF AGING APPROVAL

DATE