| STATEMENT OF DEFICIENCIES | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: | (X3) DATE SURVEY COMPLETED |
|---|---|---|
| | **AL11967124** | R<br>**01/16/2018** |
| NAME OF PROVIDER OR SUPPLIER<br>**ZUNI ALF** | STREET ADDRESS, CITY, STATE, ZIP CODE<br>**370 NW 133RD PLACE**<br>**MIAMI, FL 33182** | |

SUMMARY STATEMENT OF DEFICIENCIES
(FINDINGS PRECEDED BY TAGS AND REGULATORY IDENTIFYING INFORMATION)

**0000 - Initial Comments**

A Standard Biennial Survey Revisit was conducted on 01/16/2018. Zuni ALF (AL #11226) did not have deficiencies identified at the time of the survey.