

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 06/13/2018
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11969371	(X3) DATE SURVEY COMPLETED 06/04/2018
NAME OF PROVIDER OR SUPPLIER CERTUS MTD OPCO, LLC	STREET ADDRESS, CITY, STATE, ZIP CODE 4901 LAKE PARK CT MOUNT DORA, FL 32757	

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

0000 - Initial Comments

On June 4, 2018, an initial licensure survey was conducted at Certus MTD OPCO, LLC Assisted Living Facility, Mount Dora, FL. No deficient practice was identified at the time of survey.