STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11969105	**09/12/2018**
NAME OF PROVIDER OR SUPPLIER **PALACE AT HOMESTEAD, LLC**	STREET ADDRESS, CITY, STATE, ZIP CODE **3100 NE 8TH ST** **HOMESTEAD, FL 33033**	

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

0000 - Initial Comments

A Standard Biennial and Generator monitoring survey was conducted on 09/12/2018 and concluded on 09/13/2018. The Palace at Homestead (License #12939) had no deficiencies identified at the time of survey.