

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 12/26/2018
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11969117	(X3) DATE SURVEY COMPLETED R 12/12/2018
NAME OF PROVIDER OR SUPPLIER MARKET STREET VIERA	STREET ADDRESS, CITY, STATE, ZIP CODE 6845 MURRELL RD MELBOURNE, FL 32940	

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

0000 - Initial Comments

A revisit to the re-licensure survey was conducted on 12/12/2018. Market Street Viera Assisted Living Facility with Limited Nursing Services (LNS), License #12935 had no deficiencies at the time of the visit.