

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 01/11/2019
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11965472	(X3) DATE SURVEY COMPLETED 12/18/2018
NAME OF PROVIDER OR SUPPLIER BELVEDERE COMMONS OF FORT WALTON BEACH	STREET ADDRESS, CITY, STATE, ZIP CODE 2000 PRINCIPAL LANE FORT WALTON BEACH, FL 32547	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAGS AND REGULATORY IDENTIFYING INFORMATION)		
0000 - Initial Comments An unannounced complaint survey for allegations contained within CCR#2018016074 was conducted on 12/18/2018 at Belvedere Commons of Fort Walton Beach. The facility had no deficiencies identified at the time of the survey.		