STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11942847	**08/07/2018**
NAME OF PROVIDER OR SUPPLIER **NTM HOMES**	STREET ADDRESS, CITY, STATE, ZIP CODE **98 MISSIONS BLVD** **SANFORD, FL 32771**	

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

0000 - Initial Comments

A Generator Assessment survey was conducted on 8/7/2018. NTM Homes, (LIC#8300) had no deficiencies at the time of the visit.