Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	FCL080004	A. BUILDING: 01 B. WING	08/02/2018

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
MARY'S FAMILY CARE HOME	485 LONG FERRY ROAD SALISBURY, NC 28144

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
C 000	Initial Comments Report by Gabriel Villacres DHSR Construction Section conducted a Biennial Survey on August 2, 2018 from 10:40 AM to 12:15 PM at the above referenced facility. DHSR records indicate the home was first licensed on July 17, 1985 as a Family Care Home for six (6) ambulatory Residents on October 16, 2009 The homes capacity was reduced down to five (5) ambulatory Residents (able to respond and evacuate without any physical or verbal assistance during a fire or other emergency). Based on this information we are requiring the home to maintain compliance with the following: the 1984 Family Care Homes Minimum Standards and Regulations, and the applicable portions of the 2005 Rules 10A NCAC 13G for Family Care Homes and the 1978 (Revision 5) North Carolina State Building Code - Section 409.1 (g) - Residential Care Facilities. At the time of our visit, we cited deficiencies that require an acceptable plan of correction. They are as follows:	C 000		
C 110	Construction-Basement, Attic SECTION .0300 - THE BUILDING 10A NCAC 13G .0302 DESIGN AND CONSTRUCTION (g) The basement and the attic shall not to be used for storage or sleeping. This Rule is not met as evidenced by: 1.) The rule requires that the basement and the attic shall not to be used for storage or sleeping: At the time of the survey it was observed that various objects were being stored in the attic e.g.	C 110	RECEIVED NOV 30 2018 CONSTRUCTION SECTION SCANNED 11-30-18	

Division of Health Service Regulation
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE — TITLE — (X6) DATE

Pamela M Hellard — Administrator — 10/26/2018

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
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C 110	Continued From page 1 cardboard boxes, rugs, hoses, misc. equipment etc. this is not compliant with the rule. Take actions to have the listed defieciency corrected, once completed provide photos to DHSR Construction Section as verification of work performed.	C 110	the attic has been completely cleared out of all objects	9/25/18
C 135	Bathroom-Hand Grips SECTION .0300 - THE BUILDING 10A NCAC 13G .0309 BATHROOM (e) Hand grips shall be installed at all commodes, tubs and showers used by the residents. This Rule is not met as evidenced by: 1.) The rule requires that hand grips shall be installed at all commodes, tubs and showers used by the residents: At the time of the survey it was observed that the handrail provided for the shower was loose. Take actions to have the listed defieciency corrected, once completed provide photos to DHSR Construction Section as verification of work performed.	C 135	All Handrails have been replace and tight.	9/25/18
C 147	Outside Entrances/Exits-Single Hand Motion SECTION .0300 - THE BUILDING 10A NCAC 13G .0312 OUTSIDE ENTRANCE AND EXITS (d) All exit door locks shall be easily operable, by a single hand motion, from the inside at all times without keys. Existing deadbolts or turn buttons on the inside of exit doors shall be removed or disabled.	C 147		

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NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
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C 147	Continued From page 2 This Rule is not met as evidenced by: 1.) The rule requires that all exit door locks shall be easily operable, by a single hand motion, from the inside at all times without keys. Existing deadbolts or turn buttons on the inside of exit doors shall be removed or disabled: At the time of the survey it was observed that both the front and rear entrance doors and storm doors had active thumb latches and hook locks. Take actions to have the listed defieciency corrected, once completed provide photos to DHSR Construction Section as verification of work performed.	C 147	all locks were changed to single hand-motion locks	9/25/18
C 149	Outside Entrances/Exits-Handrails At Porches SECTION .0300 - THE BUILDING 10A NCAC 13G .0312 OUTSIDE ENTRANCE AND EXITS (f) All steps, porches, stoops and ramps shall be provided with handrails and guardrails. This Rule is not met as evidenced by: (1) The rule requires that all steps, porches, stoops and ramps shall be provided with handrails and guardrails: At the time of the survey it was observed that the rear left stoop only had a single handrail this is not compliant with the rule. (2) The rule requires that all steps, porches, stoops and ramps shall be provided with handrails and guardrails:	C 149	Additional handrail was added	10/2/18

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C 149	Continued From page 3 At the time of the survey it was observed that the hand rails in the rear stoop and front stoop did not extend the full length of the stairs run. Take actions to have the listed deficiencies corrected, once completed provide photos to DHSR Construction Section as verification of work performed.	C 149	Handrails were replaced to extend to the full length of stair run.	9/25/18
C 153	Houskeeping And Furnishings-Clean, Repaired SECTION .0300 - THE BUILDING 10A NCAC 13G .0315 HOUSEKEEPING AND FURNISHINGS (a) Each family care home shall: (1) have walls, ceilings, and floors or floor coverings kept clean and in good repair; (2) have no chronic unpleasant odors; (3) have furniture clean and in good repair; (e) This Rule shall apply to new and existing homes. This Rule is not met as evidenced by: (1) The rule requires that each family care home shall have walls, ceilings, and floors or floor coverings kept clean and in good repair: At the time of the survey it was observed that the window in the first bedroom to the right was broken. (2) The rule requires that each family care home shall have walls, ceilings, and floors or floor coverings kept clean and in good repair: At the time of the survey it was observed that linens have fallen behind the clothes dryer. (3) The rule requires that each family care home	C 153	New window was installed Linen was removed from behind clothes dryer	9/26/18 9/25/18

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C 153	Continued From page 4 shall have walls, ceilings, and floors or floor coverings kept clean and in good repair: At the time of the survey it was observed that the floor to the bathroom next to the kitchen was elevated, presenting a trip hazard. (4) The rule requires that each family care home shall have walls, ceilings, and floors or floor coverings kept clean and in good repair: At the time of the survey it was observed that there was a dead bird in the attic space above the covered patio. Take actions to have the listed deficiencies corrected, once completed provide invoices, receipts and photos to DHSR Construction Section as verification of work performed.	C 153	their was a hand-rail added for support. the bird was removed.	9/26/18 9/25/18
C 172	Fire Safety-Four Rehearsals SECTION .0300 - THE BUILDING 10A NCAC 13G .0316 FIRE SAFETY AND DISASTER PLAN (e) There shall be at least four rehearsals of the fire evacuation plan each year. Records of rehearsals shall be maintained and copies furnished to the county department of social services annually. The records shall include the date and time of the rehearsals, staff members present, and a short description of what the rehearsal involved. This Rule is not met as evidenced by: 1.) The rule requires that there shall be at least four rehearsals of the fire evacuation plan each year:	C 172		

Division of Health Service Regulation

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C 172	Continued From page 5 At the time of the survey it was observed that the home has only performed one (1) fire drill within the year of 2018. Take actions to have the listed defieciency corrected, once completed provide to DHSR Construction Section copies of your performed drills for all three shifts as verification of work performed..	C 172	our facility performs fire drills every 3 months. I've enclosed documentation	9/26/18
C 174	Building Equipment Maintained Safe, Operating SECTION .0300 - THE BUILDING 10A NCAC 13G .0317 BUILDING SERVICE EQUIPMENT (a) The building and all fire safety, electrical, mechanical, and plumbing equipment in a family care home shall be maintained in a safe and operating condition. (j) This Rule shall apply to new and existing family care homes. This Rule is not met as evidenced by: (1) The rule requires that the building and all fire safety, electrical, mechanical, and plumbing equipment in a family care home shall be maintained in a safe and operating condition: At the time of the survey it was observed that the basement's sump pump was damaged and as a result of this the basement has standing water roughly 4 - 6 inches in depth. (2) The rule requires that the building and all fire safety, electrical, mechanical, and plumbing equipment in a family care home shall be maintained in a safe and operating condition: At the time of the survey it was observed that	C 174	Sump pump was repaired and basement is clear	8/31

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C 174	Continued From page 6 there was a power strip on the left side of the home that extended from an outlet inside the covered patio to the outside. Upon further examination, the outlets were filled with water from the recent rains. (3) The rule requires that the building and all fire safety, electrical, mechanical, and plumbing equipment in a family care home shall be maintained in a safe and operating condition: At the time of the survey it was observed that clothes dryer's flex duct was crimped. (4) The rule requires that the building and all fire safety, electrical, mechanical, and plumbing equipment in a family care home shall be maintained in a safe and operating condition: At the time of the survey it was observed that the emergency light above the home's rear entrance did not work. (5) The rule requires that the building and all fire safety, electrical, mechanical, and plumbing equipment in a family care home shall be maintained in a safe and operating condition: At the time of the survey it was observed that there was a smoke detector present in one of the bedrooms that was beginning to detach from the ceiling. Take actions to have the listed deficiencies corrected, once completed provide photos to DHSR Construction Section as verification of work performed.	C 174	the power strips have been properly covered the clothes dryer flex duct has been replaced with new the emergency light has been replaced the surface around the smoke detector has been repaired	9/25/18 9/26/18 9/28/18 9/26/18

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C 183	Continued From page 7	C 183		
C 183	Outside Premises-Clean, Safe SECTION .0300 - THE BUILDING 10A NCAC 13G .0318 OUTSIDE PREMISES (a) The outside grounds of new and existing family care homes shall be maintained in a clean and safe condition. This Rule is not met as evidenced by: (1) The rule requires that the outside grounds of new and existing family care homes shall be maintained in a clean and safe condition. At the time of the survey it was observed that there was an old stove in the carport. Make arrangements to have the deficiency corrected. Provide documentation in the form of photos for all work completed.	C 183	the old stove has been removed	9/25/18
	(2) The rule requires that the outside grounds of new and existing family care homes shall be maintained in a clean and safe condition. At the time of the survey it was observed that a pipe was protruding into the basement and up through the roof. The pipe that protrudes the basement made an opening that needs to be filled in.		the opening has been caped off	9/28/18
	(3) The rule requires that the outside grounds of new and existing family care homes shall be maintained in a clean and safe condition. At the time of the survey it was observed that the ground around the cement floor of the carport and rear of the home was weather away, leaving a ledge. Take actions to have the listed deficiencies		this area has been fill in with gravel and landscaped	9/27/18

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C 183	Continued From page 8 corrected, once completed provide invoices and receipts and photos to DHSR Construction Section as verification of work performed.	C 183		
C 134	Fire Safety-Smoke. Heat Detectors IV. The Building E. Fire Safety Requirement (10 NCAC 42C .2213) 3. The home must provide automatic, single station U.L. listed smoke (ionization) detectors in locations as determined by the Division of Facility Services and U.L. listed heat detectors in the attic and basement. These detectors must be directly wired to the house current. This Rule is not met as evidenced by: 1.) The rule requires that the home must provide automatic, single station U.L. listed smoke (ionization) detectors in locations as determined by the Division of Facility Services and U.L. listed heat detectors in the attic and basement. These detectors must be directly wired to the house current: At the time of the survey we were unable to verify if there was heat detector in the attic or the basement. Take actions to have the listed deficiency corrected, once completed provide invoices and receipts and photos to DHSR Construction Section as verification of work performed.	C 134	Heat detector will be installed and Photos sent in by Nov. 1, 2018	

PRG Construction LLC

(1)

#704-640-0467

Job Invoice

DATE ORDERED	ORDER TAKEN BY
PHONE NO.	CUSTOMER ORDER #
JOB LOCATION	
JOB PHONE	STARTING DATE
TERMS	

SOLD TO
MRS Pam Holland
#704-640-0590 (Miss Mary Nursing Home) Longferry Rd Spencer N.C 28159

QTY.	MATERIAL	UNIT	AMOUNT
5	Repaired 5# window Screens Rebuit 2#		
3# + 1	Replace locks first front entry second entry as well Replace lock for bathroom		
	Installed hand rail to bathroom entry		
1#	Replaced window Replaced damaged wood Rerapped facing to window		
1)	Closed ~~at~~ outside hole, with a cap		
1)	Repaired fire Alarm in first room		
1)	Repaired hole on the outside of the ~~door~~ light in room also		
	TOTAL MATERIALS		

DESCRIPTION OF WORK

1) Repaired hand rail on existing deck extended 18 inches on both sides.

1) Installed 2 hand rails in bathroom Tub.

1) Replaced dryer line.

MISCELLANEOUS CHARGES

We had to redo locks Changed to different type.

Reworked Shelfs in laundry room

TOTAL MISCELLANEOUS

LABOR	HRS.	RATE	AMOUNT
Clean up Attic both areas			
TOTAL LABOR			

WORK ORDERED
DATE ORDERED
DATE COMPLETED

Thank you for your Business.

CUSTOMER APPROVAL SIGNATURE

AUTHORIZED SIGNATURE

TOTAL LABOR	1,600 00
TOTAL MATERIALS	1,525. 50
TOTAL MISCELLANEOUS	
SUBTOTAL	
TAX	
GRAND TOTAL	$3,12

A-2817-3817 / T-3866

10-11

10/16 . 18

Pam Mary's Family Care Home
485 Long Ferry St

(2)

McDANIEL AWNING MFG. CO.

225 White Farm Rd. Salisbury, NC 28147-7730
Phone 704-636-8503 Fax 704-636-8622

CUSTOM VENTILATED AWNINGS, REPLACEMENT WINDOWS, STORM WINDOWS AND DOORS,
PATIO COVERS, ALUMINUM GUTTERING, SIDING AND BOXING, ORNAMENTAL IRON,
PORCH ENCLOSURES, CARPORTS AND MARQUES

No. of ITEMS	We Custom Build Storm Windows And Enclosures In Our Shop	TOTAL AMOUNT COST
	wrought iron handrails	
	Total	$650.00

PD C/C 838

PAYMENT DUE WITHIN 30 DAYS
ORDER NOT SUBJECT TO CANCELLATION AFTER WORK HAS STARTED

298624

(3)

CUSTOMER'S ORDER NO.	DEPARTMENT	DATE 9/28/18
NAME Pam Holland		
ADDRESS		
CITY, STATE, ZIP Salisbury, N.C		

SOLD BY	CASH	C.O.D.	CHARGE	ON. ACCT.	MDSE. RETD.	PAID OUT

QUANTITY	DESCRIPTION	PRICE	AMOUNT
1	Wired An Hung Exit Lt		
2			
3			
4	Wired And installed Door Bell		
5			
6			
7	Put WP Box on Wire outside		
8			
9			
10	[redacted] Labor		
11			
12	#325.00	325.00	325.00
13			
14	Paid in full		
15			
16			
17			
18			

RECEIVED BY

A-5805
T-46320/46350

KEEP THIS SLIP FOR REFERENCE

01-11

PRG Construction LLC 392723
704-640-0467

CUSTOMER'S ORDER NO.	DEPARTMENT	DATE
NAME Pam Holland (Miss Mary Rest Home)		
ADDRESS 485 Long ferry Rd		
CITY, STATE, ZIP Spencer N.C 28159		

SOLD BY	CASH	C.O.D.	CHARGE	ON. ACCT.	MDSE. RETD.	PAID OUT

QUANTITY	DESCRIPTION	PRICE	AMOUNT
1	Remove water out		
2	of flooded base-		
3	ment. Material &		
4	Labor Cost	280 #	280.00
5			
6	Fix busted 1"		
7	PVC Pipe under-		
8	neath Rent House		
9	Labor & Material		
10	Cost	85 #	85.00
11			
12			
13	Total Cost →	#	365.00
14			
15	Paid in full on		
16	8-31-2018		
17			
18			

RECEIVED BY

A-5805
T-46320/46350

KEEP THIS SLIP FOR REFERENCE

01-11

MRS Pam Holland

LOWE'S

LOWE'S HOME CENTERS, LLC
207 FAITH ROAD
SALISBURY, NC 28146 (704) 638-0808

- SALE -

SALES#: S0495DK2 834031 TRANS#: 48968891 09-26-18

252801 5-1/2IN STAINLESS STL DOO	18.89
585250 LARSON QUICKFIT HDL KIT B	49.00
176712 SCH SC COMMERCIAL DEADBOL	59.94
2 @ 29.97	
176696 SCH SC HALL/CLOSET LVR EL	59.94
2 @ 29.97	
172296 5/16IN X 60IN SCREEN KIT	26.96
2 @ 13.48	
950 1-6-6 #2 TC WHITEWOOD BOA	17.76
3 @ 5.92	
759058 3-LB SAKRETE MORTAR REP	8.03
15542 36IN X 84IN SILVERGRAY I	6.78
757012 10-PACK GREEN WINGNUTS GR	2.08
6586 PVC TRM COIL 24-INX50-FT(	25.00
585253 LARSON TWFV 36 FRAME WHT	249.00
267.00 DISCOUNT EACH	-18.00

SUBTOTAL:	523.30
TAX:	36.64
TOTAL:	560.02
DEBIT:	560.02
TOTAL AMOUNT:	10

DEBIT:XXXXXXXXXXXX7640 AMOUNT:560.02 AUTHCD 092589
SWIPED REFID:049519125753 09/26/18 09:27:43
TRACE:00306059

PURCHASE	CASH BACK	TOTAL DEBIT
560.02	0.00	560.02

TERMINAL: 19 09/26/18 09:35:27

ITEMS PURCHASED: 10

LOWE'S FEES, SERVICES AND SPECIAL ORDER ITEMS

THANK YOU FOR SHOPPING LOWE'S.
SEE REVERSE SIDE FOR RETURN POLICY.
STORE MANAGER: CHRIS REYNOLDS

LOWE'S PRICE MATCH GUARANTEE
FOR MORE DETAILS, VISIT LOWES.COM/PRICEMATCH

****
REGISTER FOR A CHANCE TO
ONE OF FIVE US$300 WINNERS DRAWN MONTH
¡REGÍSTRESE EN EL SORTEO MENSUAL
PARA SER UNO DE LOS CINCO GANADORES DE US$300!
ONLY
ENTER BY COMPLETING A GUEST SATISF
ONE WEEK AT: www.lowe
T D # 1966

Mr. Chaney (elect)
$235.60
Materials
$ 1,200.50
Total =
$ 1,535.50

LOWE'S

LOWE'S HOME CENTERS, LLC
207 FAITH ROAD
SALISBURY, NC 28146 (704) 638-0808

- SALE -

TRANS#: 34895464 09-25-18

Mrs. Pam Holland

DEBIT
AUTH TIME: 121945
AUTH: 00
Ref #: 980002200347
APPROVAL#: 082924
Account Type: DEB
Network Name: MA
0
Terminal Seq Num
9166
PIN USED
NO SIGNATURE NEE

DEBIT $38.00
FUEL SALE $ 38.00
PRICE/G: $ 3.099
GALLONS: 12.261
PRODUCT: DIESL
SERVICE LEVEL: SELF
PUMP# 04
TRAN# 904631
DATE 09/25/18

(15)

Mrs Parr Holland

LOWE'S®

LOWE'S HOME CENTERS, LLC
207 FAITH ROAD
SALISBURY, NC 28146 (704) 638-0808

- SALE -

SALES#: S0495TM1 803734 TRANS#: 34993671 09-26-18

66263 24-IN CONCEALED SCREW 1-1	26.98
65843 18-IN CONCEALED SCREW 1-1	19.97
353939 CB 36 ATHENS WHITE MV	124.00
SUBTOTAL:	170.95
TAX:	11.97
INVOICE 56729 TOTAL:	182.92
CASH :	200.00
CHANGE:	17.08

STORE: 0495 TERMINAL: 56 09/26/18 16:28:13

OF ITEMS PURCHASED: 3

EXCLUDES FEES, SERVICES AND SPECIAL ORDER ITEMS

THANK YOU FOR SHOPPING LOWE'S.
SEE REVERSE SIDE FOR RETURN POLICY.
STORE MANAGER: CHRIS REYNOLDS

LOWE'S PRICE MATCH GUARANTEE
FOR MORE DETAILS, VISIT LOWES.COM/PRICEMATCH

YOUR OPINIONS COUNT!
REGISTER FOR A CHANCE TO BE
ONE OF FIVE US$300 WINNERS DRAWN MONTHLY!
¡REGISTRESE EN EL SORTEO MENSUAL
PARA SER UNO DE LOS CINCO GANADORES DE US$300!

REGISTER BY COMPLETING A GUEST SATISFACTION SURVEY
WITHIN ONE WEEK AT: www.lowes.com/
YOUR ID # 56729 0495

NO PURCHASE NECESSARY T...
VOID WHERE PROHIBITED. MUST...
OFFICIAL RULES & WINNER...

STORE: 0495

Mrs Parr

LOWE'S®

Door Bell

LOWE'S HOME CENTERS, LLC
[illegible] FAITH ROAD
[illegible] (704) 638-0808

- SALE -

SALES#: [illegible] TRANS#: 22174815 09-28-18

39[illegible] SWEET W/HH	1.88
[illegible] PUSH BUTTON [illegible]	6.98
SUBTOTAL:	8.86
TAX:	0.62
INVOICE 51821 TOTAL:	9.48
CASH :	10.00
CHANGE:	0.52

STORE: 0495 TERMINAL: 51 09/28/18 18:4[illegible]

OF ITEMS PURCHASED: 2

EXCLUDES FEES, SERVICES AND SPECIAL ORDER ITEMS

THANK YOU FOR SHOPPING LOWE'S.
SEE REVERSE SIDE FOR RETURN POLICY.
STORE MANAGER: CHRIS REYNOLDS

LOWE'S PRICE MATCH GUARANTEE
FOR MORE DETAILS, VISIT LOWES.COM/PRICEMATCH

YOUR OPINIONS COUNT!
REGISTER FOR A CHANCE TO BE
ONE OF FIVE US$300 WINNERS DRAWN MONTHLY!
¡REGISTRESE EN EL SORTEO MENSUAL
PARA SER UNO DE LOS CINCO GANADORES DE US$300!

REGISTER BY COMPLETING A GUEST SATISFACTION SURVEY
WITHIN ONE WEEK AT: www.lowes.com/survey
YOUR ID # 51821 0495 271

NO PURCHASE NECESSARY TO ENTER OR WIN.
VOID WHERE PROHIBITED. MUST BE 18 OR OLDER TO ENTER.
OFFICIAL RULES & WINNERS AT: www.lowes.com/survey

STORE: 0495 TERMINAL: 51 09/28/18 18:47:05

6

Door Bell Wire material & Exit signs

LOWE'S

LOWE'S HOME CENTERS, LLC

[illegible] SMITH ROAD

[illegible] (201) 630-0800

SALE

SALES#: [illegible] TRANS#: [illegible] 09-28-18

[illegible] HS PVC 1/2-IN X 5-FT RND	[illegible]
[illegible] UNIVERSAL BRONZE DOORBELL	49.98
[illegible] 18/2 DOORBELL WIRE 50-FT	7.98
[illegible] WIRED TRI VOLT TRANSFO	14.98
[illegible]	[illegible]
[illegible]	[illegible]

SUBTOTAL: [illegible]

TAX: [illegible]

INVOICE [illegible] TOTAL: [illegible]

86.81

[illegible]

[illegible]

[illegible]

THANK YOU FOR SHOPPING LOWE'S.
SEE REVERSE SIDE FOR RETURN POLICY.
STORE MANAGER: CHRIS REYNOLDS

LOWE'S PRICE MATCH GUARANTEE
FOR MORE DETAILS, VISIT LOWES.COM/PRICEMATCH

****
* [illegible] COUNTS!
* REGISTER FOR A CHANCE TO BE
* ONE OF FIVE US$500 WINNERS DRAWN MONTHLY!
* [illegible] SORTEO MENSUAL
* PARA SER UNO DE LOS CINCO GANADORES DE US$500!
*
* REGISTER BY COMPLETING A GUEST SATISFACTION SURVEY
* WITHIN ONE WEEK AT: www.lowes.com/survey
* YOUR ID #: 0495 [illegible]
*
* NO PURCHASE NECESSARY TO ENTER OR WIN.
* VOID WHERE PROHIBITED. MUST BE 18 OR OLDER TO ENTER.
* OFFICIAL RULES & WINNERS AT: www.lowes.com/survey
****

STORE: 0495 TERMINAL: 11 09/28/18 17:44:30

Chandler inc.
CONCRETE COMPANY
Chandler Concrete and Building Supply

400 N. Long Street, P.O. Box 139
Salisbury, North Carolina 28145-0139
704/636-4713 Fax 704/636-2424
www.chandlerconcrete.com

CHECKED BY	HOW DELIVERED	TIME OUT

2563902 **INVOICE** 09/25/18 16:00 011

PATRICK MORRISON
PO BOX 136
SPENCER, NC 28159

MISC: TONY P/UP

CUST#: 12877.0000 DEL DATE:09/25/18 TERMS: NET 10TH
704-640-0467

L#	QUANTITY	DESCRIPTION	ITEM#	UNITS	PRICE/UNIT	AMOUNT
1	1	LOCK COP CK ENTRY SS	94870 A	1	15.50 EA	15.50

SUBTOTAL		15.50
D NC/ROWAN		1.09
TOTAL		16.59

ALL CLAIMS AND RETURNED GOODS MUST BE ACCOMPANIED BY THIS BILL.

1/2% PER MONTH (18%APR) FINANCE CHARGE ADDED TO ACCTS OVER 30 DAYS PAST DUE

CUSTOMER COPY

Payment is due upon delivery of the goods and/or performance of the services described above and may be made within 30 days after the date of this invoice without payment of a finance charge. A finance charge at the annual rate of 18% (1½%) per month) is payable on any unpaid portion of the purchase price from the 31st day after the date of the invoice until the day on which the purchase price is paid.

Received By

Chandler inc.
CONCRETE COMPANY
And Building Supply

400 N. Long Street, P.O. Box 139
Salisbury, North Carolina 28145-0139
704/636-4713 Fax 704/636-2424

LOADED BY	DELIVERED BY	DATE DELIVERED
CHECKED BY	**HOW DELIVERED**	**TIME OUT**

2563945 **INVOICE** 09/26/18 11:05 011

PATRICK MORRISON
PO BOX 136
SPENCER, NC 28159

SHIP TO: PAM HOLLAND

CUST#: 12877.0000 DEL DATE:09/26/18 TERMS: NET 10TH
704-640-0467

L#	QUANTITY	DESCRIPTION	ITEM#	UNITS	PRICE/UNIT	AMOUNT
1	1	WND WHT 150 LOW E 2-8 X 5-2	9200 A	1	174.00 EA	174.00

SUBTOTAL		174.00
D NC/ROWAN		12.18
TOTAL		186.18

ALL CLAIMS AND RETURNED GOODS MUST BE ACCOMPANIED BY THIS BILL.

1/2% PER MONTH (18%APR) FINANCE CHARGE ADDED TO ACCTS OVER 30 DAYS PAST DUE

CUSTOMER COPY

Payment is due upon delivery of the goods and/or performance of the services described above and may be made within 30 days after the date of this invoice without payment of a finance charge. A finance charge at the annual rate of 18% (1½% per month) is payable on any unpaid portion of the purchase price from the 31st day after the date of the invoice until the day on which the purchase price is paid.

Received By

FIRE REHEARSAL SCHEDULE

HAME OF HOME: MARYS FAMILY CARE HOME FCH/HA /DDA

ADDRESS: 485 LONG FERRY ROAD, SALISBURY N.C. 28144

DATE OF REHEARSAL: 10/01/2017 TIME OF REHEARSAL _5pm_____SHIFT 1ST (2nd) 3rd

Person in charge: M. Pamula W. Holland

OTHER STAFF MEMBERS PRESENT: NONE

BRIEF DECRIPTION OF WHAT WAS INVOLVED:

Smoke detector was activated pts were told to exit, to front porch. Also, emergency lights were tested.

DATE OF REHEARSAL: 1/1/18 TIME OF REHEARSAL 11a SHIFT: (1ST) 2ND 3RD

PERSON IN CHARGE: Pamula Holland

OTHER STAFF MEMBERS IN CHARGE Rosa C White, Debra Douglas

TIME FOR TOTAL EVACUATION: _____

BRIEF DESCRIPTION OF WHAT WAS INVOLVED Smoke detectors were activated and residents were assisted to the back door and exit the facility Wilma Milsaps, Pauline Holmes, and Irene Bates

FIRE REHEARSAL SCHEDULE

HAME OF HOME: MARYS FAMILY CARE HOME FCH/HA /DDA

ADDRESS: 485 LONG FERRY ROAD, SALISBURY N.C. 28144

DATE OF REHEARSAL: 04/01 2018 TIME OF REHEARSAL 12pm SHIFT (1ST) 2nd 3rd

Person in charge: DM. Pam Holland

OTHER STAFF MEMBERS PRESENT: Rosa White

BRIEF DECRIPTION OF WHAT WAS INVOLVED:

Smoke Detector was activated pts were told to evacuate. They were directed to the front exit door and out to safety

DATE OF REHEARSAL: 7/4/2018 TIME OF REHEARSAL 7pm SHIFT: 1ST (2ND) 3RD

PERSON IN CHARGE: Pam Holland

OTHER STAFF MEMBERS IN CHARGE Sonia Burch

TIME FOR TOTAL EVACUATION: 4 min

BRIEF DESCRIPTION OF WHAT WAS INVOLVED Patients were in there room when fire alarm was activated, Staff preceded to Back Hallway, pts were directed and helped out of the back door on to the deck, and preceded to the yard.

FIRE REHEARSAL SCHEDULE

NAME OF HOME: MARYS FAMILY CARE HOME FCH/HA /DDA

ADDRESS: 485 LONG FERRY ROAD, SALISBURY N.C. 28144

DATE OF REHEARSAL: 10 /01 2018 TIME OF REHEARSAL 11 pm SHIFT 1ST 2nd (3rd)

Person in charge: ADM. Pamula Holland

OTHER STAFF MEMBERS PRESENT: NONE

BRIEF DECRIPTION OF WHAT WAS INVOLVED: NO EVAC. Oral reminder was given to Pauline & Wilma instructing them ON How to Evac. the Building if Needed.

DATE OF REHEARSAL: _____ TIME OF REHEARSAL _____ SHIFT: 1ST 2ND 3RD

PERSON IN CHARGE: _____

OTHER STAFF MEMBERS IN CHARGE _____

TIME FOR TOTAL EVACUATION: _____

BRIEF DESCRIPTION OF WHAT WAS INVOLVED _____