



STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
AGING AND LONG-TERM SUPPORT ADMINISTRATION
20311 52nd Ave W, Suite 100, Lynnwood, WA 98036

12/30/2025

Alderwood Adult Family Home LLC
Alderwood Adult Family Home LLC
3732 156th St SW Apt D
Lynnwood, WA 98087

RE: Alderwood Adult Family Home LLC # 753421

Dear Provider:

This letter addresses deficiencies occurring in the report(s) for: Compliance Determination(s) 70759 (Completion Date 12/30/2025) and 68834 (Completion Date 11/17/2025).

The Department completed a follow-up inspection of your Adult Family Home on 12/30/2025 and found no deficiencies.

The Department found that deficiencies for the following licensing laws and regulations were corrected:

WAC 388-76-10025 License annual fee.

(1) The adult family home must pay the license fee that is established in the state's operating budget, as described in RCW 70.128.060 .

The Department staff who did the Off Site verification:

Meazawork Tekie, Complaint Investigator

If you have any questions, please contact me at (206)914-5042.

Sincerely,

Renee Bourque

Renee Bourque, Field Manager
Region 2, Unit I
Residential Care Services

This document was prepared by Residential Care Services for the Locator website.



STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
AGING AND LONG-TERM SUPPORT ADMINISTRATION
20311 52nd Ave W, Suite 100, Lynnwood, WA 98036

Statement of Deficiencies	License #: 753421	Compliance Determination # 68834
Plan of Correction	Alderwood Adult Family Home LLC	Completion Date
Page 1 of 3	Licensee: Alderwood Adult Family Home LLC	11/17/2025

You are required to be in compliance at all times with all licensing laws and regulations to maintain your Adult Family Home license.

The department completed data collection for an unannounced on-site complaint investigation on 11/17/2025 of:

Alderwood Adult Family Home LLC
3732 156th St SW Apt D
Lynnwood, WA 98087

This document references the following complaint number(s): 200146

The following sample was selected for review during the unannounced on-site visit: 3 of 4 current residents and 0 former residents.

The department staff that investigated the Adult Family Home:

Meazawork Tekie, Complaint Investigator

From:
DSHS, Aging and Long-Term Support Administration
Residential Care Services, Region 2 , Unit I
20311 52nd Ave W, Suite 100
Lynnwood, WA 98036

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Statement of Deficiencies	License #: 753421	Compliance Determination # 68834
Plan of Correction	Alderwood Adult Family Home LLC	Completion Date
Page 2 of 3	Licensee: Alderwood Adult Family Home LLC	11/17/2025

As a result of the on-site visit(s), the department found that you are not in compliance with the licensing laws and regulations as stated in the cited deficiencies in the enclosed report.

Renee Bourque
Residential Care Services

11/20/2025
Date

I understand that to maintain an Adult Family Home license, I must be in compliance with all the licensing laws and regulations at all times.

[Signature]
Provider (or Representative)

11/21/2025
Date

WAC 388-76-10025 License annual fee.

(1) The adult family home must pay the license fee that is established in the state's operating budget, as described in RCW 70.128.060.

This requirement was not met as evidenced by:

Based on observation, interview, and record review, the Adult Family Home (AFH) failed to pay the annual licensing fee of \$2700.00 before the due date on 09/15/2025. This failure resulted in the AFH having an unpaid license fee since 09/16/2025.

Findings included...

Review of the Department's Secure Tracking and Reporting System, on 11/17/2025, showed the AFH did not pay their annual licensing fee. The Department database showed the balance as \$2700.00.

Observation, on 11/17/2025 at 10:25 AM, showed AFH provided care for 4 residents.

In an interview, on 11/17/2025 at 12:15 PM, Staff A (Provider) stated that they must have forgotten to pay the annual licensing fee. Staff A stated they would pay the late license fee immediately.

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As a result of the on-site visit(s), the department found that you are not in compliance with the licensing laws and regulations as stated in the cited deficiencies in the enclosed report.

Renee' Bourque
Residential Care Services

11/20/2025
Date

I understand that to maintain an Adult Family Home license, I must be in compliance with all the licensing laws and regulations at all times.

Provider (or Representative)

Date

WAC 388-76-10025 License annual fee.

(1) The adult family home must pay the license fee that is established in the state's operating budget, as described in RCW 70.128.060 .

This requirement was not met as evidenced by:

Based on observation, interview, and record review, the Adult Family Home (AFH) failed to pay the annual licensing fee of \$2700.00 before the due date on 09/15/2025. This failure resulted in the AFH having an unpaid license fee since 09/16/2025.

Findings included...

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Observation, on 11/17/2025 at 10:25 AM, showed AFH provided care for 4 residents.

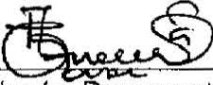
In an interview, on 11/17/2025 at 12:15 PM, Staff A (Provider) stated that they must have forgotten to pay the annual licensing fee. Staff A stated they would pay the late license fee immediately.

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Statement of Deficiencies	License #: 753421	Compliance Determination #68834
Plan of Correction	Alderwood Adult Family Home LLC	Completion Date
Page 3 of 3	Licensee: Alderwood Adult Family Home LLC	11/17/2025

I hereby certify that I have reviewed this report and have taken or will take active measures to correct this deficiency. By taking this action, Alderwood Adult Family Home LLC is or will be in compliance with this law and / or regulation on
(Date) 11/21/2025

In addition, I will implement a system to monitor and ensure continued compliance with this requirement.



Provider (or Representative)

11/21/2025
Date

This document was prepared by Residential Care Services for the Locator website.

I hereby certify that I have reviewed this report and have taken or will take active measures to correct this deficiency. By taking this action, Alderwood Adult Family Home LLC is or will be in compliance with this law and / or regulation on (Date)_____.

In addition, I will implement a system to monitor and ensure continued compliance with this requirement.

Provider (or Representative)

Date