STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
AGING AND LONG-TERM SUPPORT ADMINISTRATION
20425 72nd Avenue S, Suite 400, Kent, WA 98032

Ranier AFH LLC

Rainier AFH LLC
10914 Military Rd SW
Lakewood, WA 98498

RE: Rainier AFH LLC License # 756395

Dear Provider:

This letter addresses Compliance Determination(s) 66521 (Completion Date 10/01/2025) and 64811 (Completion Date 09/09/2025).

The Department completed a follow-up inspection of your Adult Family Home on 10/01/2025 and found that you have corrected the violations listed in the Complaint report dated 09/09/2025. Your home is back in compliance as of 08/28/2025 with the cited requirements of the Washington Administrative Code or the Revised Code of Washington or both.

The Department found that deficiencies for the following licensing laws and regulations were corrected:
WAC 388-76-10025-2, WAC 388-76-10025-3

The Department staff who did the on-site verification:
Jennifer Domingo, AFH Complaint Investigator

If you have any questions, please contact me at (253)234-6033.

Sincerely,

Cecile Leano, Field Manager
Region 2, Unit E
Residential Care Services

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

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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 08/27/2025 of:

Rainier AFH LLC
26700 110th Ave SE
Kent, WA 98030

This document references the following complaint number(s): 188938

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:

Jennifer Domingo, AFH Complaint Investigator

From:
DSHS, Aging and Long-Term Support Administration
Residential Care Services, Region 2 , Unit E
20425 72nd Avenue S, Suite 400
Kent, WA 98032

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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.

Residential Care Services | 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.

(2) Each year, the home's annual license fee is due during the same month in which the home was initially licensed. For example, if the home was licensed in June, 2010, then the annual licensing fee will be due in June of each year.

(3) The home must ensure that the department receives the annual license fee when it is due.

This requirement was not met as evidenced by:

Based on observation, interview, and record review, the Adult Family Home (AFH) failed to pay its annual licensing fee when it was due on April 15, 2025. This failure placed 4 of 4 residents (Resident 1, Resident 2, Resident 3, and Resident 4) at risk of possible unmet care needs due to the unknown financial status of the AFH.

Findings included…

Review of department record named, Secure Tracking And Reporting System (a department record-keeping system) on 08/27/2025 at 9:27 AM, revealed that AFH's licensing fee was due in June and by the 15th day of each year in the amount of $1350.00.

In an interview on 08/27/2025 at 3:39 PM, Staff A, Provider, stated that they thought they had already paid the AFH annual license fee. Staff A stated that the check got lost in the mail. Staff A stated that they did not check their bank account to see if the money had been withdrawn.

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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, Rainier AFH 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

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