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

10/14/2025

Grace At Pine AFH LLC
Grace at Pine AFH LLC
1602 216th Ave SE
Sammamish, WA 98075

RE: Grace at Pine AFH LLC # 757315

Dear Provider:

This letter addresses deficiencies occurring in the report(s) for: Compliance Determination(s) 67214 (Completion Date 10/14/2025) and 65328 (Completion Date 09/16/2025).

The Department completed a follow-up inspection of your Adult Family Home on 10/14/2025 and found no deficiencies.

The Department found that deficiencies for the following licensing laws and regulations were corrected:
WAC 388-76-10960 Remedies Department may impose remedies. The department may impose a remedy or remedies if the department finds any person listed in WAC 388-76-10950 :

(10) Has obtained or attempted to obtain a license by fraudulent means or misrepresentation;

(11) Knowingly, or with reason to know, made a false statement of material fact on his or her application for a license or any data attached to the application, or in any matter involving the department;

The Department staff who did the On Site verification:
Alina Zaharie, NCI

If you have any questions, please contact me at (253)234-6007.

Sincerely,

Lydia Owusu-Acheampong, Community Field Manager
Region 2, Unit G
Residential Care Services

STATE OF WASHINGTON

DEPARTMENT OF SOCIAL AND HEALTH SERVICES

AGING AND LONG-TERM SUPPORT ADMINISTRATION

20425 72nd Avenue S, Suite 400, Kent, WA 98032

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 09/05/2025 of:

Grace at Pine AFH LLC
1602 216th Ave SE
Sammamish, WA 98075

This document references the following complaint number(s): 191966

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

The department staff that investigated the Adult Family Home:

Alina Zaharie, NCI

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

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 — 9-16-2025 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) — oct 03, 2025 Date

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This requirement was not met as evidenced by:

Based on observation, interview and record review, the Adult Family Home (AFH) failed to submit a legitimate 1 of 1 Septic Feasibility Document (essential document for proving to a local health department that can safely handle an on-site sewage system) when they applied for their initial AFH license. This failure led to the AFH being approved for bed capacity that was above what the septic tank can accommodate, which placed residents at risk for harm, and illnesses from back-up wastewater.

Findings included...

Observation on 09/05/2025 at 9:35 AM, showed eight people living in the AFH that included three residents (Residents 1, 2, and 3); two AFH staff (Staff A, Representative/Resident Manager and Staff B, Caregiver); and three Household (HH) members (HH1, HH2, and HH3).

Record review of "Davis Septic Design Company" report, conducted on March 28, 2024, showed that the AFH's single-family home existing septic system could not be expanded to meet the minimum requirements for a 5-bedroom home. This was due to the size of

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Residential Care Services | Date

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Provider (or Representative) | Date

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Based on observation, interview and record review, the Adult Family Home (AFH) failed to submit a legitimate 1 of 1 Septic Feasibility Document (essential document for proving to a local health department that can safely handle an on-site sewage system) when they applied for their initial AFH license. This failure led to the AFH being approved for bed capacity that was above what the septic tank can accommodate, which placed residents at risk for harm, and illnesses from back-up wastewater.

Findings included…

Observation on 09/05/2025 at 9:35 AM, showed eight people living in the AFH that included three residents (Residents 1, 2, and 3); two AFH staff (Staff A, Representative/Resident Manager and Staff B, Caregiver); and three Household (HH) members (HH1, HH2, and HH3).

Record review of “Davis Septic Design Company” report, conducted on March 29, 2024, showed that the AFH’s single-family home existing septic system could not be expanded to meet the minimum requirements for a 5-bedroom home. This was due to the size of

the parcel (a piece of land that is not connected to public sewer sewage) with the location of the existing house. The report concluded that the only remaining option to meet the minimum code requirements was to have the home connected to City of Sammamish public sewer.

Record review of “Marcello’s General Construction Company” report conducted on May 28, 2024, showed that the septic system installed on the property in 1968 was originally designed with a flow of 450 gallons per day. According to report, this flow represents the design requirement for a three-bedroom single family residence. Additionally, the report stated the design flow should comfortably accommodate a caretaker and up to 5 residents, as the usage for each person was estimated to be 100 gallons per day.

Record review of Public Health Seattle and King County Operation/Performance Monitoring Report, conducted by Drain Pro Plumbing & Septic Inc, dated 09/02/2025 showed that 6 people can live in the home according to design. Inspection notes of the septic system showed everything working as intended.

Department records showed that Staff A had submitted Marcello’s General Construction Company report and had been approved for 6 bed capacity license on 06/07/2024.

During an interview on 09/05/2025 at 10:44 AM, HH 1 stated that the home septic inspection report, dated May 28, 2024, was fabricated. HH1 explained that they had previously hired David Septic Design Company on March 29, 2024, and choose not to use their report for AFH initial application permit due to unsatisfactory report results. HH1 stated that Staff A and they created May 28, 2024, septic inspection report. HH1 stated they had used a sample septic system inspection and changed some of the data to represent their home. HH1 stated that no person from Marcello’s General Construction company had been onsite at their home to conduct a legitimate inspection. HH1 stated that they had paid $1,500 to Marcello’s General Construction Company to sign the fraudulent report paper, in to obtain a license from the department. HH1 said they had spent so much money getting home ready for AFH licensure and were not willing to let all that go to waste.

During an interview on 09/09/2025 at 11:11 AM, Staff A stated that HH1 was the person who prepared all the documents required for the AFH septic feasibility document. Staff A stated that they were aware of Davis Septic Design Company report results. Staff A stated that HH1 told them they were going to look for a second opinion. Staff A stated that they stated to HH1, ‘’Ok have it done and let me know.’ Staff A stated that they were not aware that HH1 fraudulently created the May 28, 2024, septic report. Staff A stated that HH1 mentioned to them, after they filed for divorce, that the May 28th, 2024, septic report sent to the Department had been fraudulently created.

Statement of Deficiencies	License # 757315	Compliance Determination #65328
Plan of Correction	Grace at Pine AFH LLC	Completion Date
Page 4 of 4	Licensee: Grace At Pine AFH LLC	09/16/2025

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, Grace at Pine AFH LLC is or will be in compliance with this law and / or regulation on (Date) Sep 17, 2025.

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

Provider (or Representative) Oct 03, 2025 Date

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, Grace at Pine 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