ARIZONA DEPARTMENT OF HEALTH SERVICES
LICENSING

INFORMATION VERIFICATION AND ANNUAL LICENSING FEES

ARIZONA DEPARTMENT OF HEALTH SERVICES

PUBLIC HEALTH LICENSING SERVICES – LONG TERM CARE FACILITIES LICENSING

In accordance with A.A.C. R9-10-107
C. Except as specified in subsection (E), a licensee shall submit to the Department, no earlier than 60 calendar days before the anniversary date of the facility's health care institution license:
1. The following information in a Department-provided format:
a. The licensee's name, and
b. The facility's name and license number;
2. Verification of the information in the Department's current records for the health care institution;
3. If applicable, information or documentation required in another Article of this Chapter, specific to the health care institution, to be submitted with the relevant fees required in R9-10-106; and
4. The applicable annual licensing fees in R9-10-106.

Fac ID LTC0036

Fee Due Date 1/31/2022

Legend

New Certificate ! Updates Required !! Review and Updates Required

HEALTH CARE INSTITUTION INFORMATION

Name of health care institution: FRIENDSHIP VILLAGE OF TEMPE

License number: NCI-2646

Facility physical address: 2525 EAST SOUTHERN AVENUE

City: TEMPE

State: AZ

ZIP Code: 85282

Facility mailing address: 2525 EAST SOUTHERN AVENUE

City: TEMPE

State: AZ

ZIP Code: 85282

Phone number: [redacted]

Email: schmidtjadyne@fvtaz.com

Fax number (optional): [redacted]

Class or subclass: Nursing Care Institution

Authorized services

Authorized Service: Secured Alzheimer's Unit Not Approved (Start Date: N/A)

Authorized Service: Ventilator Area Not Approved (Start Date: N/A)

Authorized Service: Behavioral Health Unit Not Approved (Start Date: N/A)

Authorized Service: Dialysis Services Not Approved (Start Date: N/A)

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Authorized Service: Radiology Services Not Approved (Start Date: N/A)

Authorized Service: Diagnostic Imaging Services Not Approved (Start Date: N/A)

Authorized Service: Clinical Lab Services Not Approved (Start Date: N/A)

Authorized Service: Behavioral Health Services Not Approved (Start Date: N/A)

Health care institution's days and hours of operation

Sun	Mon	Tue	Wed	Thurs	Fri	Sat
12AM-11:59PM	12AM-11:59PM	12AM-11:59PM	12AM-11:59PM	12AM-11:59PM	12AM-11:59PM	12AM-11:59PM

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OWNER INFORMATION

The owner type is a

Corporation

Tax ID

[redacted]

Owner's name

TEMPE LIFE CARE VILLAGE, INC.

Owner's mailing address	City	State	ZIP Code
2645 EAST SOUTHERN AVENUE	TEMPE	AZ	85282

Phone number	Email	Fax number (optional)
[redacted]	MARVINCOLE@FVTAZ.COM	[redacted]

Name	Title
Don Cassano	Board of Director President
Ross Reck	Board of Director Secretary/Treasurer

CHIEF ADMINISTRATIVE OFFICER

Name: Cole Marvin ! Effective date: 3/1/2007 !

NURSING CARE INSTITUTION ADMINISTRATOR

Name: JADYNE SCHMIDT Effective date: 8/1/2012

EMERGENCY CONTACT INFORMATION

Name: Jadyne Schmidt Phone number: [redacted]

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Fee Due Date 1/31/2022

FEES

Description	Amount
License fees	
Base fee	[redacted]
Licensed capacity/occupancy (128) x Per unit cost of $73	
Late fee	
Total license fees	
Enforcement fees	
Enforcement fees previously owed	[redacted]
Total enforcement fees	
Total amount due	[redacted]

Please note that the Department will not receive your submission unless the payment process is complete and approved.

ALL FEES ARE N0N-REFUNDABLE.
NOTE: Fees do not apply to a health care institution operated by a state agency pursuant to federal law such as the veterans home, Arizona State Hospital or an adult foster care home.

[X] I acknowledge that all information has been verified and is accurate.

Submitted by

Jadyne Schmidt

Submitted on

12/2/2021