STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11965370	R **07/31/2018**
NAME OF PROVIDER OR SUPPLIER **BROOKDALE ALTAMONTE SPRINGS**	STREET ADDRESS, CITY, STATE, ZIP CODE **360 MONTGOMERY ROAD** **ALTAMONTE SPRINGS, FL 32714**	

SUMMARY STATEMENT OF DEFICIENCIES
(FINDINGS PRECEDED BY TAGS AND REGULATORY IDENTIFYING INFORMATION)

0000 - Initial Comments

A revisit to the Change of Ownership (CHOW) survey was conducted on 07/31/18. Brookdale Altamonte Springs, license #9786, had no deficiencies at the time of the visit.