

County: Spartanburg

Facility Type: Adult Day Care

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Typ Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Unit
CAREBRIDGE ADULT DAY CARE CENTER 230 GILES DR BOILING SPRINGS, SC 29316-6036 FAC.#:864-599-7342 ROGERS, JOANNE M PH#: 864-599-7342 Facility Email: JOANNE@CAREBRIDGEADULTDAYCARE.COM	Spartanburg / Ltd. Liability PO BOX 160661 BOILING SPRINGS, SC 29316-0012 CAREBRIDGE ADULT DAY CARE CENTER LLC ADC-0263 / 07/31/2010	71
Number of Participants		71
CAREBRIDGE ADULT DAY CARE-EASTSIDE 2375 E MAIN ST STE A307 SPARTANBURG, SC 29307-1429 FAC.#:864-579-7446 IVEY, J KAY PH#: Facility Email: CAREBRIDGEADULTDAYCARE.COM	Spartanburg / Ltd. Liability PO BOX 160661 BOILING SPRINGS, SC 29316-0012 CAREBRIDGE ADULT DAY CARE CENTER LLC ADC-0267 / 04/30/2010	29
Number of Participants		29
HAPPY HOME ADULT DAY CARE CENTER 501 ARCH ST SPARTANBURG, SC 29301-1961 FAC.#:864-591-1155 SCOTT, DAVID L PH#: 864-591-1155 Facility Email: MAHALAJ9233@ATT.NET	Spartanburg / Corporation 501 ARCH ST SPARTANBURG, SC 29301-1961 HAPPY HOME ADULT DAY CARE CENTER INC ADC-0224 / 05/31/2010	24
Number of Participants		24
MOUNTAINVIEW NURSING HOME ADULT DAY CARE CENTER 340 CEDAR SPRINGS RD SPARTANBURG, SC 29302-4697 FAC.#:864-582-4175 PITTS, EVELYN PH#: 864-582-4175 Facility Email: AFOWLER@MOUNTAINVIEWNH.COM	Spartanburg / Corporation 340 CEDAR SPRINGS RD SPARTANBURG, SC 29302-4697 COMMUNITY SERVICES FOR THE AGING INC ADC-0009 / 08/31/2010	30
Number of Participants		30

Totals For Facility/License Type Adult Day Care

Number of Activities/Facilities licensed:	4	Number Licensed Units	154
--	---	------------------------------	-----

County: Spartanburg

Facility Type: Ambulatory Surgery

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Typ Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Unit
AMBULATORY SURGERY CENTER OF SPARTANBURG 720 N PINE ST SPARTANBURG, SC 29303-3127 FAC.#:864-560-5800 PANKEY, MICHAEL E PH#: 864-560-5800 Facility Email: MPANKEY@SRHS.COM	Spartanburg / Limited Liability 720 N PINE ST SPARTANBURG, SC 29303-3127 AMBULATORY SURGERY CENTER OF SPARTANBURG LLC ASF-0064 / 04/30/2010	9
Operating Rooms 7 Procedure Rooms 0 Endoscopy Rooms 2		
SPARTANBURG UROLOGY SURGICENTER 391 SERPENTINE DR STE 330 SPARTANBURG, SC 29303-3080 FAC.#:864-585-2002 SIZEMORE, RICHARD T PH#: 864-585-2002 Facility Email: RICK_SIZEMORE@YAHOO.COM	Spartanburg / Limited Liability Partnership 391 SERPENTINE DR STE 330 SPARTANBURG, SC 29303-3080 SPARTANBURG UROLOGY SURGICENTER LP ASF-0026 / 02/28/2010	2
Operating Rooms 2 Procedure Rooms 0 Endoscopy Rooms 0		
SURGERY CENTER AT PELHAM 2755 S HWY 14 GREER, SC 29650-4902 FAC.#:864-560-6556 HAZEN, BILL PH#: 864-560-5555 Facility Email: BHAZEN@PELHAMASC.COM	Spartanburg / Ltd. Liability 2755 S HWY 14 GREER, SC 29650-4902 SURGERY CENTER AT PELHAM LLC ASF-0091 / 12/31/2009	6
Operating Rooms 4 Procedure Rooms 0 Endoscopy Rooms 2		
WESTSIDE EYE CENTER LLC ASC 1413 JOHN B WHITE SR BLVD STE D SPARTANBURG, SC 29306-3995 FAC.#:864-574-7767 PEARSON, XAVIER PH#: 864-574-7767 Facility Email: XPEARSON@EASTSIDEEYECENTER.COM	Spartanburg / Ltd. Liability 735 E MAIN ST SPARTANBURG, SC 29302-1281 WESTSIDE EYE CENTER LLC ASF-0087 / 08/31/2009 (Renewal Pending)	2
Operating Rooms 2 Procedure Rooms 0 Endoscopy Rooms 0		

Totals For Facility/License Type Ambulatory Surgery

Number of Activities/Facilities licensed: Number Licensed Units

County: Spartanburg

Facility Type: Birthing Center

Facility Name	County/Ownership Typ	Licensed Unit
Location Street	Mailing/Billing Address	
Location City, State	Licensee	
Administrator/Phone	License Nbr/Expiration Date	
LABORS OF LOVE BIRTH CENTER	Spartanburg / Limited Liability	2
850 FLOYD RD EXT	850 FLOYD RD EXT	
SPARTANBURG, SC 29307-1048 FAC.#:864-285-0574	SPARTANBURG, SC 29307-1048	
WEAVER, LINDA K PH#: 864-285-0574	LABORS OF LOVE MIDWIFERY LLC	
Facility Email: LMIDWIFE@AOL.COM	BC-0008 / 03/31/2010	

Totals For Facility/License Type Birthing Center	
Number of Activities/Facilities licensed:	1
Number Licensed Units	2

County: Spartanburg

Facility Type: Body Piercing

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Typ Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Unit
BODY LINKS 1265 ASHEVILLE HWY SPARTANBURG, SC 29303-2175 FAC.#:864-595-1535 NELSON, TYLER PH#: 864-595-1535 Facility Email: No Facility Email on Record	Spartanburg / Sole Proprietorship 1265 ASHEVILLE HWY SPARTANBURG, SC 29303-2175 NELSON, TYLER BP-0213 / 12/31/2009	1
DARK SIDE BODY PIERCING 2313 REIDVILLE RD STE F SPARTANBURG, SC 29301-3329 FAC.#:864-587-6090 BREWER, MICHAEL C PH#: 864-587-6090 Facility Email: No Facility Email on Record	Spartanburg / Partnership 2313 REIDVILLE RD STE F SPARTANBURG, SC 29301-3329 MICHAEL C BREWER AND MICHAEL B HUNTER BP-0203 / 08/31/2010	1
PIERCING WEARHOUSE 742 OAK GROVE RD SPARTANBURG, SC 29301-3579 FAC.#:864-576-8584 MAUNEY, REBECCA B PH#: 864-576-8552 Facility Email: No Facility Email on Record	Spartanburg / Sole Proprietorship 742 OAK GROVE RD SPARTANBURG, SC 29301-3579 MAUNEY, REBECCA B BP-0199 / 04/30/2010	1
STICKS AND STONES 8009 WARREN H ABERNATHY HWY SPARTANBURG, SC 29301-2449 FAC.#:864-804-6440 LAYTON, AMANDA PH#: 864-804-6440 Facility Email: STICKSANDSTONES8009@YAHOO.COM	Spartanburg / Corporation 8009 WARREN H ABERNATHY HWY SPARTANBURG, SC 29301-2449 ALAYA INC BP-0212 / 08/30/2010	1

Totals For Facility/License Type Body Piercing

Number of Activities/Facilities licensed:	<input type="text" value="4"/>	Number Licensed Units	<input type="text" value="4"/>
--	--------------------------------	------------------------------	--------------------------------

County: Spartanburg

Facility Type: Community Residential Care Facility

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Typ Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Unit
ASHLAN VILLAGE		
415 BRENDA WAY LYMAN, SC 29365-9264 FAC.#:864-949-7825 FREE, ALTON G PH#: 864-949-7825 Facility Email: AFREE@ASHLANVILLAGECOM	Spartanburg / Limited Liability 190 COOPER EST INMAN, SC 29349-9580 ASHLAN PROPERTIES LLC CRC-1483 / 10/31/2009 (Renewal Pending)	72
Certifications:Alzheimer Unit, Alzheimers Care		
CAMELOT ONE		
124 GLADYS CT SPARTANBURG, SC 29301-3701 FAC.#:864-587-1993 WALKER, LINDA C PH#: 864-587-1993 Facility Email: LCWALKER428@YAHOO.COM	Spartanburg / Corporation 124 GLADYS CT SPARTANBURG, SC 29301-3701 CAMELOT ONE INC CRC-1105 / 06/30/2010	22
Certifications:Alzheimer Care		
EDEN TERRACE OF SPARTANBURG		
2780 E MAIN ST SPARTANBURG, SC 29301-1248 FAC.#:864-579-7387 BROWN, CINDY B PH#: 864-579-7387 Facility Email: CBROWN@ARBORCOMPANY.COM	Spartanburg / Ltd. Liability 2780 E MAIN ST SPARTANBURG, SC 29301-1248 BRISTOL SPARTANBURG LLC CRC-1213 / 05/31/2010	115
Certifications:Alzheimer Unit		
HALL'S RESIDENTIAL CARE FACILITY		
2860 NEW CUT RD SPARTANBURG, SC 29303-6332 FAC.#:864-439-7447 HALL, DORIS G PH#: 864-439-7347 Facility Email: No Facility Email on Record	Spartanburg / Partnership PO BOX 5393 SPARTANBURG, SC 29304-5393 DORIS G HALL & TINA HALL METCALF CRC-0384 / 05/31/2010	19
Certifications:None		
MARANATHA MANOR OF SPARTANBURG		
2902 E MAIN ST SPARTANBURG, SC 29307-1252 FAC.#:864-579-0086 MAHAFFEY, MARY K PH#: 864-579-0086 Facility Email: No Facility Email on Record	Spartanburg / Corporation 2902 E MAIN ST SPARTANBURG, SC 29307-1252 MARANATHA MANOR OF SPARTANBURG INC CRC-1235 / 12/31/2009	81
Certifications:Alzheimer Unit, Alzheimers Care		
MIDWAY RESIDENTIAL CARE FACILITY #1		
4026 MOORE DUNCAN HWY MOORE, SC 29369-9721 FAC.#:864-433-8777 GIBSON, STACEY R PH#: Facility Email: LCWALKER428@YAHOO.COM	Spartanburg / Corporation 4026 MOORE DUNCAN HWY MOORE, SC 29369-9721 MIDWAY RESIDENTIAL CARE FACILITY INC CRC-0318 / 12/31/2009	13
Certifications:None		

Division of Health Licensing

County: Spartanburg

Facility Type: Community Residential Care Facility

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Typ Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Unit
MIDWAY RESIDENTIAL CARE FACILITY #1A 4026 MOORE DUNCAN HWY MOORE, SC 29369-9721 FAC. #: 864-433-8777 GIBSON, STACEY R PH#: Facility Email: LCWALKER428@YAHOO.COM	Spartanburg / Corporation 4026 MOORE DUNCAN HWY MOORE, SC 29369-9721 MIDWAY RESIDENTIAL CARE FACILITY INC CRC-0320 / 12/31/2009	14
Certifications:None		
MIDWAY RESIDENTIAL CARE FACILITY #2 4026 MOORE DUNCAN HWY MOORE, SC 29369-9721 FAC. #: 864-433-8777 GIBSON, STACEY R PH#: Facility Email: LCWALKER428@YAHOO.COM	Spartanburg / Corporation 4026 MOORE DUNCAN HWY MOORE, SC 29369-9721 MIDWAY RESIDENTIAL CARE FACILITY INC CRC-0321 / 12/31/2009	25
Certifications:None		
MIDWAY RESIDENTIAL CARE FACILITY #3 4026 MOORE DUNCAN HWY MOORE, SC 29369-9721 FAC. #: 864-433-8777 GIBSON, STACEY R PH#: Facility Email: LCWALKER428@YAHOO.COM	Spartanburg / Corporation 4026 MOORE DUNCAN HWY MOORE, SC 29369-9721 MIDWAY RESIDENTIAL CARE FACILITY INC CRC-0346 / 12/31/2009	17
Certifications:None		
MIDWAY RESIDENTIAL CARE FACILITY #4 4026 MOORE DUNCAN HWY MOORE, SC 29369-9721 FAC. #: 864-433-8777 GIBSON, STACEY R PH#: Facility Email: LCWALKER428@YAHOO.COM	Spartanburg / Corporation 4026 MOORE DUNCAN HWY MOORE, SC 29369-9721 MIDWAY RESIDENTIAL CARE FACILITY INC CRC-0322 / 12/31/2009	14
Certifications:None		
MIDWAY RESIDENTIAL CARE FACILITY #5 4026 MOORE DUNCAN HWY MOORE, SC 29369-9721 FAC. #: 864-433-8777 GIBSON, STACEY R PH#: Facility Email: LCWALKER428@YAHOO.COM	Spartanburg / Corporation 4026 MOORE DUNCAN HWY MOORE, SC 29369-9721 MIDWAY RESIDENTIAL CARE FACILITY INC CRC-0616 / 12/31/2009	12
Certifications:None		
MILLER'S PLACE 140 COX ST SPARTANBURG, SC 29306-4807 FAC. #: 864-573-7008 MILLER, ANNIE M PH#: 864-573-7008 Facility Email: No Facility Email on Record	Spartanburg / Sole Proprietorship 140 COX ST SPARTANBURG, SC 29306-4807 ANNIE MILDRED MILLER CRC-0897 / 11/30/2009	19
Certifications:None		

County: Spartanburg

Facility Type: Community Residential Care Facility

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Typ Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Unit
MONTROSE MANOR 80 MEDICAL CENTER DR WOODRUFF, SC 29388-8781 FAC.#:864-476-9100 MERRITT, RITA G PH#: 864-862-3252 Facility Email: CHANK@DOVEHLE.COM	Spartanburg / Ltd. Liability 80 MEDICAL CENTER DR WOODRUFF, SC 29388-8781 MONTROSE MANOR OPERATING COMPANY LLC CRC-1417 / 12/31/2009	60

Certifications:Alzheimer Care

OAKRIDGE COMMUNITY CARE HOME #1 2470 OLD MILL RD INMAN, SC 29349-9276 FAC.#:864-472-6979 LAUGHTER, REBECCA H PH#: 864-472-6979 Facility Email: BECK1041@EARTHLINK.NET	Spartanburg / Corporation PO BOX 326 INMAN, SC 29349-0326 OAKRIDGE COMMUNITY CARE HOME INC CRC-0241 / 08/31/2010	38
---	---	----

Certifications:None

OAKRIDGE COMMUNITY CARE HOME #2 35 S HOWARD ST INMAN, SC 29349-1339 FAC.#:864-472-3062 HENRY, ROBIN A PH#: 864-472-3062 Facility Email: BECK1041@EARTHLINK.NET	Spartanburg / Corporation PO BOX 326 INMAN, SC 29349-0326 OAKRIDGE COMMUNITY CARE HOME INC CRC-0429 / 04/30/2010	10
--	---	----

Certifications:None

PARK PLACE ASSISTED LIVING & MEMORY CARE COMMUNITY 2720 COUNTRY CLUB RD SPARTANBURG, SC 29302-4473 FAC.#:864-591-1116 PITTS, CATRINA S PH#: 864-591-1116 Facility Email: No Facility Email on Record	Spartanburg / Ltd. Liability 3723 FAIRVIEW INDUSTRIAL DR SE STE 270 SALEM, OR 97302-4975 SPARTANBURG SENIOR LIVING LLC CRC-1351 / 02/28/2010	100
--	---	-----

Certifications:Alzheimer Unit, Alzheimers Care

REID HOUSE 117 DODD ST WELLFORD, SC 29385-9475 FAC.#:864-949-5120 DANIELS, KEISHA PH#: 864-949-5120 Facility Email: KDANIELS@THE-REIDHOUSE.COM	Spartanburg / Corporation 410 ROLLING PINES LN DUNCAN, SC 29334-8821 REID HOUSE INC CRC-1463 / 01/31/2010	42
--	--	----

Certifications:None

REID'S RESIDENTIAL CARE FACILITY 726 OLD SPARTANBURG HWY WELLFORD, SC 29385-9668 FAC.#:864-439-9238 DANIELS, JUDY C PH#: 864-439-9238 Facility Email: No Facility Email on Record	Spartanburg / Sole Proprietorship 726 OLD SPARTANBURG HWY WELLFORD, SC 29385-9668 JUDY DANIELS CRC-0771 / 05/31/2010	23
---	---	----

Certifications:None

County: Spartanburg**Facility Type: Community Residential Care Facility**

Facility Name	County/Ownership Typ	Licensed Unit
Location Street	Mailing/Billing Address	
Location City, State	Licensee	
Administrator/Phone	License Nbr/Expiration Date	

ROSECREST COMMUNITY RESIDENTIAL CARE	Spartanburg / Non-Profit Corporation	59
200 FORTRESS DR	200 FORTRESS DR	
INMAN, SC 29349-9160 FAC.#:864-599-8600	INMAN, SC 29349-9160	
MILLER, RICHARD P PH#: 803-581-3151	LUTHERAN HOMES OF SOUTH CAROLINA INC	
Facility Email: MYETTER@LHOMES.ORG	CRC-1208 / 07/31/2010	

Certifications:Alzheimer Unit, Alzheimers Care

ROSEDALE COMMUNITY CARE HOME	Spartanburg / Sole Proprietorship	10
107 MONTGOMERY ST	PO BOX 363	
CAMPOBELLO, SC 29322-8941 FAC.#:864-472-6191	CAMPOBELLO, SC 29322-0363	
GARLAND, MICHELLE A PH#: 864-472-6191	JOHN D GARLAND	
Facility Email: No Facility Email on Record	CRC-0074 / 02/28/2010	

Certifications:None

ROSEWOOD ASSISTED LIVING	Spartanburg / Ltd. Liability	67
5221 HWY 215	PO BOX 35	
PAULINE, SC 29374-1908 FAC.#:864-573-4060	PAULINE, SC 29374-0035	
CLOBES, KIMBERLY H PH#: 864-573-4060	ROSEWOOD ASSISTED LIVING LLC	
Facility Email: WIJG38@GMAIL.COM	CRC-1367 / 11/30/2009	

Certifications:Alzheimer Care

SKYLYN PLACE PERSONAL CARE CENTER	Spartanburg / Corporation	169
1705 SKYLYN DR OFC	3131 ELLIOTT AVE STE 500	
SPARTANBURG, SC 29307-1090 FAC.#:864-582-6836	SEATTLE, WA 98121-1031	
BARRESI, TIMOTHY J PH#: 864-582-6838	EMERITUS CORPORATION	
Facility Email: No Facility Email on Record	CRC-0856 / 01/31/2010	

Certifications:Alzheimer Unit, Alzheimers Care

SPRING ARBOR OF SPARTANBURG	Spartanburg / Limited Liability Limited Partnership	55
104 DILLON DR	800 HETHWOOD BLVD	
SPARTANBURG, SC 29307-1018 FAC.#:864-948-9300	BLACKSBURG, VA 24060-4207	
ADKINS, NORMA K PH#: 864-948-9300	H H HUNT ASSISTED LIVING INC	
Facility Email: SPEXECDIRECTOR@HHHUNT.COM	CRC-0893 / 10/31/2010	

Certifications:None

SUMMER PLACE ASSISTED LIVING	Spartanburg / Ltd. Liability	65
916 WESLEY CT	916 WESLEY CT	
BOILING SPRINGS, SC 29316-5649 FAC.#:864-599-9929	BOILING SPRINGS, SC 29316-5649	
VONHENNER, CHANCELLOR C PH#: 864-599-9929	JEJ & LFS LLC	
Facility Email: No Facility Email on Record	CRC-1289 / 02/28/2010	

Certifications:None

County: Spartanburg

Facility Type: Community Residential Care Facility

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Typ Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Unit
Certifications:Alzheimer Unit, Alzheimers Care		
SUMMIT HILLS ASSISTED LIVING COMMUNITY 100 SUMMIT HILLS DR SPARTANBURG, SC 29307-1532 FAC.#:864-591-2222 GIST, ANGELA S PH#: 864-591-2222 Facility Email: ATHOMAS@SUMMIT-HILLS.COM	Spartanburg / Ltd. Liability 100 SUMMIT HILLS DR SPARTANBURG, SC 29307-1532 SUMMIT HILLS LLC CRC-1113 / 09/30/2010	79
Certifications:Alzheimer Care		
WHITE OAK ESTATES ASSISTED LIVING 400 WEBBER RD SPARTANBURG, SC 29307-2400 FAC.#:864-579-7004 CATLETT, GARY D PH#: 864-579-7004 Facility Email: GCATLETT@WHITEOAKMANOR.COM	Spartanburg / Corporation 400 WEBBER RD SPARTANBURG, SC 29307-2400 WHITE OAK ESTATES ASSISTED LIVING INC CRC-1334 / 09/30/2010	45
Certifications:Alzheimer Care		
WINDSOR HOUSE WEST 850 JOHN B WHITE SR BLVD SPARTANBURG, SC 29306-4034 FAC.#:864-576-8910 BOWMAN, KAREN PH#: 864-576-8910 Facility Email: WHADMINISTRATOR@CHARTERINTERNET.COM	Spartanburg / Ltd. Liability PO BOX 6384 SPARTANBURG, SC 29304-6384 WHW ASSOCIATES LLC CRC-1369 / 11/30/2009	108
Certifications:Alzheimer Care		
WRIGHT'S RESIDENTIAL CARE #1 950 OLD SPARTANBURG HWY LYMAN, SC 29365-1846 FAC.#:864-249-0412 WRIGHT, DIANNE E PH#: 864-249-0412 Facility Email: DIWRIGHT57@YAHOO.COM	Spartanburg / Sole Proprietorship PO BOX 268 WELLFORD, SC 29385-0268 DIANNE E WRIGHT CRC-0617 / 01/31/2010	10
Certifications:None		
WRIGHT'S RESIDENTIAL CARE #2 A & B 12 RIVER ST, 12A & 12B LYMAN, SC 29365-1714 FAC.#:864-949-6259 WRIGHT, DIANNE E PH#: 864-949-6437 Facility Email: DIWRIGHT57@YAHOO.COM	Spartanburg / Sole Proprietorship PO BOX 268 WELLFORD, SC 29385-0268 DIANNE E WRIGHT CRC-1319 / 07/31/2010	10
Certifications:None		

Totals For Facility/License Type Community Residential Care Facility

Number of Activities/Facilities licensed: 29 Number Licensed Units 1,373

County: Spartanburg

Facility Type: Habilitation R15

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Typ Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Unit
BENCHMARK HOMES - COWPENS 204 GOFORTH ST COWPENS, SC 29330 FAC.#:864-562-2147 SORROW, STACIE PH#: 864-562-2100 Facility Email: KLIBBY@CHARLESORG	Spartanburg / State PO BOX 4706 COLUMBIA, SC 29240-4706 SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS MR15-0182 / 06/30/2010	12
BENCHMARK HOMES - SPARTANBURG 450 W HENRY ST SPARTANBURG, SC 29306 FAC.#:864-562-2470 SORROW, STACIE PH#: 864-562-2100 Facility Email: KLIBBY@CHARLESORG	Spartanburg / State PO BOX 4706 COLUMBIA, SC 29240-4706 SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS MR15-0183 / 06/30/2010	12
LANDRUM COMMUNITY RESIDENCE I 722 BOMAR AVE LANDRUM, SC 29356 FAC.#:864-457-4534 BRYANT, LIZA PH#: Facility Email: KLIBBY@CHARLESLEA.ORG	Spartanburg / State PO BOX 4706 COLUMBIA, SC 29240-4706 SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS MR15-0147 / 04/30/2010	8
LANDRUM COMMUNITY RESIDENCE II 722 BOMAR AVE LANDRUM, SC 29356 FAC.#:864-457-4534 BRYANT, LIZA PH#: Facility Email: KLIBBY@CHARLESLEA.ORG	Spartanburg / State PO BOX 4706 COLUMBIA, SC 29240-4706 SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS MR15-0148 / 04/30/2010	8

Totals For Facility/License Type Habilitation R15

Number of Activities/Facilities licensed:	<input type="text" value="4"/>	Number Licensed Units	<input type="text" value="40"/>
---	--------------------------------	-----------------------	---------------------------------

County: Spartanburg

Facility Type: Home Health

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Typ Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Unit
SPARTANBURG REGIONAL MEDICAL CENTER HOME HEALTH SERVICES 120 HEYWOOD AVE STE 300 SPARTANBURG, SC 29302-1211 FAC.#:864-560-3900 OSBORNE, PHYLLIS E PH#: 864-560-3900	Spartanburg / District 120 HEYWOOD AVE STE 300 SPARTANBURG, SC 29302-1211 SPARTANBURG REGIONAL HEALTH SERVICES DISTRICT INC HHA-0038 / 09/30/2010	1
Facility Email: No Facility Email on Record Counties Served Spartanburg License Restrictions Physical Therapy Y Speech Therapy:Y Occupational Therapy Y Med. Social Services Y Home Health Aid: Y Medical Supplies/Appliances/Durable Medical Equipment N Other:		

SUMMIT HILLS HOME HEALTH AGENCY 110 SUMMIT HILLS DR SPARTANBURG, SC 29307 FAC.#:864-591-2222 JONES, CHERYL PH#: 864-224-9895	Spartanburg / Ltd. Liability 110 SUMMIT HILLS DR SPARTANBURG, SC 29307 SUMMIT HILLS LLC HHA-0205 / 05/31/2010	1
Facility Email: ATHOMAS@SUMMIT-HILLS.COM Counties Served Spartanburg, Special Note - Restricted to the Residents of Continuing Care Community, Spartanburg, SC License Restrictions SERVING CAMPUS RESIDENTS ONLY Physical Therapy Y Speech Therapy:Y Occupational Therapy Y Med. Social Services Y Home Health Aid: Y Medical Supplies/Appliances/Durable Medical Equipment N Other:		

Totals For Facility/License Type Home Health	
Number of Activities/Facilities licensed:	2
Number Licensed Units	2

County: Spartanburg

Facility Type: Hospice Facility

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Typ Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Unit
HOSPICE HOUSE OF THE CAROLINA FOOTHILLS 260 FAIRWINDS RD LANDRUM, SC 29356-9075 FAC.#:828-894-7000 ECKERT, JEAN H PH#: 828-894-7000 Facility Email: ASTERRITT@HOCF.ORG	Spartanburg / Non-Profit Corporation 130 FOREST GLEN RD COLUMBUS, NC 28722-3456 HOSPICE OF THE CAROLINA FOOTHILLS INC HPF-0015 / 03/31/2010	12
SPARTANBURG REGIONAL HOSPICE HOME 686 JEFF DAVIS DR SPARTANBURG, SC 29303-2092 FAC.#:864-560-5620 DAWKINS, TRACEY L PH#: 864-560-5620 Facility Email: LHARRIS@SRHS.COM	Spartanburg / District 686 JEFF DAVIS DR SPARTANBURG, SC 29303-2092 SPARTANBURG REGIONAL HEALTH SERVICES DISTRICT INC HPF-0007 / 12/31/2009	15

Totals For Facility/License Type Hospice Facility

Number of Activities/Facilities licensed:	2	Number Licensed Units	27
---	---	-----------------------	----

County: Spartanburg**Facility Type: Hospice Program**

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Typ Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Unit
HOSPICE CARE OF SOUTH CAROLINA 110 DILLON DR SPARTANBURG, SC 29307-1018 FAC.#:864-542-2100 TEACHEY, DAWN-MICHELE E PH#: 864-542-2100 Facility Email: DAWNT@HOSPICECARE.NET	Spartanburg / Ltd. Liability 110 DILLON DR SPARTANBURG, SC 29307-1018 HOSPICE CARE OF SOUTH CAROLINA LLC HPC-0051 / 08/31/2010	46
Counties Served Abbeville, Aiken, Allendale, Anderson, Bamberg, Barnwell, Beaufort, Berkeley, Calhoun, Charleston, Cherokee, Chester, Chesterfield, Clarendon, Colleton, Darlington, Dillon, Dorchester, Edgefield, Fairfield, Florence, Georgetown, Greenville, Greenwood, Hampton, Horry, Jasper, Kershaw, Lancaster, Laurens, Lee, Lexington, Marion, Marlboro, McCormick, Newberry, Oconee, Orangeburg, Pickens, Richland, Saluda, Spartanburg, Sumter, Union, Williamsburg, York		
HOSPICE COMPASSUS GREENVILLE/SPARTANBURG 500 JEFF DAVIS DR SPARTANBURG, SC 29303-2044 FAC.#:864-542-2536 HANLEY, ELIZABETH PH#: 864-542-2536 Facility Email: No Facility Email on Record	Spartanburg / Ltd. Liability 500 JEFF DAVIS DR SPARTANBURG, SC 29303-2044 THI OF SOUTH CAROLINA HOSPICE LLC HPC-0108 / 05/31/2010	10
Counties Served Anderson, Cherokee, Chester, Greenville, Laurens, Oconee, Pickens, Spartanburg, Union, York		
HOSPICE OF THE CAROLINA FOOTHILLS 260 FAIRWINDS RD LANDRUM, SC 29356-9075 FAC.#:864-457-9100 ECKERT, JEAN H PH#: 828-894-7000 Facility Email: HOCF@HOCF.ORG	Spartanburg / Non-Profit Corporation PO BOX 127 LANDRUM, SC 29356-0127 HOSPICE OF THE CAROLINA FOOTHILLS INC HPC-0035 / 01/31/2010	2
Counties Served Greenville, Spartanburg		
INTERIM HEALTHCARE HOSPICE 775 SPARTAN BLVD STE 101 SPARTANBURG, SC 29301-1370 FAC.#:864-587-9798 MOORE, DAVID M PH#: 864-587-9798 Facility Email: DAVID.MOORE@HOMENURSING.COM	Spartanburg / Non-Profit Corporation 775 SPARTAN BLVD STE 101 SPARTANBURG, SC 29301-1370 INTERIM HEALTHCARE HOSPICE INC HPC-0045 / 05/31/2010	8
Counties Served Anderson, Cherokee, Greenville, Laurens, Oconee, Pickens, Spartanburg, Union		
PIEDMONT HOSPICE 1865 E MAIN ST DUNCAN, SC 29334-8723 FAC.#:864-585-8680 PEELER, DAPHNE N PH#: 864-585-8680 Facility Email: DPEELER!HOSPICESC.COM	Spartanburg / Limited Liability 1865 E MAIN ST DUNCAN, SC 29334-8723 PIEDMONT HOSPICE LLC HPC-0133 / 02/28/2010	13
Counties Served Anderson, Berkeley, Charleston, Cherokee, Clarendon, Dorchester, Greenville, Laurens, Orangeburg, Pickens, Spartanburg, Union, York		
SPARTANBURG REGIONAL MEDICAL CENTER HOSPICE 120 HEYWOOD AVE STE 300 SPARTANBURG, SC 29302-1211 FAC.#:864-560-3900 HARRIS, LINDA L PH#: 864-560-3900 Facility Email: No Facility Email on Record	Spartanburg / District 120 HEYWOOD AVE STE 300 SPARTANBURG, SC 29302-1211 SPARTANBURG REGIONAL HEALTH SERVICES DISTRICT INC HPC-0003 / 09/30/2010	4
Counties Served Cherokee, Greenville, Spartanburg, Union		

County: Spartanburg

Facility Type: Hospice Program

Facility Name	County/Ownership Typ	
Location Street	Mailing/Billing Address	
Location City, State	Licensee	
Administrator/Phone	License Nbr/Expiration Date	Licensed Unit

Totals For Facility/License Type Hospice Program		
Number of Activities/Facilities licensed:	6	Number Licensed Units
		83

County: Spartanburg

Facility Type: Hospital or Institutional General Infirmary

Facility Name	County/Ownership Typ	Licensed Unit
Location Street	Mailing/Billing Address	
Location City, State	Licensee	
Administrator/Phone	License Nbr/Expiration Date	
CHILDREN'S HABILITATION CENTER	Spartanburg / State	22
355 CEDAR SPRINGS RD	355 CEDAR SPRINGS RD	
SPARTANBURG, SC 29302-4699 FAC.#:864-577-7672	SPARTANBURG, SC 29302-4699	
SMITH, REBECCA A PH#: 864-577-7677	SC SCHOOL FOR THE DEAF BLIND & MULTI-HANDICAPPED	
Facility Email: ROWENS@SCSDB.ORG	HTL-0449 / 06/30/2010	
Licensed Beds: General: 22 Psychiatric: 0 Rehab: 0 Substance Abuse 0		
Other Beds NICU: 0 Neonatal Special Care 0		

Certifications:None

MARY BLACK MEMORIAL HOSPITAL	Spartanburg / Ltd. Liability	209
1700 SKYLYN DR	PO BOX 3217	
SPARTANBURG, SC 29307-1061 FAC.#:803-573-3786	SPARTANBURG, SC 29304-3217	
WRIGHT, PHILLIP L PH#: 864-573-3000	MARY BLACK HEALTH SYSTEM LLC	
Facility Email: PHILLIP.WRIGHT@MARYBLACK.ORG	HTL-0704 / 07/31/2010	
Licensed Beds: General: 176 Psychiatric: 15 Rehab: 18 Substance Abuse 0		
Other Beds NICU: 0 Neonatal Special Care 10		

Certifications:Perinatal Level II, JCAHO Accredited

SPARTANBURG HOSPITAL FOR RESTORATIVE CARE	Spartanburg / District	97
389 SERPENTINE DR	389 SERPENTINE DR	
SPARTANBURG, SC 29303-3074 FAC.#:864-560-3235	SPARTANBURG, SC 29303-3074	
BUTLER, ANITA M PH#: 864-560-3235	SPARTANBURG REGIONAL HEALTH SERVICES DISTRICT INC	
Facility Email: ABUTLER@SRHS.COM	HTL-0685 / 08/31/2010	
Licensed Beds: General: 97 Psychiatric: 0 Rehab: 0 Substance Abuse 0		
Other Beds NICU: 0 Neonatal Special Care 0		

Certifications:JCAHO Accredited

SPARTANBURG REGIONAL MEDICAL CENTER	Spartanburg / District	540
101 E WOOD ST	101 E WOOD ST	
SPARTANBURG, SC 29303-3072 FAC.#:864-560-6000	SPARTANBURG, SC 29303-3072	
ANGERMEIER, INGO PH#: 864-560-6000	SPARTANBURG REGIONAL HEALTH SERVICES DISTRICT INC	
Facility Email: No Facility Email on Record	HTL-0125 / 03/31/2010	
Licensed Beds: General: 484 Psychiatric: 56 Rehab: 0 Substance Abuse 0		
Other Beds NICU: 13 Neonatal Special Care 22		

Certifications:Trauma Center Level I, Perinatal Level III Regional, JCAHO Accredited

VILLAGE HOSPITAL	Spartanburg / District	48
250 WESTMORELAND RD	250 WESTMORELAND RD	
GREER, SC 29651-9013 FAC.#:864-530-5555	GREER, SC 29651-9013	
FEISAL, J PHILLIP PH#: 864-454-2600	SPARTANBURG REGIONAL HEALTH SERVICES DISTRICT INC	
Facility Email: JPFESAL@SRHS.COM	HTL-0905 / 09/30/2010	
Licensed Beds: General: 48 Psychiatric: 0 Rehab: 0 Substance Abuse 0		
Other Beds NICU: 0 Neonatal Special Care 0		

Certifications:Perinatal Level I, JCAHO Accredited

County: Spartanburg

Facility Type: Hospital or Institutional General Infirmary

Facility Name	County/Ownership Typ	
Location Street	Mailing/Billing Address	
Location City, State	Licensee	
Administrator/Phone	License Nbr/Expiration Date	Licensed Unit

Totals For Facility/License Type Hospital or Institutional General Infirmary	
Number of Activities/Facilities licensed:	5 Number Licensed Units 916

County: Spartanburg

Facility Type: Nursing Home

Facility Name	County/Ownership Typ	Licensed Unit
Location Street	Mailing/Billing Address	
Location City, State	Licensee	
Administrator/Phone	License Nbr/Expiration Date	

CAMP CARE	Spartanburg / Ltd. Liability	88
59 BLACKSTOCK RD	59 BLACKSTOCK RD	
INMAN, SC 29349-1827 FAC.#:864-472-2028	INMAN, SC 29349-1827	
COTHRAN, WADETTE S PH#: 864-472-2028	THI OF SOUTH CAROLINA AT CAMP CARE LLC	
Facility Email: WADETTE.COTHRAN@THICARE.COM	NCF-0862 / 08/31/2010	

Licensed Beds	Nursing Home	88	Institutional Nursing Home	0
----------------------	---------------------	----	-----------------------------------	---

Certifications:None

GOLDEN AGE-INMAN	Spartanburg / Ltd. Liability	44
82 N MAIN ST	82 N MAIN ST	
INMAN, SC 29349-1416 FAC.#:864-472-6636	INMAN, SC 29349-1416	
JOHNSON, TIMOTHY A PH#: 864-472-6636	THI OF SOUTH CAROLINA AT GOLDEN AGE-INMAN LLC	
Facility Email: TIMOTHY.JOHNSON@THICARE.COM	NCF-0857 / 08/31/2010	

Licensed Beds	Nursing Home	44	Institutional Nursing Home	0
----------------------	---------------------	----	-----------------------------------	---

Certifications:None

INMAN HEALTHCARE	Spartanburg / Corporation	40
51 N MAIN ST	51 N MAIN ST	
INMAN, SC 29349-1437 FAC.#:864-472-9370	INMAN, SC 29349-1437	
KILPATRICK, LYNN D PH#:	THI OF SOUTH CAROLINA AT INMAN LLC	
Facility Email: LYNN.KILPATRICK@THICARE.COM	NCF-0864 / 08/31/2010	

Licensed Beds	Nursing Home	40	Institutional Nursing Home	0
----------------------	---------------------	----	-----------------------------------	---

Certifications:None

MAGNOLIA MANOR-INMAN	Spartanburg / Ltd. Liability	176
63 BLACKSTOCK RD	63 BLACKSTOCK RD	
INMAN, SC 29349-1849 FAC.#:864-472-9055	INMAN, SC 29349-1849	
LYLES, DALE M PH#: 864-472-9055	THI OF SOUTH CAROLINA AT MAGNOLIA MANOR-INMAN LLC	
Facility Email: No Facility Email on Record	NCF-0863 / 08/31/2010	

Licensed Beds	Nursing Home	176	Institutional Nursing Home	0
----------------------	---------------------	-----	-----------------------------------	---

Certifications:None

MAGNOLIA MANOR-SPARTANBURG	Spartanburg / Ltd. Liability	95
375 SERPENTINE DR	375 SERPENTINE DR	
SPARTANBURG, SC 29303-3026 FAC.#:864-585-0218	SPARTANBURG, SC 29303-3026	
HARPER, DAVID S PH#: 864-594-5116	THI OF SOUTH CAROLINA AT SPARTANBURG LLC	
Facility Email: No Facility Email on Record	NCF-0867 / 08/31/2010	

Licensed Beds	Nursing Home	95	Institutional Nursing Home	0
----------------------	---------------------	----	-----------------------------------	---

Certifications:None

County: Spartanburg

Facility Type: Nursing Home

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Typ Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Unit
---	--	---------------

MAGNOLIA PLACE AT SPARTANBURG 8020 WHITE AVE SPARTANBURG, SC 29303-2099 FAC.#:864-542-8515 HARRIS, PATRICIA A PH#: 864-542-8515 Facility Email: PATRICIA.HARRIS@THICARE.COM	Spartanburg / Ltd. Liability 8020 WHITE AVE SPARTANBURG, SC 29303-2099 THI OF SOUTH CAROLINA AT MAGNOLIA PLACE AT SPARTANBURG LLC NCF-0861 / 08/31/2010	88
---	--	----

Licensed Beds	Nursing Home	88	Institutional Nursing Home	0
---------------	--------------	----	----------------------------	---

Certifications:None

MOUNTAINVIEW NURSING HOME 340 CEDAR SPRINGS RD SPARTANBURG, SC 29302-4697 FAC.#:864-582-4175 DILLARD, WILSON K PH#: 864-582-4175 Facility Email: WDILLARD@MOUNTAINVIEWNH.COM	Spartanburg / Corporation 340 CEDAR SPRINGS RD SPARTANBURG, SC 29302-4697 COMMUNITY SERVICES FOR THE AGING INC NCF-0149 / 06/30/2010	132
--	--	-----

Licensed Beds	Nursing Home	132	Institutional Nursing Home	0
---------------	--------------	-----	----------------------------	---

Certifications:None

ROSECREST REHABILITATION AND HEALTHCARE 200 FORTRESS DR INMAN, SC 29349-9160 FAC.#:864-599-8600 MILLER, RICHARD P PH#: 803-581-3151 Facility Email: RMILLER@ROSECRESTORG	Spartanburg / Non-Profit Corporation 200 FORTRESS DR INMAN, SC 29349-9160 LUTHERAN HOMES OF SOUTH CAROLINA INC NCF-0817 / 04/30/2010	75
--	--	----

Licensed Beds	Nursing Home	75	Institutional Nursing Home	0
---------------	--------------	----	----------------------------	---

Certifications:Alzheimer Unit, Alzheimers Care

SKYLYN HEALTH CENTER 1705 SKYLYN DR OFC SPARTANBURG, SC 29307-1090 FAC.#:864-582-6838 BARRESI, TIMOTHY J PH#: 864-582-6838 Facility Email: No Facility Email on Record	Spartanburg / Corporation 3131 ELLIOTT AVE STE 500 SEATTLE, WA 98121-1031 EMERITUS CORPORATION NCF-0700 / 01/31/2010	44
--	--	----

Licensed Beds	Nursing Home	33	Institutional Nursing Home	11
---------------	--------------	----	----------------------------	----

Certifications:None

SPARTANBURG HOSPITAL FOR RESTORATIVE CARE SNF 389 SERPENTINE DR SPARTANBURG, SC 29303-3074 FAC.#:864-560-3232 STIMAC, PATRICIA M PH#: 864-560-3232 Facility Email: PSTIMAC@SRHSCOM	Spartanburg / District 389 SERPENTINE DR SPARTANBURG, SC 29303-3074 SPARTANBURG REGIONAL HEALTH SERVICES DISTRICT INC NCF-0915 / 02/28/2010	25
--	---	----

Licensed Beds	Nursing Home	25	Institutional Nursing Home	0
---------------	--------------	----	----------------------------	---

Certifications:None

County: Spartanburg**Facility Type: Nursing Home**

Facility Name	County/Ownership Typ	Licensed Unit
Location Street	Mailing/Billing Address	
Location City, State	Licensee	
Administrator/Phone	License Nbr/Expiration Date	

SUMMIT HILLS SKILLED NURSING FACILITY	Spartanburg / Ltd. Liability	33
100 SUMMIT HILLS DR	100 SUMMIT HILLS DR	
SPARTANBURG, SC 29307-1532 FAC.#:864-591-2222	SPARTANBURG, SC 29307-1532	
GOODWIN, ANNETTE SMITH PH#: 864-591-2222	SUMMIT HILLS LLC	
Facility Email: ATHOMAS@SUMMIT-HILLSCOM	NCF-0950 / 03/31/2010	

Licensed Beds Nursing Home 27 Institutional Nursing Home 6

Certifications:None

VALLEY FALLS TERRACE	Spartanburg / Corporation	88
400 LOCUST GRV	400 LOCUST GRV	
SPARTANBURG, SC 29303-4831 FAC.#:864-503-0377	SPARTANBURG, SC 29303-4831	
HORNE, LINDA A PH#: 864-503-0377	VALLEY FALLS TERRACE INC	
Facility Email: LAHVFT@HOTMAIL.COM	NCF-0495 / 08/31/2010	

Licensed Beds Nursing Home 88 Institutional Nursing Home 0

Certifications:Alzheimer Care

WHITE OAK ESTATES	Spartanburg / Corporation	88
400 WEBBER RD	400 WEBBER RD	
SPARTANBURG, SC 29307-2400 FAC.#:864-579-7004	SPARTANBURG, SC 29307-2400	
CATLETT, GARY D PH#: 864-579-7004	WHITE OAK ESTATES INC	
Facility Email: GCATLETT@WHITEOAKMANOR.COM	NCF-0888 / 12/31/2009	

Licensed Beds Nursing Home 88 Institutional Nursing Home 0

Certifications:None

WHITE OAK MANOR-SPARTANBURG	Spartanburg / Corporation	192
295 E PEARL ST	PO BOX 4887	
SPARTANBURG, SC 29303-3666 FAC.#:864-585-0241	SPARTANBURG, SC 29305-4887	
NELSON, ANDREW R PH#: 864-573-0106	WHITE OAK MANOR-SPARTANBURG INC	
Facility Email: RROUBY@WHITEOAKMANOR.COM	NCF-0889 / 12/31/2009	

Licensed Beds Nursing Home 192 Institutional Nursing Home 0

Certifications:None

WOODRUFF MANOR	Spartanburg / Ltd. Liability	88
1114 E GEORGIA RD	PO BOX 879	
WOODRUFF, SC 29388-9350 FAC.#:864-476-7092	WOODRUFF, SC 29388-0879	
TAYLOR, KEITH PH#:	WOODRUFF MANOR LLC	
Facility Email: ADMINISTRATOR@WOODRUFFMANOR.COM	NCF-0823 / 09/30/2010	

Licensed Beds Nursing Home 88 Institutional Nursing Home 0

Certifications:Alzheimer Care

County: Spartanburg

Facility Type: Nursing Home

Facility Name	County/Ownership Typ
Location Street	Mailing/Billing Address
Location City, State	Licensee
Administrator/Phone	License Nbr/Expiration Date
	Licensed Unit

Totals For Facility/License Type Nursing Home	
Number of Activities/Facilities licensed:	15
Number Licensed Units	1,296

County: Spartanburg

Facility Type: PSAD Inpatient

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Typ Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Unit
RAYMOND C EUBANKS JR DETOXIFICATION CENTER 151 N SPRING ST SPARTANBURG, SC 29306 FAC.#:864-596-2300 MCCALLISTER, RICK PH#:	Spartanburg / County PO BOX 1252 SPARTANBURG, SC 29304-1252 SPARTANBURG ALCOHOL AND DRUG ABUSE COMMISSION-BOARD ITP-0016 / 05/31/2010	15
Facility Email: No Facility Email on Record		
Licensed Beds Medical Detox	0 Social Detox:	15 Res. Treatment Program 0

Totals For Facility/License Type PSAD Inpatient	
Number of Activities/Facilities licensed:	Number Licensed Units
1	15

County: Spartanburg

Facility Type: PSAD Outpatient

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Typ Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Unit
SPARTANBURG ALCOHOL AND DRUG ABUSE COMMISSION 187 W BROAD ST STE 200 SPARTANBURG, SC 29306-3234 FAC.#:864-582-7588 FORRESTER, DAVID L PH#: 864-582-7588 Facility Email: MARIA@SADAC.ORG	Spartanburg / County PO BOX 1252 SPARTANBURG, SC 29304-1252 SPARTANBURG ALCOHOL AND DRUG ABUSE COMMISSION-BOARD OTP-0024 / 08/31/2010	1

Certifications:None

SPARTANBURG TREATMENT ASSOCIATES 239 ACCESS RD SPARTANBURG, SC 29303 FAC.#:864-503-0207 AMBROSIO, CARMEN D PH#: 864-503-0207 Facility Email: BKBRADYECHARTER.NET	Spartanburg / Corporation 239 ACCESS RD SPARTANBURG, SC 29303-1682 SPARTANBURG TREATMENT ASSOCIATES INC OTPN-0095 / 05/31/2010	1
--	--	---

Certifications:Narcotics Treatment Program, Methodone Treatment Program

Totals For Facility/License Type PSAD Outpatient	
Number of Activities/Facilities licensed: <input type="text" value="2"/>	Number Licensed Units <input type="text" value="2"/>

County: Spartanburg

Facility Type: Renal Dialysis

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Typ Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Unit
CAROLINA DIALYSIS 115 INTERSTATE PARK SPARTANBURG, SC 29303-6611 FAC.#:864-576-9999 REED, ELIZABETH M PH#: 864-886-8031 Facility Email: EREED@AMERICANRENAL.COM	Spartanburg / Limited Liability 115 INTERSTATE PARK SPARTANBURG, SC 29303-6611 CAROLINA DIALYSIS LLC ERD-0171 / 09/30/2010	20
Licensed Stations: Hemodialysis: 20 Peritoneal: 1		
DCI EAST SPARTANBURG 155 DILLON DR SPARTANBURG, SC 29307-1017 FAC.#:864-585-4840 LIVESAY, PATRICIA S PH#: 864-585-4840 Facility Email: No Facility Email on Record	Spartanburg / Corporation 155 DILLON DR SPARTANBURG, SC 29307-1017 DIALYSIS CLINIC INC ERD-0022 / 11/30/2009	35
Licensed Stations: Hemodialysis: 32 Peritoneal: 3		
DCI LANDRUM 110 ASBURY DR LANDRUM, SC 29356-1401 FAC.#:864-457-2435 TRUDELL RN, JENNY PH#: 864-574-9629 Facility Email: No Facility Email on Record	Spartanburg / Corporation 110 ASBURY DR LANDRUM, SC 29356-1401 DIALYSIS CLINIC INC ERD-0106 / 06/30/2010	13
Licensed Stations: Hemodialysis: 13 Peritoneal: 0		
DCI SPARTANBURG 203 E FREMONT AVE SPARTANBURG, SC 29303-2932 FAC.#:864-585-2046 BENFIELD RN, REBECCA R PH#: 828-891-5226 Facility Email: No Facility Email on Record	Spartanburg / Corporation 203 E FREMONT AVE SPARTANBURG, SC 29303-2932 DIALYSIS CLINIC INC ERD-0030 / 01/31/2010	43
Licensed Stations: Hemodialysis: 43 Peritoneal: 0		
DCI WEST SPARTANBURG 105 TRADD ST SPARTANBURG, SC 29301-5085 FAC.#:864-574-8828 YERGER, SCOTT A PH#: 864-574-8828 Facility Email: No Facility Email on Record	Spartanburg / Corporation 105 TRADD ST SPARTANBURG, SC 29301-5085 DIALYSIS CLINIC INC ERD-0062 / 03/31/2010	25
Licensed Stations: Hemodialysis: 25 Peritoneal: 0		

Totals For Facility/License Type Renal Dialysis

Number of Activities/Facilities licensed:	5	Number Licensed Units	136
---	---	-----------------------	-----

County: Spartanburg

Facility Type: Tattoo Facility

Facility Name Location Street Location City, State Administrator/Phone	County/Ownership Typ Mailing/Billing Address Licensee License Nbr/Expiration Date	Licensed Unit
DARK SIDE TATTOO 2313 REIDVILLE RD STE E SPARTANBURG, SC 29301-3329 FAC.#:864-595-7232 BREWER, MICHAEL C PH#: 864-595-7232 Facility Email: No Facility Email on Record	Spartanburg / Partnership 2313 REIDVILLE RD STE E SPARTANBURG, SC 29301-3329 MICHAEL C BREWER AND MICHAEL B HUNTER TF-0051 / 08/31/2010	4
LUCKY DICE TATTOO 1390 MILLIKEN RD STE C SPARTANBURG, SC 29303-1900 FAC.#:864-812-0543 CAPOZZI-OSPINA, APRIL PH#: 864-812-0543 Facility Email: LUCKYDICETATTOO@AOL.COM	Spartanburg / Sole Proprietorship 1390 MILLIKEN RD STE C SPARTANBURG, SC 29303-1900 OSPINO, RAPHAEL TF-0089 / 04/30/2010	4
MADHOUSE CUSTOM TATTOO 3417 BOILING SPRINGS RD BOILING SPRINGS, SC 29316-6019 FAC.#:864-327-9285 STRAND, BRYAN PH#: 864-327-9285 Facility Email: BRYANSTRAND@ROCKETMAIL.COM	Spartanburg / Sole Proprietorship 3417 BOILING SPRINGS RD BOILING SPRINGS, SC 29316-6019 STRAND, BRYAN TF-0086 / 12/31/2009	2
SHANGHAI TATTOO COMPANY 8031 WARREN H ABERNATHY HWY SPARTANBURG, SC 29301-2449 FAC.#:864-574-8282 LIGHTFOOT, JASON A PH#: 864-574-8282 Facility Email: SHANGHAITATTOOCO@BELLSOUTH.NET	Spartanburg / Sole Proprietorship 8031 WARREN H ABERNATHY HWY SPARTANBURG, SC 29301-2449 LIGHTFOOT, JASON A TF-0072 / 05/31/2010	5
TATTOO WEARHOUSE 740 OAK GROVE RD SPARTANBURG, SC 29301-3579 FAC.#:864-576-8552 MAUNEY, JEFFERY S PH#: 864-576-8552 Facility Email: TATTOOWEARHOUSE@GMAIL.COM	Spartanburg / Corporation 740 OAK GROVE RD SPARTANBURG, SC 29301-3579 TATTOO WEARHOUSE INC TF-0020 / 09/30/2010	8
TRINITY TATTOO COMPANY 175 N TOWN DR SPARTANBURG, SC 29303-1401 FAC.#:864-303-2898 BERTOLINI, JAMES S PH#: 864-303-2898 Facility Email: IRIDE4JESUS@YAHOO.COM	Spartanburg / Limited Liability 224 WAYMON DR GREER, SC 29651-4536 TRINITY TATTOO COMPANY LLC TF-0082 / 11/30/2009	4

Totals For Facility/License Type Tattoo Facility

Number of Activities/Facilities licensed:	6	Number Licensed Units	27
---	---	-----------------------	----

Number of Activities/Facilities licensed in county of	Spartanburg	# Lics	90
	Number Licensed Units :	4,096	

Report Total

Total Number of Activities/Facilities licensed	90	Total Number Licensed Units	4,096
--	----	-----------------------------	-------