

 STATEMENT OF DEFICIENCIES & PLAN OF CORRECTION Biennial Survey		Date Completed: 8/11.2023
Name of Facility: Pagoma Administrator: Ilea Sangillo LEVEL III RESIDENTIAL CARE FACILITY Census: 3 Total Capacity: 3		Address: 20 Pagoma Lewiston, ME, 04240
Summary Statement of Deficiencies	Plan of Correction	Completion Date

Pagoma, a Level III Residential Care Facility, is in substantial compliance with Regulations Governing the Licensing and Functioning of Assisted Housing Programs: Level III Residential Care Facilities, Part of 10-144, Chapter 113. 58

No Deficiencies