

**Department of Health and Human Services
Division of Public Health
Licensure Unit
301 Centennial Mall So, P O Box 94986
Lincoln, NE 68509-4986**

4/6/16 dy

DEPARTMENT OF HEALTH AND HUMAN SERVICES DIVISION OF PUBLIC HEALTH CERTIFIES THAT	
Colonial Manor of Randolph MEETS STATUTORY REQUIREMENTS AS SNF/NF DUAL CERT	
Services PHYSICAL THERAPY OCCUPATIONAL THERAPY SPEECH THERAPY	Lic # 124004
EXPIRES 03/31/2017	  Courtney R. Phillips, MPA Chief Executive Officer Department of Health and Human Services

Cut on heavy line and place on license.

FACILITY NAME: Colonial Manor of Randolph

ADDRESS: P O BOX 67, 811 SOUTH MAIN STREET, RANDOLPH, NE 68771

This is to verify that your SNF/NF DUAL CERT is licensed through the date indicated on the above renewal card. Place the renewal card in the lower left hand corner of your original license.

Please notify this office at the address listed above of any change in name, address, or ownership.

FEB 09 2016

4-15-15



NEBRASKA DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF PUBLIC HEALTH
Licensure Unit

Table with 2 columns: Renewal Fees, Amount. Rows: 1-50 beds: \$1550, 51-100 beds: \$1750, 101 or more: \$1950

Expiration Date 03/31/2016

Nursing Home Licensure Renewal Application

Nursing Home Type: Please Check [X] Skilled Nursing Facility [] Nursing Facility [] Intermediate Care Facility

IDENTIFYING INFORMATION

1. NAME AND ADDRESS OF FACILITY:

Colonial Manor of Randolph
P O BOX 67, 811 SOUTH MAIN STREET
RANDOLPH, NE 68771

2. PREFERRED MAILING ADDRESS (IF DIFFERENT FROM FACILITY ADDRESS) FOR THE RECEIPT OF OFFICIAL NOTICES FROM THE DEPARTMENT:

2016 FEB 11 A 11:09
REC'D DHHS ACCOUNTING

LICENSE NO: 124004

TELEPHONE NUMBER: (402) 337-0444

FAX NUMBER: (402) 337-1746

ADMINISTRATOR: ROBERT PYPER

DIRECTOR OF NURSING: JEAN GALL, R.N. Dolorita Rauch cckr

E-Mail Address, If available: ColonialManorsurvey@Ensigngroup.net

3. FEDERAL EMPLOYER IDENTIFICATION NUMBER OF THE FACILITY:

4. NUMBER OF BEDS TO BE RELICENSED: 45

5. ACCREDITATION/CERTIFICATION: [] JCAHO [X] Medicare [X] Medicaid [] Other
Are you requesting deemed status? [] yes [X] no

6. SPECIAL CARE AND TREATMENT SPECIFICALLY FOR THE FOLLOWING GROUPS:
If different from Current Services listed, please check changes.

[X] Physical Therapy [] Alzheimers/Special Care Unit [X] Speech Therapy
[] Pediatric [] Respiratory [X] Occupational Therapy
[] Behavioral Needs

Current Services

PHYSICAL THERAPY
OCCUPATIONAL THERAPY
SPEECH THERAPY

OWNERSHIP INFORMATION

7. OWNERSHIP OF FACILITY: RANDOLPH HEALTHCARE, INC
(Legal Name of individual or business organization)

MAILING ADDRESS: 811 SOUTH MAIN STREET
RANDOLPH, NE 68771

8. BUSINESS ORGANIZATION: (Check one):

- [] Sole Proprietorship
[] Partnership
[X] Limited Partnership
[] Corporation
[] Limited Liability Company
[] Governmental (State, District, County, City or Municipal)
[] Other (Please Specify)

(check one)
[X] Profit [] Non Profit

CERTIFICATION

I/we have read the Rules and Regulations issued by the Nebraska Department of Health and Human Services and will comply with them should a license be issued. I/we certify that to the best of my/our knowledge, all information and statements on the application are true and correct and I/we hereby apply for a renewal license.

PLEASE NOTE: Neb.Rev.Stat. Section 71-433 requires: Applications shall be signed by

- (1) the owner, if the applicant is an individual or partnership,
(2) two of its members, if the applicant is a limited liability company,
(3) two of its officers, if the applicant is a corporation, or
(4) the head of the governmental unit having jurisdiction over the facility to be licensed, if the applicant is a governmental unit.

Susan Burnham
AUTHORIZED REPRESENTATIVE - TYPE OR PRINT

2/4/16
DATE

Beverly Wittkind
AUTHORIZED REPRESENTATIVE - TYPE OR PRINT

[Redacted Signature]

2/4/16
DATE

COLONIAL MANOR OF RANDOLPH

CORPORATE ORGANIZATION CHART

List of names and addresses of all persons in control of the facility.

RANDOLPH HEALTHCARE, INC., DBA COLONIAL MANOR OF RANDOLPH

811 South Main Street
Randolph, NE 68771
Phone: (402) 337-0444

Officers:

Michael Clegg, President
Beverly Wittekind, Secretary
Soon Burnam, Treasurer
Christopher Christensen, Director

GATEWAY HEALTHCARE, INC. (100% SHAREHOLDER OF RANDOLPH HEALTHCARE, INC.)

27101 Puerta Real, Suite 450
Mission Viejo, CA 92691
Phone: 949-487-9500

Officers:

Michael Clegg, President
Beverly Wittekind, Secretary
Soon Burnam, Treasurer
Christopher Christensen, Director

THE ENSIGN GROUP, INC., (100% SHAREHOLDER OF GATEWAY HEALTHCARE, INC.,)*

27101 Puerta Real, Suite 450
Mission Viejo, CA 92691
Phone: 949-487-9500

Officers:

Christopher Christensen, President and CEO

*The Ensign Group, Inc. (NASDAQ: ENSG) is a publicly-traded company and its shares may be acquired, held and disposed of by independent investors and institutions without concurrent notice to the Company. Although public investors may at times exceed the 5% threshold, the Company has no way of knowing the current amount of any public investor's holdings, and has only undertaken to disclose those 5% or more shareholders known to the Company and involved in its business.

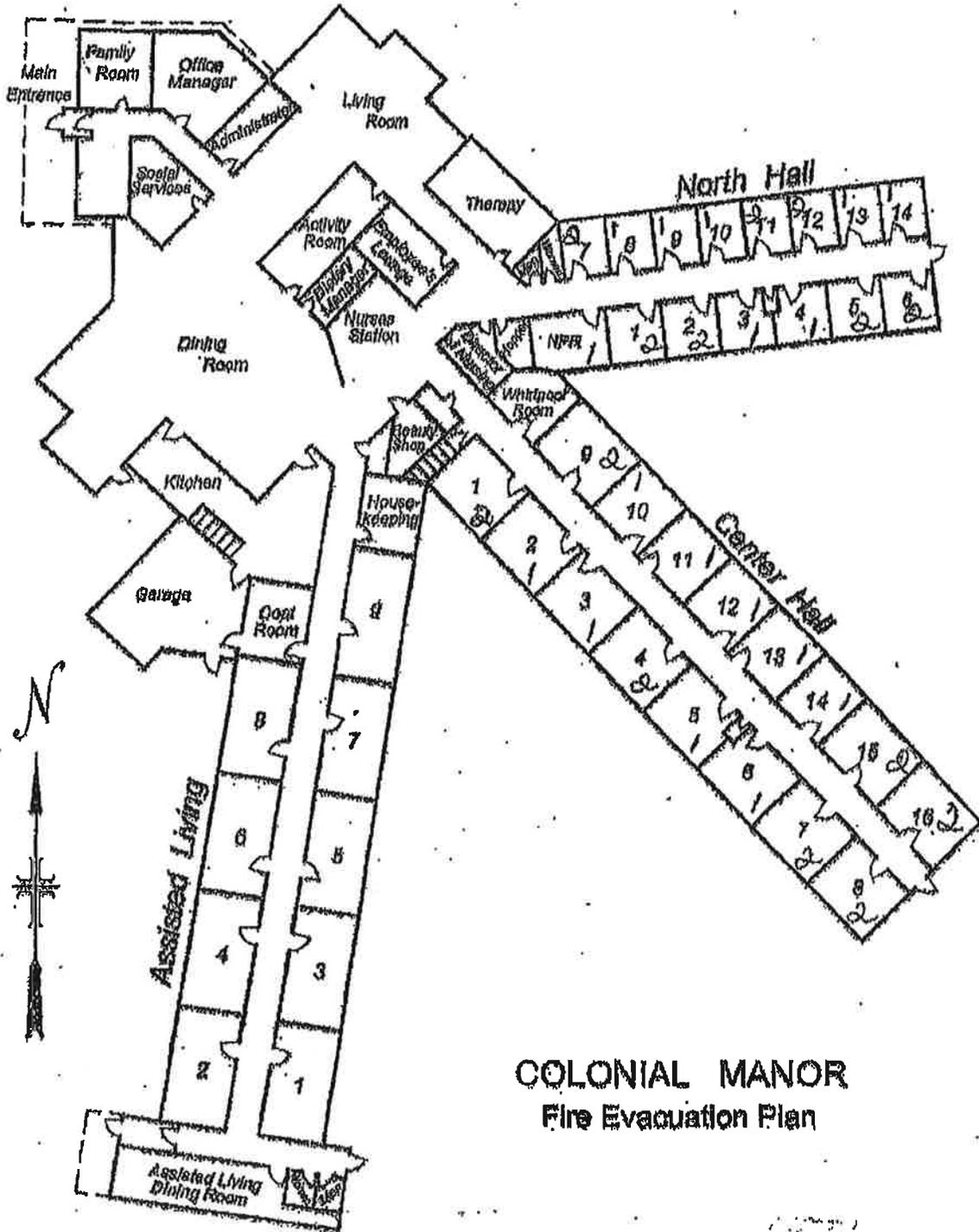


COLONIAL MANOR

P.O. Box 67, 611 S. Main St., RANDOLPH, NEBRASKA 68771

Colonial Manor

PHONE 402-937-0444



COLONIAL MANOR
Fire Evacuation Plan

FEB 09 2016

ENSIGN  SERVICES

RECEIVED

JUANITA INZUNZA
LICENSING MANAGER
Ensign Services, Inc.

phone (949) 487-9500
direct fax (949) 540-3007
jinzunza@ensigngroup.net

February 8, 2016

VIA FEDERAL EXPRESS

Nebraska Dept. of Health and Human Services
Division of Public Health, Licensure Unit
301 Centennial Mall South, 3rd Floor
Lincoln, NE 68508

Re: Facility License Renewal Applications

To Whom It May Concern:

Enclosed please find the license renewal applications for the following nursing homes:

1. Randolph Healthcare, Inc. dba Colonial Manor of Randolph (SNF) and
2. Lindahl Healthcare, Inc. dba Careage Campus of Care (SNF)

If you have any questions, please do not hesitate to contact me.

Sincerely, 
Juanita Inzunza
Ensign Services, Inc.

Encl.

NEBRASKA STATE FIRE MARSHAL OCCUPANCY PERMIT

Certificate Number: 402410

Name of Facility: Colonial Manor of Randolph

Type of Facility: Nursing Home

Location: 811 S Main St., Randolph

Maximum
Occupancy: 45 Beds

Date Issued: 3/17/2014

Approved By:

Inspected By: 8718 Don Fast
Deputy State Fire Marshal

State Fire Marshal



POST IN PROMINENT PLACE

Change in occupancy classification or failure to meet State Fire Marshal codes shall invalidate this occupancy permit.

NEBRASKA STATE FIRE MARSHAL

OCCUPANCY PERMIT

Certificate Number: 403019

Name of Facility: Colonial Manor of Randolph

Type of Facility: Nursing Home

Location: 811 S Main St., Randolph

Maximum Occupancy: 45 Beds

Date Issued: 4/15/2015

Approved By:

Inspected By: 8718 Don Fast
Deputy State Fire Marshal

State Fire Marshal



POST IN PROMINENT PLACE

Change in occupancy classification or failure to meet State Fire Marshal codes shall invalidate this occupancy permit.