

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

3/24/16dy

DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF PUBLIC HEALTH
CERTIFIES THAT

COTTONWOOD VILLA
MEETS STATUTORY REQUIREMENTS AS
ASSISTED-LIVING FACILITY

Services
AGED/DISABLED MED WVR

Lic # ALF046

EXPIRES
04/30/2017

 
Courtney M. Phillips, MPA
Chief Executive Officer
Department of Health and Human Services

Cut on heavy line and place on license.

FACILITY NAME: COTTONWOOD VILLA

ADDRESS: 450 SOUTH MAIN STREET, AINSWORTH, NE 69210

This is to verify that your ASSISTED-LIVING FACILITY 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.

MAR 18 2016

2-24-15



STATE OF NEBRASKA
Department of Health and Human Services
Division of Public Health - Licensure Unit
P.O. Box 94986, Lincoln, NE 68509-4986

RECEIVED

Expiration Date
04/30/2016

Make Payment to DHHS LU

Renewal Fees:
1 - 10 beds: \$950
11 - 20 beds: \$1450
21 - 50 beds: \$1650
51 or more: \$1950

Assisted-Living Facility Licensure Renewal Application

IDENTIFYING INFORMATION

1. NAME AND ADDRESS OF FACILITY:

COTTONWOOD VILLA
450 SOUTH MAIN STREET
AINSWORTH, NE 69210

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

LICENSE NO: ALF046

TELEPHONE NUMBER: (402) 387-1000

FAX NUMBER: (402) 387-1015

ADMINISTRATOR: ANN FIALA, ADMIN

EMAIL: cottonwoodvilla@yahoo.com

3. FEDERAL EMPLOYER IDENTIFICATION NUMBER OF THE FACILITY: _____

4. TOTAL NUMBER OF BEDS TO BE RELICENSED: 36

5. SPECIFY SPECIAL POPULATIONS: (Please check)

Special Care Unit for Alzheimer's or Dementia or Related Disorders _____ Number of Beds

Other -- Please Specify _____ Number of Beds

W

6. ACCREDITATION: (Check if applicable) Are you requesting deemed status for compliance with 175 NAC 4-006? Yes No

Name of Accreditation Organization: _____

OWNERSHIP INFORMATION

7. OWNERSHIP OF FACILITY: PRAIRIE INVESTORS, LLC

(Legal Name of Individual or Business Organization)

MAILING ADDRESS: 450 SOUTH MAIN STREET
AINSWORTH, NE 69210

8. BUSINESS ORGANIZATION: (Check one):

Sole Proprietorship

Partnership

Limited Partnership

Corporation

Limited Liability Company

Governmental (Check one) State, District, County, City or Municipal

Other (Please Specify) _____

(check one)
 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.

TODD MUNDHENKE
AUTHORIZED REPRESENTATIVE - TYPE OR PRINT

JAMES J. HOCH
AUTHORIZED REPRESENTATIVE - TYPE OR PRINT

[Redacted Signature]

SIGNATURE

2-22-16
DATE

2/17/2016
DATE

REC'D HHS
2016 MAR 18
11:48

Prairie Investors, L.L.C.

1/2016

Name		
Gerald & Mary Ann Allen	707 North Maple	Ainsworth, NE 69210
Becky I. Schelm	Box 8	Johnstown, NE 69214
The Francis Bejot Family Revocable Trust	356 N. Oak	Ainsworth, NE 69210
Carol M. Chase	Rock Co. LTC 102 South St.	Bassett, NE 68714
Kathy Leach & Lanny Leach	421 County Road 401	Elk Creek, CA 95939
Donald & Paige Coash	POB 626	Bassett, NE 68714
Nancy Shrope	5338 Sunnyside Dr.	Rapid City, SD 57701
Mike Shrope	5338 Sunnyside Dr.	Rapid City, SD 57701
Jeannia Jo Bressler	57145 864th Rd.	Laurel, NE 68745
Evan C. Evans	245 N. Osborne St.	Ainsworth, NE 69210
Sheryl S. Graff	43298 875th Rd	Ainsworth, NE 69210
Hoch Funeral Home, Inc.	211 Clark St POB 368	Bassett, NE 68714
Virgil D. Holz	1201 N. 4th St.	O'Neill, NE 68763
George Kamas	664 N. Maple St.	Ainsworth, NE 69210
Dale & Betty Kirkpatrick Family Trust	812 E. 2nd St.	Ainsworth, NE 69210
Daniel Kozisek	827 N. Oak	Ainsworth, NE 69210
Robert S. Miles	404 E. 2nd St.	Ainsworth, NE 69210
Mundhenke Properties LLC (Todd Mundhenke)	P.O. Box 107	Ainsworth, NE 69210
Kenneth & Ruth O'Hare	238 N. Merten St.	Ainsworth, NE 69210
Gerald W. & Beverly Osborn	722 N. Ash St.	Ainsworth, NE 69210
Lorris C. & Linda K. Rice	301 N. Maple St.	Ainsworth, NE 69210
Agnes Richstein	43165 Raven Rd	Ainsworth, NE 69210
JoAnna Mayber	2611 Cedar Berry Road	North Platte, NE 69101
George Rohwer	P.O. Box 25251	Silverthorne, CO 80498
Steven J. & Amy M. Salzman	354 E. 8th St.	Ainsworth, NE 69210
Carolyn E. Schipporeit	335 So. Main St.	Ainsworth, NE 69210
Rhett R. & Carol N. Sears	19414 Willow Creek Cir	Sun City, AZ 85373
Robert A. & Diana G. Sears	P.O. Box 267	Ainsworth, NE 69210
Gordon L. Simonson	84577 Cottonwood Ave.	Purdum, NE 69157-9702
J.W. Simonson	83450 Hawley Flatts Ave.	Dunning, NE 68833-9707
Paulette Ericsson	P.O. Box 784	Soda Springs, ID 83276
Timothy & Michelle Sinsel	P.O. Box 294	Ainsworth, NE 69210
David S. & Susan Spann	434 N. Walnut St.	Ainsworth, NE 69210
Randy Voss	87982 Witness Rd	Long Pine, NE 69217
Patricia & Dwight Daugherty	43505 Rd 806	Merna, NE 68856
Brett Fernau	259 N. Ulrich St.	Ainsworth, NE 69210

NEBRASKA STATE FIRE MARSHAL OCCUPANCY PERMIT

Certificate Number: 402961

Name of Facility: **Cottonwood Villa**
Type of Facility: **Assisted Living**
Location: **450 S Main St., Ainsworth**
Maximum Occupancy: **36 Beds**
Date Issued: **2/24/2015**

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.

