



State of California  
Department of Social Services

Facility Number: 374604614

Effective Date: 02/10/2023

Total Capacity: 6

In accordance with applicable provisions of the Health and Safety Code of California, and its rules and regulations; the Department of Social Services hereby issues

this License to

BELLAHOMECARE LLC

to operate and maintain a

RESIDENTIAL CARE ELDERLY

Name of Facility

ANABELLA HOMECARE  
14249 HIGH VALLEY  
POWAY, CA 92064

This License is not transferable and is granted solely upon the following:

AGE RANGE 60 AND OVER; APPROVED FOR CAPACITY OF 6 NON-AMBULATORY OF WHICH 1 MAY BE BEDRIDDEN; ROOM 4 APPROVED FOR BEDRIDDEN RESIDENT; HOSPICE WAIVER APPROVED FOR 6 RESIDENTS

Client Groups Served:

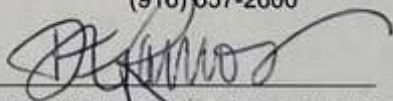
ELDERLY

Complaints regarding services provided in this facility should be directed to:

CCLD Regional Office

(916) 657-2600

Kevin Gaines  
Deputy Director,  
Community Care Licensing Division

  
Authorized Representative of Licensing Agency