

**DEPARTMENT OF HEALTH CARE SERVICES  
LICENSING AND CERTIFICATION SECTION  
STATUS REPORT**

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This is an alphabetical list by county of all non-medical alcoholism and drug abuse recovery or treatment facilities licensed and/or certified by the Department of Health Care Services.

To view facilities within a specific county, simply click on the county name below. For easier browsing and navigation through this report, please access the [\*\*“Page and Bookmark”\*\*](#) View option on your Adobe Reader.

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**COMMENTS?**

We are always looking for ways to improve this document. If you have any comments or suggestions, please e-mail them to [hilda.espinoza@dhcs.ca.gov](mailto:hilda.espinoza@dhcs.ca.gov), or contact the Licensing and Certification Section at (916) 322-2911.

# LEGEND

## CALIFORNIA DEPARTMENT OF HEALTH CARE SERVICES LICENSED RESIDENTIAL FACILITIES AND/OR CERTIFIED ALCOHOL AND DRUG PROGRAMS

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- Program Name:** The facility/program name.
- Legal Name:** The legal name of the entity having the authority and responsibility for the operation of the facility or program.
- Address:** The facility/ program address. The location where services are provided.
- City/State:** Name of the city where the facility/ program is located.
- Record ID:** The identification number issued by the Department of Health Care Services (DHCS), Licensing and Certification Section (LCS), for licensed facilities or certified programs. The last digit tells if the facility/ program is a nonprofit (N) or profit (P) entity.
- Service Type:** Indicates if the facility/program is:
- RES - Indicates facility licensed by the Department of Health Care Services (DHCS), the licensing authority for 24-hour residential nonmedical alcoholism or drug abuse recovery or treatment facilities serving adults.
  - NON - Indicates a nonresidential program which has voluntarily applied to DHCS for alcohol and/ or drug certification.
  - DETOX - Indicates a free standing, 24-hour nonmedical detoxification facility licensed by DHCS.
  - RES-DETOX - Indicates a facility licensed by DHCS to provide 24-hour residential nonmedical alcohol and/or drug recovery, treatment, and detoxification services for adults.
  - DPH - Indicates licensure by the Department of Public Health, the licensing authority for medical alcohol and drug recovery or treatment facilities whose programs are certified by DHCS. Typically, these are Chemical Dependency Recovery Hospitals.
  - DSS - Indicates licensure by the Department of Social Services, the licensing authority for residential facilities for individuals in need of care and supervision whose programs are certified by DHCS. Typically, these are group homes.
  - COR - Indicates the facility is under the jurisdiction of the Department of Corrections and Rehabilitation (locked facility) whose program is certified by DHCS.
  - IMS - Indicates services provided at a licensed residential facility by a health care practitioner that address medical issues associated with either detoxification or the provision of alcoholism or drug abuse recovery or treatment services to assist in the enhancement of treatment services. IMS do not include the provision of general primary medical care. IMS must be related to the patient's process of moving into long-term recovery.
- Resident Capacity:** Indicates the maximum number of residents authorized by DHCS to receive recovery, treatment, or detoxification services at any one time in the residential facility.
- Total Occupancy:** Designates the maximum number of residential facility participants plus any dependent children, staff, or volunteers who may be housed in the facility. This occupancy is approved by the State or local fire authority.

*(The resident capacity and total occupancy are only indicated for licensed residential facilities. Certified nonresidential facilities show "0" as the resident capacity and total occupancy.)*

**Target Population:** Describes the targeted population of the facility or program.

- 1.1 – Co-Ed
- 1.2 – Men Only
- 1.3 - Women Only
- 1.4 - Women/Children
- 1.5 – Youth/Adolescents
- 1.7 – Families
- 1.8 – Dual Diagnosis
- 1.9 – Co-Ed/Children
- 1.10 – Co-Ed/Youth
- 1.11 – Men/Youth
- 1.12 – Women/Youth
- 1.13 – Co-Ed/Child/Dual
- 1.14 – Women/Child/Dual

**Expiration Date:** Expiration date of the facility's current license and/or certification.

State of California, Department of Health Care Services  
Licensed Residential Facilities and/or  
Certified Alcohol and Drug Programs

As of 9/1/2017

Alameda County

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**Program Name:** CHRYSLIS  
Legal Name: HORIZON SERVICES, INCORPORATED  
Address: 3837, 3839, 3841, 3843, 3845 AND 3847 TELEGRAPH AVENUE  
City, State Zip: OAKLAND, CA 94609  
Phone: (510) 450-1190 Fax: (510) 455-3520  
**Record ID:** 010001AN  
Service Type: RES  
Resident Capacity: 20  
Total Occupancy: 20  
Target Population: 1.3  
Expiration Date: 10/31/2017 IMS: No

**Program Name:** CRONIN HOUSE  
Legal Name: HORIZON SERVICES, INCORPORATED  
Address: 2595 DEPOT ROAD  
City, State Zip: HAYWARD, CA 94545  
Phone: (510) 784-5874 Fax: (510) 784-9194  
**Record ID:** 010001BN  
Service Type: RES  
Resident Capacity: 34  
Total Occupancy: 34  
Target Population: 1.1  
Expiration Date: 2/28/2018 IMS: No

**Program Name:** PROJECT EDEN  
Legal Name: HORIZON SERVICES, INCORPORATED  
Address: 22646 2ND STREET  
City, State Zip: HAYWARD, CA 94541  
Phone: (510) 247-8200 Fax: (510) 247-8202  
**Record ID:** 010001CN  
Service Type: NON  
Target Population: 1.5  
Expiration Date: 9/30/2018 IMS: No

**Program Name:** CHERRY HILL DETOXIFICATION SERVICES PROGRAM  
Legal Name: HORIZON SERVICES, INCORPORATED  
Address: 2035 FAIRMONT DRIVE  
City, State Zip: SAN LEANDRO, CA 94578  
Phone: (866) 866-7496 Fax: (510) 351-7630  
**Record ID:** 010001DN  
Service Type: RES-DETOX  
Resident Capacity: 32  
Total Occupancy: 32  
Target Population: 1.1  
Expiration Date: 1/31/2018 IMS: No

**Program Name:** COMMUNITY RECOVERY CENTER EAST  
Legal Name: THE WEST OAKLAND HEALTH COUNCIL  
Address: 7501 INTERNATIONAL BOULEVARD  
City, State Zip: OAKLAND, CA 94621  
Phone: (510) 729-8800 Fax: (510) 569-4965  
**Record ID:** 010005FN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 10/31/2018 IMS: No

**Program Name:** COMMUNITY RECOVERY CENTER WEST  
Legal Name: THE WEST OAKLAND HEALTH COUNCIL  
Address: 700 ADELIN STREET  
City, State Zip: OAKLAND, CA 94607  
Phone: (510) 465-1800 Ext:2055 Fax: (510) 465-1508  
**Record ID:** 010005JN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 9/30/2018 IMS: No

**Program Name:** ORCHID WOMEN'S RECOVERY CENTER  
Legal Name: BI-BETT  
Address: 1342 EAST 27TH STREET  
City, State Zip: OAKLAND, CA 94606  
Phone: (510) 535-0611 Fax: (510) 535-1358  
**Record ID:** 010006AN  
Service Type: RES  
Resident Capacity: 12  
Total Occupancy: 12  
Target Population: 1.4  
Expiration Date: 4/30/2018 IMS: No

**Program Name:** EAST OAKLAND RECOVERY CENTER  
Legal Name: BI-BETT  
Address: 7200 BANCROFT AVENUE,  
SUITE 176  
City, State Zip: OAKLAND, CA 94605  
Phone: (510) 568-2432 Fax: (510) 568-3912  
**Record ID:** 010006DN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 5/31/2019 IMS: No

**Program Name:** C.U.R.A., INC.  
Legal Name: CARNALES UNIDOS REFORMANDO ADICTOS INCORPORATE  
Address: 37437 GLENMOOR DRIVE  
City, State Zip: FREMONT, CA 94536  
Phone: (510) 713-3200 Fax: (510) 713-0684  
**Record ID:** 010010AN  
Service Type: RES  
Resident Capacity: 51  
Total Occupancy: 51  
Target Population: 1.1  
Expiration Date: 1/31/2018 IMS: No

**Program Name:** C.U.R.A., INC. OUTPATIENT PROGRAM  
Legal Name: CARNALES UNIDOS REFORMANDO ADICTOS INCORPORATE  
Address: 37469 AND 37471 GLENMOOR DRIVE  
City, State Zip: FREMONT, CA 94536  
Phone: (510) 713-3202 Fax: (510) 713-0684  
**Record ID:** 010010BN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 9/30/2018 IMS: No

**Program Name:** NEW BRIDGE FOUNDATION  
Legal Name: THE NEW BRIDGE FOUNDATION, INC.  
Address: 1816 AND 1820 SCENIC AVENUE  
City, State Zip: BERKELEY, CA 94709  
Phone: (510) 548-7270 Fax: (510) 665-3176  
**Record ID:** 010013AN  
Service Type: RES-DETOX  
Resident Capacity: 93  
Total Occupancy: 93  
Target Population: 1.1  
Expiration Date: 5/31/2018 IMS: Yes

**Program Name:** NEW BRIDGE FOUNDATION  
Legal Name: THE NEW BRIDGE FOUNDATION, INC.  
Address: 1816 SCENIC AVENUE  
City, State Zip: BERKELEY, CA 94709  
Phone: (510) 548-7270 Fax: (510) 548-1060  
**Record ID:** 010013BN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 7/31/2018 IMS: No

**Program Name:** NEW BRIDGE FOUNDATION, INC.  
Legal Name: THE NEW BRIDGE FOUNDATION, INC.  
Address: 2323 HEARST AVENUE  
City, State Zip: BERKELEY, CA 94709  
Phone: (510) 548-7270 Fax: (510) 665-3176  
**Record ID:** 010013CN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 6/30/2019 IMS: No

**Program Name:** ALAMEDA HOUSE  
Legal Name: THE SOLIDARITY FELLOWSHIP, INC.  
Address: 34401 AND 34413 BLACKSTONE WAY  
City, State Zip: FREMONT, CA 94555  
Phone: (510) 796-7120  
**Record ID:** 010019AN  
Service Type: RES  
Resident Capacity: 12  
Total Occupancy: 14  
Target Population: 1.2  
Expiration Date: 5/31/2018 IMS: No

**Program Name:** PROJECT PRIDE RESIDENTIAL PROGRAM FOR WOMEN & CHILDREN  
Legal Name: EAST BAY COMMUNITY RECOVERY PROJECT  
Address: 2545 SAN PABLO AVENUE  
City, State Zip: OAKLAND, CA 94612  
Phone: (510) 446-7150 Fax: (510) 832-0626  
**Record ID:** 010025BN  
Service Type: RES  
Resident Capacity: 20  
Total Occupancy: 40  
Target Population: 1.4  
Expiration Date: 7/31/2018 IMS: No

**Program Name:** EAST BAY COMMUNITY RECOVERY PROJECT - NONRESIDENTIAL  
Legal Name: EAST BAY COMMUNITY RECOVERY PROJECT  
Address: 2577 SAN PABLO AVENUE  
City, State Zip: OAKLAND, CA 94612  
Phone: (510) 446-7180 Fax: (510) 832-0606  
**Record ID:** 010025CN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 7/31/2018 IMS: No

**Program Name:** HAYWARD OUTPATIENT PROGRAM  
Legal Name: EAST BAY COMMUNITY RECOVERY PROJECT  
Address: 22971 SUTRO STREET  
City, State Zip: HAYWARD, CA 94541  
Phone: (510) 446-7100 Fax: (510) 446-7191  
**Record ID:** 010025EN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 5/31/2019 IMS: No

**Program Name:** WISTAR MEN'S R & R PROGRAM, INC.  
Legal Name: WISTAR R AND R PROGRAM, INC.  
Address: 9735 EMPIRE ROAD  
City, State Zip: OAKLAND, CA 94603  
Phone: (510) 568-9288 Fax: (510) 562-1549  
**Record ID:** 010032EN  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.2  
Expiration Date: 6/30/2019 IMS: No

**Program Name:** AXIS COMMUNITY HEALTH CENTER  
Legal Name: AXIS COMMUNITY HEALTH, INC.  
Address: 6666 OWENS DRIVE  
City, State Zip: PLEASANTON, CA 94588  
Phone: (925) 462-1755 Fax: (925) 485-1265  
**Record ID:** 010046BN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 9/30/2017 IMS: No

**Program Name:** SECOND CHANCE (TRI-CITIES), INC.  
Legal Name: SECOND CHANCE, INC.  
Address: 6330 THORNTON AVENUE, SUITE B  
City, State Zip: NEWARK, CA 94560  
Phone: (510) 792-4357 Fax: (510) 745-1693  
**Record ID:** 010061AN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 5/31/2019 IMS: No

**Program Name:** SECOND CHANCE PHOENIX PROGRAM  
Legal Name: SECOND CHANCE, INC.  
Address: 6330 THORNTON AVENUE,  
SUITE A  
City, State Zip: NEWARK, CA 94560  
Phone: (510) 792-4357 Fax: (510) 745-1670  
**Record ID:** 010061DN  
Service Type: NON  
Target Population: 1.4  
Expiration Date: 5/31/2019 IMS: No

**Program Name:** SECOND CHANCE, INC.  
Legal Name: SECOND CHANCE, INC.  
Address: 107 JACKSON STREET  
City, State Zip: HAYWARD, CA 94544  
Phone: (510) 886-8696 Fax: (510) 745-1693  
**Record ID:** 010061GN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 11/30/2017 IMS: No

**Program Name:** FRIENDSHIP HOUSE AMERICAN INDIAN LODGE  
Legal Name: THE FRIENDSHIP HOUSE ASSOCIATION OF AMERICAN INDIANS  
Address: 1818 38TH AVENUE AND 1815 39TH AVENUE  
City, State Zip: OAKLAND, CA 94601  
Phone: (510) 535-7100 Fax: (510) 535-3445  
**Record ID:** 010062AN  
Service Type: RES  
Resident Capacity: 9  
Total Occupancy: 20  
Target Population: 1.4  
Expiration Date: 2/28/2019 IMS: No

**Program Name:** OPTIONS RECOVERY SERVICES  
Legal Name: OPTIONS RECOVERY SERVICES  
Address: 1931 CENTER STREET  
City, State Zip: BERKELEY, CA 94704  
Phone: (510) 666-9552 Fax: (510) 666-9909  
**Record ID:** 010066AN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 5/31/2019 IMS: No

**Program Name:** OPTIONS- OAKLAND DRUG FREE OUTPATIENT PROGRAM  
Legal Name: OPTIONS RECOVERY SERVICES  
Address: 610 16TH STREET,  
SUITE 312, 314, 315, 318, AND 319  
City, State Zip: OAKLAND, CA 94612-1284  
Phone: (510) 836-9900 Fax: (510) 836-9902  
**Record ID:** 010066CN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 7/31/2018 IMS: No

**Program Name:** MEN ON THE WAY  
Legal Name: WOMEN ON THE WAY RECOVERY CENTER  
Address: 20424 HAVILAND AVENUE  
City, State Zip: HAYWARD, CA 94541  
Phone: (510) 276-3661 Fax: (510) 870-1575  
**Record ID:** 010072AN  
Service Type: RES  
Resident Capacity: 10  
Total Occupancy: 10  
Target Population: 1.2  
Expiration Date: 3/31/2018 IMS: No

**Program Name:** TERRA FIRMA DIVERSION/EDUCATIONAL SERVICES  
Legal Name: TERRA FIRMA DIVERSION/EDUCATIONAL SERVICES  
Address: 30086 MISSION BOULEVARD  
City, State Zip: HAYWARD, CA 94544  
Phone: (510) 675-9362 Fax: (510) 675-9468  
**Record ID:** 010079AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 8/31/2019 IMS: No

**Program Name:** MAGNOLIA WOMEN'S RECOVERY PROGRAM  
Legal Name: MAGNOLIA WOMEN'S RECOVERY PROGRAMS, INC.  
Address: 682 BRIERGATE WAY  
City, State Zip: HAYWARD, CA 94544  
Phone: (510) 487-2910 Fax: (510) 487-2916  
**Record ID:** 010081AN  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 12  
Target Population: 1.14  
Expiration Date: 9/30/2017 IMS: No

**Program Name:** MAGNOLIA WOMEN'S RECOVERY PROGRAMS, INC.  
Legal Name: MAGNOLIA WOMEN'S RECOVERY PROGRAMS, INC.  
Address: 3408 ANDOVER STREET  
City, State Zip: OAKLAND, CA 94606  
Phone: (510) 547-1531 Fax: (510) 547-1543  
**Record ID:** 010081CN  
Service Type: RES  
Resident Capacity: 10  
Total Occupancy: 20  
Target Population: 1.4  
Expiration Date: 2/28/2019 IMS: No



**Program Name:** NATIVE AMERICAN HEALTH CENTER, INC.  
Legal Name: NATIVE AMERICAN HEALTH CENTER, INC.  
Address: 3124 INTERNATIONAL BOULEVARD,  
4TH FLOOR  
City, State Zip: OAKLAND, CA 94601  
Phone: (510) 434-5421 Fax: (510) 437-9574  
**Record ID:** 010090AN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 4/30/2018 IMS: No

**Program Name:** ALAMEDA FAMILY SERVICES  
Legal Name: ALAMEDA FAMILY SERVICES  
Address: 2325 CLEMENT AVENUE  
City, State Zip: ALAMEDA, CA 94501  
Phone: (510) 629-6300  
**Record ID:** 010091AN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 4/30/2018 IMS: No

**Program Name:** FOUNTAIN RECOVERY  
Legal Name: BROTHER AND SISTER PARTNERSHIP  
Address: 5053 PAVO COURT  
City, State Zip: LIVERMORE, CA 94551  
Phone: (925) 292-5583 Fax: (925) 292-0296  
**Record ID:** 010095AP  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 9/30/2018 IMS: No

**Program Name:** CAL-PEP  
Legal Name: CAL-PEP  
Address: 2811 ADELINE STREET  
City, State Zip: OAKLAND, CA 94608  
Phone: (510) 874-7850 Fax: (510) 874-6775  
**Record ID:** 010099AN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 5/31/2018 IMS: No

**Program Name:** MUJERES CON ESPERANZA/WOMEN'S SERVICES ENHANCEMENT PROGRAM  
Legal Name: SOUTHERN ALAMEDA COUNTY COMITE FOR RAZA MENTAL HEALTH  
Address: 3315 INTERNATIONAL BOULEVARD  
City, State Zip: OAKLAND, CA 94601  
Phone: (510) 536-4764 Fax: (510) 291-9591  
**Record ID:** 010101AN  
Service Type: NON  
Target Population: 1.3  
Expiration Date: 10/31/2017 IMS: No

**Program Name:** EL CHANTE RESIDENTIAL HOME  
Legal Name: SOUTHERN ALAMEDA COUNTY COMITE FOR RAZA MENTAL HEALTH  
Address: 425 VERNON STREET  
City, State Zip: OAKLAND, CA 94610  
Phone: (510) 465-4569 Fax: (510) 291-9591  
**Record ID:** 010101CN  
Service Type: RES  
Resident Capacity: 20  
Total Occupancy: 20  
Target Population: 1.2  
Expiration Date: 10/31/2017 IMS: No

**Program Name:** LATINO FAMILY SERVICES CENTER  
Legal Name: SOUTHERN ALAMEDA COUNTY COMITE FOR RAZA MENTAL HEALTH  
Address: 1315 FRUITVALE AVENUE  
City, State Zip: OAKLAND, CA 94601  
Phone: (510) 536-4760 Fax: (510) 291-9591  
**Record ID:** 010101DN  
Service Type: NON  
Target Population: 1.2  
Expiration Date: 4/30/2019 IMS: No

**Program Name:** RECOVERY 55  
Legal Name: St. Mary's Center  
Address: 925 BROCKHURST  
City, State Zip: OAKLAND, CA 94608  
Phone: (510) 923-9600  
**Record ID:** 010102AN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 3/31/2018 IMS: No

**State of California, Department of Health Care Services  
Licensed Residential Facilities and/or  
Certified Alcohol and Drug Programs**

**As of 9/1/2017**

**Alpine County**

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No licensed or certified facilities at this time.

Please check with a neighboring county for services.

State of California, Department of Health Care Services  
Licensed Residential Facilities and/or  
Certified Alcohol and Drug Programs

As of 9/1/2017

Amador County

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**Program Name:** AMADOR COUNTY BEHAVIORAL HEALTH SERVICES  
**Legal Name:** AMADOR COUNTY BEHAVIORAL HEALTH SERVICES  
**Address:** 10877 CONDUCTOR BOULEVARD,  
SUITE 300  
**City, State Zip:** SUTTER CREEK, CA 95685  
**Phone:** (209) 223-6412 **Fax:** (209) 223-3460  
**Record ID:** 030001AN  
**Service Type:** NON  
**Target Population:** 1.1  
**Expiration Date:** 5/31/2019 **IMS:** No

State of California, Department of Health Care Services  
Licensed Residential Facilities and/or  
Certified Alcohol and Drug Programs

As of 9/1/2017

Butte County

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**Program Name:** NORTHERN VALLEY INDIAN HEALTH, INC  
**Legal Name:** NORTHERN VALLEY INDIAN HEALTH, INC.  
**Address:** 845 WEST EAST AVENUE  
**City, State Zip:** CHICO, CA 95926-2002  
**Phone:** (530) 934-4348 Ext:1267 Fax: (530) 934-7688  
**Record ID:** 040018AN  
**Service Type:** NON  
**Target Population:** 1.1  
**Expiration Date:** 5/31/2019 IMS: No

**Program Name:** ESPLANADE HOUSE OUTPATIENT ALCOHOL AND DRUG PROGRAM  
**Legal Name:** COMMUNITY ACTION AGENCY OF BUTTE COUNTY, INC.  
**Address:** 181 EAST SHASTA AVENUE  
**City, State Zip:** CHICO, CA 95973-0523  
**Phone:** (530) 712-2600 Fax: (530) 895-1848  
**Record ID:** 040022AN  
**Service Type:** NON  
**Target Population:** 1.1  
**Expiration Date:** 11/30/2018 IMS: No

**Program Name:** TRI-COUNTY TREATMENT RESIDENTIAL FACILITY  
**Legal Name:** JULIE CHAPMAN  
**Address:** 2740 ORO DAM BOULEVARD EAST  
**City, State Zip:** OROVILLE, CA 95966  
**Phone:** (530) 533-5272 Fax: (530) 533-5821  
**Record ID:** 040024AP  
**Service Type:** RES  
**Resident Capacity:** 39  
**Total Occupancy:** 39  
**Target Population:** 1.2  
**Expiration Date:** 8/31/2019 IMS: No

**Program Name:** TRI-COUNTY TREATMENT OUTPATIENT PROGRAM  
**Legal Name:** JULIE CHAPMAN  
**Address:** 1881 ROBINSON STREET,  
SUITE E  
**City, State Zip:** OROVILLE, CA 95965  
**Phone:** (530) 533-5272 Fax: (530) 533-5821  
**Record ID:** 040024BP  
**Service Type:** NON  
**Target Population:** 1.1  
**Expiration Date:** 10/31/2018 IMS: No

**Program Name:** THERAPEUTIC SOLUTIONS  
**Legal Name:** THERAPEUTIC SOLUTIONS PROFESSIONAL CORPORATION  
**Address:** 3255 ESPLANADE  
**City, State Zip:** CHICO, CA 95973-0255  
**Phone:** (530) 899-3150 Fax: (530) 899-3160  
**Record ID:** 040030AP  
**Service Type:** NON  
**Target Population:** 1.1  
**Expiration Date:** 10/31/2017 IMS: No

**Program Name:** SKYWAY HOUSE SHASTA RETREAT  
Legal Name: SKYWAY HOUSE, LLC  
Address: 3105 ESPLANADE  
City, State Zip: CHICO, CA 95973  
Phone: (530) 342-3046 Fax: (530) 342-1756  
**Record ID:** 040033BP  
Service Type: RES-DETOX  
Resident Capacity: 22  
Total Occupancy: 22  
Target Population: 1.1  
Expiration Date: 10/31/2017 IMS: No

**Program Name:** ELIJAH HOUSE RESTORATION CENTER  
Legal Name: ELIJAH HOUSE S.L.E  
Address: 40 & 42 COYOTE MOON TRAIL  
City, State Zip: OROVILLE, CA 95966  
Phone: (530) 679-0531 Fax: (844) 360-9250  
**Record ID:** 040034AN  
Service Type: RES  
Resident Capacity: 12  
Total Occupancy: 13  
Target Population: 1.2  
Expiration Date: 12/31/2018 IMS: No

State of California, Department of Health Care Services  
Licensed Residential Facilities and/or  
Certified Alcohol and Drug Programs

As of 9/1/2017

Calaveras County

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**Program Name:** CHANGING ECHOES  
Legal Name: CHANGING ECHOES, INC.  
Address: 7632 POOL STATION ROAD  
City, State Zip: ANGELS CAMP, CA 95222  
Phone: (209) 785-3666  
**Record ID:** 050002AN  
Service Type: RES  
Resident Capacity: 30  
Total Occupancy: 30  
Target Population: 1.1  
Expiration Date: 9/30/2017 IMS: No

**Program Name:** THE LAKES TREATMENT CENTER  
Legal Name: THE LAKES TREATMENT CENTER, INC.  
Address: 7260 O'BYRNES FERRY ROAD  
City, State Zip: COPPEROPOLIS, CA 95228  
Phone: (209) 785-8200 Fax: (209) 785-8202  
**Record ID:** 050005AP  
Service Type: RES-DETOX  
Resident Capacity: 76  
Total Occupancy: 80  
Target Population: 1.1  
Expiration Date: 7/31/2018 IMS: Yes

**Program Name:** THE LAKES AT BLACK CREEK  
Legal Name: THE LAKES TREATMENT CENTER, INC.  
Address: 88 SANGUINETTI COURT  
City, State Zip: COPPEROPOLIS, CA 95228  
Phone: (209) 785-2829 Fax: (209) 785-8225  
**Record ID:** 050005BP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 4/30/2019 IMS: Yes

**Program Name:** TURNING POINT  
Legal Name: TURNING POINT OF ARNOLD, LLC  
Address: 1194 CEDAR STREET  
City, State Zip: ARNOLD, CA 95223  
Phone: (209) 822-3117 Fax: (209) 890-7246  
**Record ID:** 050006AP  
Service Type: RES  
Resident Capacity: 12  
Total Occupancy: 12  
Target Population: 1.1  
Expiration Date: 12/31/2017 IMS: No

State of California, Department of Health Care Services  
Licensed Residential Facilities and/or  
Certified Alcohol and Drug Programs

As of 9/1/2017

Colusa County

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**Program Name:** COUNTY OF COLUSA DEPARTMENT OF BEHAVIORAL HEALTH  
**Legal Name:** COUNTY OF COLUSA DEPARTMENT OF BEHAVIORAL HEALTH  
**Address:** 162 EAST CARSON STREET,  
SUITE B  
**City, State Zip:** COLUSA, CA 95932-2880  
**Phone:** (530) 458-0525 **Fax:** (530) 458-8028  
**Record ID:** 060001FN  
**Service Type:** NON  
**Target Population:** 1.1  
**Expiration Date:** 3/31/2018 **IMS:** No



State of California, Department of Health Care Services  
Licensed Residential Facilities and/or  
Certified Alcohol and Drug Programs

As of 9/1/2017

Contra Costa County

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**Program Name:** WEST GAADDS  
Legal Name: BI-BETT  
Address: 3726 BARRETT AVENUE  
City, State Zip: RICHMOND, CA 94804  
Phone: (925) 685-7418 Fax: (958) 685-7005  
**Record ID:** 070001ACN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 11/30/2018 IMS: No

**Program Name:** DIABLO VALLEY RANCH  
Legal Name: BI-BETT  
Address: 11540 MARSH CREEK ROAD  
City, State Zip: CLAYTON, CA 94517  
Phone: (925) 672-5700  
**Record ID:** 070001AN  
Service Type: RES  
Resident Capacity: 58  
Total Occupancy: 59  
Target Population: 1.2  
Expiration Date: 3/31/2018 IMS: No

**Program Name:** FREDERIC OZANAM CENTER  
Legal Name: BI-BETT  
Address: 2931 PROSPECT AVENUE  
City, State Zip: CONCORD, CA 94518  
Phone: (925) 676-4840 Fax: (925) 676-1315  
**Record ID:** 070001BN  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.3  
Expiration Date: 10/31/2018 IMS: No

**Program Name:** PUEBLOS DEL SOL  
Legal Name: BI-BETT  
Address: 2090 COMMERCE AVENUE  
City, State Zip: CONCORD, CA 94520  
Phone: (925) 798-7250  
**Record ID:** 070001CN  
Service Type: RES-DETOX  
Resident Capacity: 20  
Total Occupancy: 20  
Target Population: 1.2  
Expiration Date: 4/30/2018 IMS: No

**Program Name:** SERENITY HOUSE  
Legal Name: BI-BETT  
Address: 11440 MARSH CREEK ROAD  
City, State Zip: CLAYTON, CA 94517  
Phone: (925) 672-5700  
**Record ID:** 070001DN  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.2  
Expiration Date: 3/31/2018 IMS: No

**Program Name:** OAKNOLLS  
Legal Name: BI-BETT  
Address: 11460 MARSH CREEK ROAD  
City, State Zip: CLAYTON, CA 94517  
Phone: (925) 672-5700  
**Record ID:** 070001JN  
Service Type: RES  
Resident Capacity: 5  
Total Occupancy: 5  
Target Population: 1.2  
Expiration Date: 3/31/2018 IMS: No

**Program Name:** FREDERIC OZANAM CENTER - CRYSTAL PALACE  
Legal Name: BI-BETT  
Address: 1390 SANTA CLARA AVENUE  
City, State Zip: CONCORD, CA 94518-1025  
Phone: (925) 676-4840  
**Record ID:** 070001KN  
Service Type: RES  
Resident Capacity: 4  
Total Occupancy: 4  
Target Population: 1.3  
Expiration Date: 10/31/2018 IMS: No

**Program Name:** FREDERIC OZANAM CENTER--RAINBOW VILLAGE  
Legal Name: BI-BETT  
Address: 2901 PROSPECT AVENUE  
City, State Zip: CONCORD, CA 94518  
Phone: (925) 676-4840 Fax: (925) 676-1315  
**Record ID:** 070001LN  
Service Type: RES  
Resident Capacity: 4  
Total Occupancy: 4  
Target Population: 1.3  
Expiration Date: 10/31/2018 IMS: No

**Program Name:** FREDERIC OZANAM CENTER--EMERALD CITY  
Legal Name: BI-BETT  
Address: 2950 PROSPECT AVENUE  
City, State Zip: CONCORD, CA 94518  
Phone: (925) 676-4840  
**Record ID:** 070001NN  
Service Type: RES  
Resident Capacity: 5  
Total Occupancy: 5  
Target Population: 1.3  
Expiration Date: 10/31/2018 IMS: No

**Program Name:** EAST COUNTY COMMUNITY WOMEN'S CENTER  
Legal Name: BI-BETT  
Address: 2, 4, 12 AND 14 DAVI AVENUE  
City, State Zip: PITTSBURG, CA 94565  
Phone: (925) 427-1384  
**Record ID:** 070001RN  
Service Type: RES-DETOX  
Resident Capacity: 15  
Total Occupancy: 15  
Target Population: 1.3  
Expiration Date: 12/31/2018 IMS: No

**Program Name:** EAST COUNTY WOLLAM  
Legal Name: BI-BETT  
Address: 22 DAVI AVENUE  
City, State Zip: PITTSBURG, CA 94565  
Phone: (925) 427-1384  
**Record ID:** 070001SN  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.4  
Expiration Date: 12/31/2018 IMS: No

**Program Name:** EAST COUNTY WOLLAM  
Legal Name: BI-BETT  
Address: 32 DAVI AVENUE  
City, State Zip: PITTSBURG, CA 94565  
Phone: (925) 427-1384 Fax: (925) 458-8996  
**Record ID:** 070001TN  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.4  
Expiration Date: 12/31/2018 IMS: No

**Program Name:** EAST COUNTY GAADDS/ACFF  
Legal Name: BI-BETT  
Address: 1251 CALIFORNIA STREET,  
SUITE 600  
City, State Zip: PITTSBURG, CA 94565  
Phone: (925) 439-5161 Fax: (925) 439-0322  
**Record ID:** 070001UN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 12/31/2018 IMS: No

**Program Name:** EAST COUNTY WOLLAM  
Legal Name: BI-BETT  
Address: 34 DAVI AVENUE  
City, State Zip: PITTSBURG, CA 94565  
Phone: (925) 427-1384 Fax: (925) 458-8996  
**Record ID:** 070001VN  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.4  
Expiration Date: 4/30/2018 IMS: No

**Program Name:** GAADDS CENTRAL/ACFF  
Legal Name: BI-BETT  
Address: 2290 DIAMOND BOULEVARD,  
SUITE 202  
City, State Zip: CONCORD, CA 94520  
Phone: (925) 685-7418 Fax: (925) 685-7005  
**Record ID:** 070001XN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 4/30/2019 IMS: No

**Program Name:** EAST COUNTY WOLLAM  
Legal Name: BI-BETT  
Address: 24 DAVI AVENUE  
City, State Zip: PITTSBURG, CA 94565  
Phone: (925) 427-1384 Fax: (925) 427-4217  
**Record ID:** 070001ZN  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 2/28/2019 IMS: No

**Program Name:** THE RECTORY WOMEN'S RECOVERY CENTER  
Legal Name: UJIMA FAMILY RECOVERY SERVICES  
Address: 1901 CHURCH LANE  
City, State Zip: SAN PABLO, CA 94806  
Phone: (510) 236-3134 Fax: (510) 236-3151  
**Record ID:** 070008AN  
Service Type: RES  
Resident Capacity: 12  
Total Occupancy: 21  
Target Population: 1.4  
Expiration Date: 2/28/2019 IMS: No

**Program Name:** LA CASA UJIMA  
Legal Name: UJIMA FAMILY RECOVERY SERVICES  
Address: 904 MELLUS STREET  
City, State Zip: MARTINEZ, CA 94553  
Phone: (925) 229-0230 Fax: (925) 229-0233  
**Record ID:** 070008BN  
Service Type: RES  
Resident Capacity: 12  
Total Occupancy: 18  
Target Population: 1.4  
Expiration Date: 2/28/2019 IMS: No

**Program Name:** UJIMA WEST OUTPATIENT TREATMENT PROGRAM  
Legal Name: UJIMA FAMILY RECOVERY SERVICES  
Address: 12960 SAN PABLO AVENUE  
City, State Zip: RICHMOND, CA 94805  
Phone: (510) 215-2280 Fax: (925) 215-2283  
**Record ID:** 070008CN  
Service Type: NON  
Target Population: 1.3  
Expiration Date: 2/28/2019 IMS: No

**Program Name:** LA CASA UJIMA  
Legal Name: UJIMA FAMILY RECOVERY SERVICES  
Address: 919 MELLUS STREET  
City, State Zip: MARTINEZ, CA 94553  
Phone: (925) 229-0230 Fax: (925) 229-0233  
**Record ID:** 070008DN  
Service Type: RES  
Resident Capacity: 3  
Total Occupancy: 6  
Target Population: 1.4  
Expiration Date: 2/28/2019 IMS: No

**Program Name:** UJIMA EAST INTENSIVE DAY TREATMENT PROGRAM  
Legal Name: UJIMA FAMILY RECOVERY SERVICES  
Address: 180 EAST LELAND ROAD,  
SUITES A & B  
City, State Zip: PITTSBURG, CA 94565  
Phone: (925) 427-9100 Fax: (925) 427-9102  
**Record ID:** 070008EN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 2/28/2019 IMS: No

**Program Name:** THE RECTORY WOMEN'S RECOVERY CENTER  
Legal Name: UJIMA FAMILY RECOVERY SERVICES  
Address: 1916 CHURCH LANE  
City, State Zip: SAN PABLO, CA 94806  
Phone: (510) 236-3134 Fax: (510) 236-3151  
**Record ID:** 070008HN  
Service Type: RES  
Resident Capacity: 3  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 2/28/2019 IMS: No

**Program Name:** DISCOVERY HOUSE  
Legal Name: CONTRA COSTA COUNTY HEALTH SERVICES DEPARTMENT  
Address: 4645 PACHECO BOULEVARD  
City, State Zip: MARTINEZ, CA 94553  
Phone: (925) 646-9270  
**Record ID:** 070012BN  
Service Type: RES  
Resident Capacity: 40  
Total Occupancy: 40  
Target Population: 1.2  
Expiration Date: 10/31/2017 IMS: No

**Program Name:** CROSSROADS TREATMENT CENTER  
Legal Name: RECOVERY MANAGEMENT SERVICES, INC.  
Address: 2449 PACHECO STREET &  
2118 EAST STREET  
City, State Zip: CONCORD, CA 94520  
Phone: (925) 682-5704 Fax: (925) 685-7835  
**Record ID:** 070018CN  
Service Type: RES-DETOX  
Resident Capacity: 19  
Total Occupancy: 21  
Target Population: 1.1  
Expiration Date: 1/31/2019 IMS: No

**Program Name:** CROSSROADS TREATMENT CENTER  
Legal Name: RECOVERY MANAGEMENT SERVICES, INC.  
Address: 2449 PACHECO STREET  
City, State Zip: CONCORD, CA 94520  
Phone: (925) 682-5704 Fax: (925) 685-7835  
**Record ID:** 070018LN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 11/30/2017 IMS: No

**Program Name:** REACH PROJECT  
Legal Name: R.E.A.C.H. PROJECT  
Address: 1915 D STREET  
City, State Zip: ANTIOCH, CA 94509  
Phone: (925) 754-3673  
**Record ID:** 070024AN  
Service Type: NON  
Target Population: 1.7  
Expiration Date: 6/30/2019 IMS: No

**Program Name:** REACH PROJECT  
Legal Name: R.E.A.C.H. PROJECT  
Address: 3385 MAIN STREET,  
SUITE B  
City, State Zip: OAKLEY, CA 94561  
Phone: (925) 754-3673  
**Record ID:** 070024CN  
Service Type: NON  
Target Population: 1.5  
Expiration Date: 5/31/2018 IMS: No

**Program Name:** R.E.A.C.H. PROJECT  
Legal Name: R.E.A.C.H. PROJECT  
Address: 101 SANDCREEK ROAD  
SUITE B  
City, State Zip: BRENTWOOD, CA 94513-2057  
Phone: (925) 666-8460 Fax: (925) 754-2002  
**Record ID:** 070024DN  
Service Type: NON  
Target Population: 1.10  
Expiration Date: 2/28/2019 IMS: No

**Program Name:** COLE HOUSE  
Legal Name: J. COLE RECOVERY HOMES, INC.  
Address: 1408 A STREET  
City, State Zip: ANTIOCH, CA 94509  
Phone: (925) 978-2873 Fax: (925) 757-0411  
**Record ID:** 070034AP  
Service Type: RES  
Resident Capacity: 16  
Total Occupancy: 17  
Target Population: 1.2  
Expiration Date: 3/31/2018 IMS: No

**Program Name:** STEP/AHEAD ADOLESCENT OUTPATIENT DRUG TREATMENT PROGRAM  
Legal Name: COMMUNITY HEALTH FOR ASIAN AMERICANS  
Address: 207 37TH STREET  
City, State Zip: RICHMOND, CA 94805  
Phone: (510) 233-7555 Fax: (510) 233-4545  
**Record ID:** 070041AN  
Service Type: NON  
Target Population: 1.5  
Expiration Date: 12/31/2017 IMS: No

**Program Name:** RICHMOND HIGH SCHOOL-OATS PROGRAM  
Legal Name: COMMUNITY HEALTH FOR ASIAN AMERICANS  
Address: 1250 23RD STREET  
City, State Zip: RICHMOND, CA 94804  
Phone: (510) 237-8770  
**Record ID:** 070041BN  
Service Type: NON  
Target Population: 1.10  
Expiration Date: 3/31/2018 IMS: No

**Program Name:** GATEWAY ALCOHOL AND DRUG SERVICES  
Legal Name: BAY AREA COMMUNITY RESOURCES, INC.  
Address: 13201 SAN PABLO AVENUE,  
SUITE 206  
City, State Zip: SAN PABLO, CA 94806  
Phone: (510) 235-2887 Fax: (510) 235-2563  
**Record ID:** 070043AN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 5/31/2019 IMS: No

**Program Name:** GMG BEHAVIORAL HEALTH SERVICES  
Legal Name: RICHARD I. GRACER, M.D., A PROFESSIONAL CORPORATION  
Address: 4 CROW CANYON COURT,  
SUITE 210  
City, State Zip: SAN RAMON, CA 94583  
Phone: (925) 277-1100 Fax: (925) 277-1358  
**Record ID:** 070044AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 10/31/2018 IMS: No

**Program Name:** DIABLO VALLEY DRUG AND ALCOHOL SERVICES  
Legal Name: DIABLO VALLEY DRUG AND ALCOHOL SERVICES INC.  
Address: 100 PARK PLACE, SUITE 120B  
City, State Zip: SAN RAMON, CA 94583  
Phone: (925) 289-1430 Fax: (925) 277-1557  
**Record ID:** 070046AP  
Service Type: NON-DETOX  
Target Population: 1.1  
Expiration Date: 6/30/2019 IMS: No

**Program Name:** NEW DIRECTIONS FOR YOUNG ADULTS CA, INC.  
Legal Name: NEW DIRECTIONS FOR YOUNG ADULTS CA, INC.  
Address: 100 LONGBROOK WAY  
#20  
City, State Zip: PLEASANT HILL, CA 94523  
Phone: (866) 611-5450 Ext:231 Fax: (866) 203-0007  
**Record ID:** 070047AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 3/31/2018 IMS: No

State of California, Department of Health Care Services  
Licensed Residential Facilities and/or  
Certified Alcohol and Drug Programs

As of 9/1/2017

Del Norte County

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**Program Name:** DEL NORTE HEALTH AND HUMAN SERVICES/ALCOHOL AND OTHER DRUG PROGRAMS  
**Legal Name:** DEL NORTE COUNTY HEALTH AND HUMAN SERVICES  
**Address:** 1279 2ND STREET,  
SUITE C  
**City, State Zip:** CRESCENT CITY, CA 95531  
**Phone:** (707) 464-4813 **Fax:** (707) 465-1442  
**Record ID:** 080003AN  
**Service Type:** NON  
**Target Population:** 1.1  
**Expiration Date:** 10/31/2017 **IMS:** No

State of California, Department of Health Care Services  
Licensed Residential Facilities and/or  
Certified Alcohol and Drug Programs

As of 9/1/2017

El Dorado County

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**Program Name:** PROGRESS HOUSE MEN'S FACILITY  
**Legal Name:** PROGRESS HOUSE, INC.  
**Address:** 838 BEACH COURT ROAD  
**City, State Zip:** COLOMA, CA 95613  
**Phone:** (530) 626-7252  
**Record ID:** 090002AN  
**Service Type:** RES  
**Resident Capacity:** 28  
**Total Occupancy:** 28  
**Target Population:** 1.2  
**Expiration Date:** 5/31/2018 IMS: No

**Program Name:** PROGRESS HOUSE WOMEN AND CHILDREN'S FACILITY  
**Legal Name:** PROGRESS HOUSE, INC.  
**Address:** 5607 MOUNT MURPHY ROAD  
**City, State Zip:** GARDEN VALLEY, CA 95633  
**Phone:** (530) 333-9460 **Fax:** (530) 333-1019  
**Record ID:** 090002BN  
**Service Type:** RES  
**Resident Capacity:** 20  
**Total Occupancy:** 32  
**Target Population:** 1.4  
**Expiration Date:** 5/31/2018 IMS: No

**Program Name:** PROGRESS HOUSE OUTPATIENT SERVICES  
**Legal Name:** PROGRESS HOUSE, INC.  
**Address:** 2844 COLOMA STREET  
**City, State Zip:** PLACERVILLE, CA 95667  
**Phone:** (530) 642-1715  
**Record ID:** 090002CN  
**Service Type:** NON  
**Target Population:** 1.1  
**Expiration Date:** 5/31/2018 IMS: No

**Program Name:** PROGRESS HOUSE PERINATAL FACILITY  
**Legal Name:** PROGRESS HOUSE, INC.  
**Address:** 5494 PONY EXPRESS TRAIL,  
HOUSE 1, 2, 3, 4 AND 5  
**City, State Zip:** CAMINO, CA 95709  
**Phone:** (530) 644-3758 **Fax:** (530) 644-3782  
**Record ID:** 090002FN  
**Service Type:** RES  
**Resident Capacity:** 16  
**Total Occupancy:** 32  
**Target Population:** 1.4  
**Expiration Date:** 5/31/2018 IMS: No

**Program Name:** PROGRESS HOUSE INC DETOX CENTER  
**Legal Name:** PROGRESS HOUSE, INC.  
**Address:** 2986 COLOMA STREET  
**City, State Zip:** PLACERVILLE, CA 95667-8828  
**Phone:** (530) 626-9240 **Fax:** (530) 626-8992  
**Record ID:** 090002JN  
**Service Type:** RES-DETOX  
**Resident Capacity:** 6  
**Total Occupancy:** 8  
**Target Population:** 1.2  
**Expiration Date:** 4/30/2018 IMS: No



**Program Name:** NEW MORNING YOUTH AND FAMILY SERVICES  
Legal Name: NEW MORNING YOUTH AND FAMILY SERVICES, INC.  
Address: 6765 GREEN VALLEY ROAD  
City, State Zip: PLACERVILLE, CA 95667-8984  
Phone: (530) 622-5551 Fax: (530) 622-5800  
**Record ID:** 090005AN  
Service Type: NON  
Target Population: 1.5  
Expiration Date: 12/31/2018 IMS: No

**Program Name:** TAHOE YOUTH AND FAMILY SERVICES  
Legal Name: TAHOE YOUTH AND FAMILY SERVICES  
Address: 1021 FREMONT AVENUE  
City, State Zip: SOUTH LAKE TAHOE, CA 96150-8136  
Phone: (530) 541-2445  
**Record ID:** 090006AN  
Service Type: NON  
Target Population: 1.5  
Expiration Date: 2/28/2019 IMS: No

**Program Name:** EDCA LIFESKILLS  
Legal Name: EDCA LIFESKILLS  
Address: 893 SPRING STREET  
City, State Zip: PLACERVILLE, CA 95667-4437  
Phone: (530) 622-8193 Fax: (530) 622-4017  
**Record ID:** 090009AN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 11/30/2017 IMS: No

**Program Name:** TAHOE TURNING POINT  
Legal Name: TAHOE TURNING POINT  
Address: 2494 LAKE TAHOE BOULEVARD,  
SUITES B1, B2, AND B5  
City, State Zip: SOUTH LAKE TAHOE, CA 96150-7142  
Phone: (530) 577-5340 Fax: (530) 577-5323  
**Record ID:** 090014DN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 10/31/2017 IMS: No

**Program Name:** ELEVATE ADDICTION SERVICES - PLACERVILLE  
Legal Name: HALCYON HORIZONS, INCORPORATED  
Address: 1364 RUTHHAVEN ROAD  
City, State Zip: PLACERVILLE, CA 95667  
Phone: (530) 295-5550 Fax: (530) 295-5551  
**Record ID:** 090018AN  
Service Type: RES  
Resident Capacity: 24  
Total Occupancy: 27  
Target Population: 1.1  
Expiration Date: 9/30/2018 IMS: No

**Program Name:** ELEVATE ADDICTION SERVICES - SOUTH LAKE TAHOE  
Legal Name: HALCYON HORIZONS, INCORPORATED  
Address: 586 GLORENE AVENUE  
City, State Zip: SOUTH LAKE TAHOE, CA 96150-3907  
Phone: (800) 556-8885  
**Record ID:** 090018CN  
Service Type: RES-DETOX  
Resident Capacity: 70  
Total Occupancy: 75  
Target Population: 1.1  
Expiration Date: 9/30/2018 IMS: No

**Program Name:** SALIM'S HOUSE  
Legal Name: ANOTHER CHOICE ANOTHER CHANCE EL DORADO HILLS  
Address: 2619 WILLOWDALE DRIVE  
City, State Zip: EL DORADO HILLS, CA 95762  
Phone: (916) 509-5919 Fax: (916) 817-1384  
**Record ID:** 090022AN  
Service Type: RES  
Resident Capacity: 5  
Total Occupancy: 5  
Target Population: 1.1  
Expiration Date: 6/30/2018 IMS: No

State of California, Department of Health Care Services  
Licensed Residential Facilities and/or  
Certified Alcohol and Drug Programs

As of 9/1/2017

Fresno County

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**Program Name:** COMPREHENSIVE ADDICTION PROGRAMS, INC.  
**Legal Name:** COMPREHENSIVE ADDICTION PROGRAMS, INCORPORATED  
**Address:** 2445 WEST WHITESBRIDGE ROAD  
**City, State Zip:** FRESNO, CA 93706  
**Phone:** (559) 264-5096  
**Record ID:** 100003AN  
**Service Type:** RES-DETOX  
**Resident Capacity:** 65  
**Total Occupancy:** 65  
**Target Population:** 1.1  
**Expiration Date:** 11/30/2017                      **IMS:** No

**Program Name:** NUESTRA CASA RECOVERY HOME  
**Legal Name:** FRESNO COUNTY HISPANIC COMMISSION ON ALCOHOL AND DRUG ABUSE SERVICES, INC.  
**Address:** 1414 WEST KEARNEY BOULEVARD  
**City, State Zip:** FRESNO, CA 93706  
**Phone:** (559) 485-0501                      **Fax:** (559) 485-1313  
**Record ID:** 100006AN  
**Service Type:** RES  
**Resident Capacity:** 16  
**Total Occupancy:** 18  
**Target Population:** 1.2  
**Expiration Date:** 2/28/2018                      **IMS:** No

**Program Name:** TURTLE LODGE  
**Legal Name:** SIERRA TRIBAL CONSORTIUM, INC.  
**Address:** 610 WEST MCKINLEY AVENUE  
**City, State Zip:** FRESNO, CA 93728  
**Phone:** (559) 445-2691  
**Record ID:** 100007AN  
**Service Type:** RES-DETOX  
**Resident Capacity:** 22  
**Total Occupancy:** 37  
**Target Population:** 1.1  
**Expiration Date:** 5/31/2019                      **IMS:** No

**Program Name:** ELEVENTH HOUR REHABILITATION PROGRAMS  
**Legal Name:** ELEVENTH HOUR REHABILITATION PROGRAMS  
**Address:** 334 SHAW AVENUE,  
SUITE 100  
**City, State Zip:** CLOVIS, CA 93612  
**Phone:** (559) 322-1819                      **Fax:** (559) 454-1928  
**Record ID:** 100009GP  
**Service Type:** NON  
**Target Population:** 1.1  
**Expiration Date:** 9/30/2018                      **IMS:** No

**Program Name:** WESTCARE CALIFORNIA  
**Legal Name:** WESTCARE CALIFORNIA, INC.  
**Address:** 2772 SOUTH MARTIN LUTHER KING BOULEVARD  
**City, State Zip:** FRESNO, CA 93706  
**Phone:** (559) 265-4800                      **Fax:** (559) 265-4808  
**Record ID:** 100010FN  
**Service Type:** RES-DETOX  
**Resident Capacity:** 215  
**Total Occupancy:** 265  
**Target Population:** 1.1  
**Expiration Date:** 1/31/2018                      **IMS:** No

**Program Name:** WESTCARE CALIFORNIA, INC.  
Legal Name: WESTCARE CALIFORNIA, INC.  
Address: 611 EAST BELMONT  
City, State Zip: FRESNO, CA 93701  
Phone: (559) 237-3420 Fax: (559) 213-1935  
**Record ID:** 100010IN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 11/30/2018 IMS: No

**Program Name:** KING OF KINGS MEN'S RECOVERY HOME  
Legal Name: THE KING OF KINGS COMMUNITY CENTER  
Address: 2267 SOUTH GENEVA AVENUE  
City, State Zip: FRESNO, CA 93706  
Phone: (559) 266-6449  
**Record ID:** 100024AN  
Service Type: RES  
Resident Capacity: 10  
Total Occupancy: 10  
Target Population: 1.2  
Expiration Date: 6/30/2018 IMS: No

**Program Name:** KING OF KINGS OUTPATIENT AND PERINATAL SERVICES PROGRAM  
Legal Name: THE KING OF KINGS COMMUNITY CENTER  
Address: 2302 MARTIN LUTHER KING BOULEVARD  
City, State Zip: FRESNO, CA 93706-4135  
Phone: (559) 268-9559 Fax: (559) 268-9559  
**Record ID:** 100024BN  
Service Type: NON  
Target Population: 1.3  
Expiration Date: 6/30/2018 IMS: No

**Program Name:** THE AVANTI PROGRAM  
Legal Name: KINGS VIEW  
Address: 1822 JENSEN AVENUE,  
SUITE 102  
City, State Zip: SANGER, CA 93657  
Phone: (559) 875-6300  
**Record ID:** 100026AN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 8/31/2018 IMS: No

**Program Name:** QUEST HOUSE  
Legal Name: TURNING POINT OF CENTRAL CALIFORNIA, INC.  
Address: 2731 WEST OLIVE AVENUE  
City, State Zip: FRESNO, CA 93728  
Phone: (559) 233-5096 Fax: (559) 233-5099  
**Record ID:** 100028EN  
Service Type: RES  
Resident Capacity: 30  
Total Occupancy: 30  
Target Population: 1.1  
Expiration Date: 2/28/2019 IMS: No

**Program Name:** FIRST STREET CENTER OUTPATIENT PROGRAM  
Legal Name: TURNING POINT OF CENTRAL CALIFORNIA, INC.  
Address: 3636 NORTH FIRST STREET,  
SUITE 135  
City, State Zip: FRESNO, CA 93726-6818  
Phone: (559) 225-1464  
**Record ID:** 100028HN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 7/31/2019 IMS: No

**Program Name:** SPIRIT OF WOMAN OF CALIFORNIA  
Legal Name: SPIRIT OF WOMAN OF CALIFORNIA, INC.  
Address: 327 WEST BELMONT AVENUE  
City, State Zip: FRESNO, CA 93728  
Phone: (559) 233-4353  
**Record ID:** 100036AN  
Service Type: RES  
Resident Capacity: 63  
Total Occupancy: 208  
Target Population: 1.14  
Expiration Date: 3/31/2018 IMS: No

**Program Name:** FRESNO NEW CONNECTION, INC.  
Legal Name: FRESNO NEW CONNECTION, INC.  
Address: 4411 NORTH CEDAR AVENUE,  
SUITE 108  
City, State Zip: FRESNO, CA 93726  
Phone: (559) 248-1548 Fax: (559) 248-1530  
**Record ID:** 100039AN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 11/30/2018 IMS: No

**Program Name:** FRESNO FIRST  
Legal Name: MENTAL HEALTH SYSTEMS, INC.  
Address: 2550 WEST CLINTON AVENUE  
City, State Zip: FRESNO, CA 93705-4201  
Phone: (858) 573-2600 Fax: (559) 441-0354  
**Record ID:** 100042CN  
Service Type: RES  
Resident Capacity: 60  
Total Occupancy: 85  
Target Population: 1.3  
Expiration Date: 9/30/2018 IMS: No

**Program Name:** FAMILY & YOUTH ALTERNATIVES  
Legal Name: MENTAL HEALTH SYSTEMS, INC.  
Address: 3122 NORTH MILLBROOK AVENUE,  
SUITE A  
City, State Zip: FRESNO, CA 93703  
Phone: (858) 573-2600 Fax: (559) 600-4876  
**Record ID:** 100042DN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 4/30/2018 IMS: No

**Program Name:** FLOYD FARROW SUBSTANCE ABUSE UNIT  
Legal Name: MENTAL HEALTH SYSTEMS, INC.  
Address: 3333 EAST AMERICAN AVENUE,  
BUILDING 707 AND 709  
City, State Zip: FRESNO, CA 93725  
Phone: (559) 600-4876 Fax: (559) 495-3650  
**Record ID:** 100042EN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 7/31/2018 IMS: No

**Program Name:** VISIONS FOR YOUTH  
Legal Name: MENTAL HEALTH SYSTEMS, INC.  
Address: 4939 E. YALE AVENUE  
City, State Zip: FRESNO, CA 93727  
Phone: (559) 977-1931 Fax: (559) 225-9174  
**Record ID:** 100042FN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 1/31/2018 IMS: No

**Program Name:** PROMESA BEHAVIORIAL HEALTH OUTPATIENT DRUG AND ALCOHOL PROGRAM  
**Legal Name:** PROMESA BEHAVIORIAL HEALTH  
**Address:** 7120 N. MARKS AVENUE,  
SUITE 110  
**City, State Zip:** FRESNO, CA 93711  
**Phone:** (559) 981-5534 **Fax:** (559) 320-5893  
**Record ID:** 100043BN  
**Service Type:** NON  
**Target Population:** 1.1  
**Expiration Date:** 5/31/2018 **IMS:** No

**Program Name:** PANACEA SERVICES, INC. - COMPREHENSIVE DRUG AND ALCOHOL TREATMENT (CDAT)  
**Legal Name:** PANACEA SERVICES, INC.  
**Address:** 3152 NORTH MILLBROOK,  
SUITES D AND E  
**City, State Zip:** FRESNO, CA 93703  
**Phone:** (559) 241-0364 **Fax:** (559) 241-0342  
**Record ID:** 100052CP  
**Service Type:** NON  
**Target Population:** 1.5  
**Expiration Date:** 1/31/2019 **IMS:** No

**Program Name:** EMINENCE HEALTHCARE, INC.  
**Legal Name:** EMINENCE HEALTHCARE, INC.  
**Address:** 740 WEST NORTH AVENUE,  
ANNEX 1 AND 5A1  
**City, State Zip:** REEDLEY, CA 93654  
**Phone:** (559) 917-1635 **Fax:** (559) 221-8101  
**Record ID:** 100063DP  
**Service Type:** NON  
**Target Population:** 1.5  
**Expiration Date:** 3/31/2018 **IMS:** No

**Program Name:** UNIVERSAL HEALTH NETWORK AND SYSTEMS, INC.  
**Legal Name:** UNIVERSAL HEALTH NETWORK AND SYSTEMS, INC.  
**Address:** 3170 NORTH CHESTNUT AVENUE,  
SUITE 105  
**City, State Zip:** FRESNO, CA 93703  
**Phone:** (559) 252-5150 **Fax:** (559) 252-5156  
**Record ID:** 100066AP  
**Service Type:** NON  
**Target Population:** 1.1  
**Expiration Date:** 2/28/2019 **IMS:** No

**Program Name:** UNIVERSAL HEALTH NETWORK AND SYSTEMS, INC.  
**Legal Name:** UNIVERSAL HEALTH NETWORK AND SYSTEMS, INC.  
**Address:** 625 AND 627 EAST KEATS AVENUE  
**City, State Zip:** FRESNO, CA 93710-7000  
**Phone:** (559) 252-5150 **Fax:** (559) 252-5156  
**Record ID:** 100066BP  
**Service Type:** RES-DETOX  
**Resident Capacity:** 12  
**Total Occupancy:** 12  
**Target Population:** 1.9  
**Expiration Date:** 5/31/2019 **IMS:** No

**Program Name:** HERNDON RECOVERY CENTER  
**Legal Name:** SATNAM S. ATWAL, MD  
**Address:** 7055 NORTH CHESTNUT AVENUE,  
SUITE 101  
**City, State Zip:** FRESNO, CA 93720  
**Phone:** (559) 298-5111 **Fax:** (559) 298-3111  
**Record ID:** 100074AP  
**Service Type:** NON  
**Target Population:** 1.5  
**Expiration Date:** 2/28/2018 **IMS:** No

**Program Name:** HERNDON RECOVERY CENTER RESIDENTIAL  
Legal Name: SATNAM S. ATWAL, MD  
Address: 2631 EAST JORDAN AVENUE  
City, State Zip: FRESNO, CA 93720  
Phone: (559) 298-5111 Fax: (559) 298-3111  
**Record ID:** 100074BP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 5/31/2018 IMS: No

**Program Name:** HERNDON RECOVERY CENTER  
Legal Name: SATNAM S. ATWAL, MD  
Address: 7361 NO. SIERRA VISTA  
City, State Zip: FRESNO, CA 93720  
Phone: (559) 298-5111 Fax: (559) 298-3111  
**Record ID:** 100074CP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 5/31/2018 IMS: No

**Program Name:** TOUCHSTONE RECOVERY CENTER  
Legal Name: RICHARD V. GUZZETTA, M.D.  
Address: 724 MEDICAL CENTER DRIVE EAST,  
SUITE 103  
City, State Zip: CLOVIS, CA 93611  
Phone: (559) 298-6711 Fax: (559) 298-6609  
**Record ID:** 100076AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 6/30/2018 IMS: No

**Program Name:** PATHWAYS TO RECOVERY  
Legal Name: FRESNO COUNTY DEPARTMENT OF BEHAVIORAL HEALTH  
Address: 515 SOUTH CEDAR AVENUE  
City, State Zip: FRESNO, CA 93702  
Phone: (559) 600-6068 Fax: (559) 453-8916  
**Record ID:** 100081AN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 8/31/2017 IMS: No

**Program Name:** DELTA CARE, INC.  
Legal Name: DELTA CARE, INC.  
Address: 4705 NORTH SONORA AVENUE,  
SUITE 113A  
City, State Zip: FRESNO, CA 93722  
Phone: (559) 289-6785  
**Record ID:** 100082AN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 5/31/2019 IMS: No

**Program Name:** CENTRAL CALIFORNIA RECOVERY, INC.  
Legal Name: CENTRAL CALIFORNIA RECOVERY, INCORPORATED  
Address: 1204 WEST SHAW AVENUE,  
SUITE 102  
City, State Zip: FRESNO, CA 93711-3708  
Phone: (559) 681-1947 Fax: (559) 486-6294  
**Record ID:** 100087AN  
Service Type: NON  
Target Population: 1.5  
Expiration Date: 12/31/2018 IMS: No

**Program Name:** DUNAMIS INC., GROUP HOME  
Legal Name: DUNAMIS, INC. GROUP HOME  
Address: 4991 EAST MCKINLEY AVENUE,  
SUITE 112 AND 113  
City, State Zip: FRESNO, CA 93727  
Phone: (281) 782-5887  
**Record ID:** 100091AN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 6/30/2018 IMS: No

**Program Name:** ASI COUNSELING AND PROFESSIONAL SERVICES, INC.  
Legal Name: ASI COUNSELING AND PROFESSIONAL SERVICES, INC.  
Address: 2005 NORTH WISHON AVENUE  
City, State Zip: FRESNO, CA 93704  
Phone: (559) 499-1011  
**Record ID:** 100092AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 8/31/2018 IMS: No

**Program Name:** TRANSITIONS CHILDRENS SERVICES: OUTPATIENT & CONTINUING CARE SERVICES  
Legal Name: TRANSITIONS CHILDREN'S SERVICES  
Address: 1945 N. HELM AVENUE,  
SUITE 101  
City, State Zip: FRESNO, CA 93727  
Phone: (559) 222-5437 Fax: (559) 222-5445  
**Record ID:** 100093AN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 10/31/2017 IMS: No

**Program Name:** FIRST STEPS RECOVERY  
Legal Name: TRUE NORTH DETOX, LLC  
Address: 21877 AND 22051 OAK HILL LANE  
City, State Zip: CLOVIS, CA 93619  
Phone: (559) 299-5100 Fax: (360) 323-7285  
**Record ID:** 100094AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 8  
Target Population: 1.1  
Expiration Date: 7/31/2018 IMS: No

**Program Name:** THE LIVING CENTER OF FRESNO, INC.  
Legal Name: THE LIVING CENTERS OF FRESNO, INC.  
Address: 4576 E. SHIELDS AVENUE  
City, State Zip: FRESNO, CA 93726  
Phone: (831) 345-5024  
**Record ID:** 100095AP  
Service Type: RES-DETOX  
Resident Capacity: 16  
Total Occupancy: 16  
Target Population: 1.1  
Expiration Date: 7/31/2017 IMS: No



State of California, Department of Health Care Services  
Licensed Residential Facilities and/or  
Certified Alcohol and Drug Programs

As of 9/1/2017

Glenn County

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**Program Name:** GLENN COUNTY SUBSTANCE ABUSE PROGRAM  
**Legal Name:** GLENN COUNTY HEALTH SERVICES  
**Address:** 1187 EAST SOUTH STREET  
**City, State Zip:** ORLAND, CA 95963-1640  
**Phone:** (530) 865-1146 **Fax:** (530) 934-6592  
**Record ID:** 110001AN  
**Service Type:** NON  
**Target Population:** 1.1  
**Expiration Date:** 5/31/2019 **IMS:** No

**Program Name:** NORTHERN VALLEY INDIAN HEALTH, INC.  
**Legal Name:** NORTHERN VALLEY INDIAN HEALTH, INC.  
**Address:** 207 NORTH BUTTE STREET  
**City, State Zip:** WILLOWS, CA 95988  
**Phone:** (530) 934-4641 **Fax:** (530) 934-7688  
**Record ID:** 110002AN  
**Service Type:** NON  
**Target Population:** 1.1  
**Expiration Date:** 5/31/2019 **IMS:** No

State of California, Department of Health Care Services  
Licensed Residential Facilities and/or  
Certified Alcohol and Drug Programs

As of 9/1/2017

Humboldt County

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**Program Name:** HUMBOLDT RECOVERY CENTER  
**Legal Name:** HUMBOLDT RECOVERY CENTER, INCORPORATED  
**Address:** 1303 11TH STREET AND  
1024 N STREET  
**City, State Zip:** EUREKA, CA 95501  
**Phone:** (707) 443-4237  
**Record ID:** 120001AN  
**Service Type:** RES  
**Resident Capacity:** 20  
**Total Occupancy:** 22  
**Target Population:** 1.2  
**Expiration Date:** 10/31/2017 IMS: No

**Program Name:** HUMBOLDT RECOVERY CENTER  
**Legal Name:** HUMBOLDT RECOVERY CENTER, INCORPORATED  
**Address:** 905 L STREET, AND  
1116 AND 1120 9TH STREET  
**City, State Zip:** EUREKA, CA 95502  
**Phone:** (707) 443-0514 Fax: (707) 443-0514  
**Record ID:** 120001BN  
**Service Type:** RES  
**Resident Capacity:** 21  
**Total Occupancy:** 23  
**Target Population:** 1.2  
**Expiration Date:** 1/31/2019 IMS: No

**Program Name:** HUMBOLDT RECOVERY CENTER  
**Legal Name:** HUMBOLDT RECOVERY CENTER, INCORPORATED  
**Address:** 944 N STREET AND  
1219 10TH STREET  
**City, State Zip:** EUREKA, CA 95501  
**Phone:** (707) 443-4237 Fax: (707) 442-1191  
**Record ID:** 120001DN  
**Service Type:** RES  
**Resident Capacity:** 16  
**Total Occupancy:** 18  
**Target Population:** 1.3  
**Expiration Date:** 2/28/2019 IMS: No

**Program Name:** CROSSROADS  
**Legal Name:** NORTH COAST SUBSTANCE ABUSE COUNCIL  
**Address:** 1205 AND 1210 MYRTLE AVENUE  
**City, State Zip:** EUREKA, CA 95501  
**Phone:** (707) 445-0869 Fax: (707) 445-0826  
**Record ID:** 120005AN  
**Service Type:** RES  
**Resident Capacity:** 22  
**Total Occupancy:** 22  
**Target Population:** 1.1  
**Expiration Date:** 1/31/2018 IMS: No

**Program Name:** SINGING TREES RECOVERY CENTER  
**Legal Name:** SINGING TREES RECOVERY CENTER  
**Address:** 2061 HIGHWAY 101  
**City, State Zip:** GARBERVILLE, CA 95542  
**Phone:** (707) 247-3495 Fax: (707) 247-3334  
**Record ID:** 120008AP  
**Service Type:** RES-DETOX  
**Resident Capacity:** 20  
**Total Occupancy:** 23  
**Target Population:** 1.1  
**Expiration Date:** 2/28/2018 IMS: No

**Program Name:** ALCOHOL DRUG CARE SERVICES RESIDENTIAL TREATMENT PROGRAM  
Legal Name: ALCOHOL/DRUG CARE SERVICE'S, INC.  
Address: 1321, 1335 C STREET AND  
217 14TH STREET  
City, State Zip: EUREKA, CA 95501  
Phone: (707) 445-1391  
**Record ID:** 120009AN  
Service Type: RES-DETOX  
Resident Capacity: 23  
Total Occupancy: 25  
Target Population: 1.1  
Expiration Date: 6/30/2019 IMS: No

**Program Name:** ADCS WOMEN'S RESIDENTIAL TREATMENT PROGRAM  
Legal Name: ALCOHOL/DRUG CARE SERVICE'S, INC.  
Address: 1742 J STREET  
City, State Zip: EUREKA, CA 95501  
Phone: (707) 444-2232 Fax: ( ) -  
**Record ID:** 120009CN  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 8  
Target Population: 1.12  
Expiration Date: 3/31/2018 IMS: No

**Program Name:** OUTPATIENT TREATMENT SERVICES  
Legal Name: HUMBOLDT COUNTY ALCOHOL AND OTHER DRUG PROGRAMS  
Address: 720 WOOD STREET,  
ROOMS 112, 115, 116, 117, 118, 119, 121, 123, 127, 128, 130 AND 734  
City, State Zip: EUREKA, CA 95501  
Phone: (707) 476-4070 Fax: (707) 446-3776  
**Record ID:** 120010AN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 12/31/2017 IMS: No

**Program Name:** HEALTHY MOMS PROGRAM  
Legal Name: HUMBOLDT COUNTY ALCOHOL & OTHER DRUG PROGRAMS  
Address: 2910 H STREET  
City, State Zip: EUREKA, CA 95501  
Phone: (707) 441-5220  
**Record ID:** 120011AN  
Service Type: NON  
Target Population: 1.4  
Expiration Date: 9/30/2017 IMS: No

**Program Name:** UNITED INDIAN HEALTH SERVICES, INC.-CHILD & FAMILY SERVICES DEPT.  
Legal Name: UNITED INDIAN HEALTH SERVICES, INC.  
Address: 1600 WEEOT WAY  
City, State Zip: ARCATA, CA 95521  
Phone: (707) 825-5060 Fax: (707) 825-6753  
**Record ID:** 120015AN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 10/31/2017 IMS: No

**State of California, Department of Health Care Services  
Licensed Residential Facilities and/or  
Certified Alcohol and Drug Programs**

**As of 9/1/2017**

**Imperial County**

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No licensed or certified facilities at this time.

Please check with a neighboring county for services.

State of California, Department of Health Care Services  
Licensed Residential Facilities and/or  
Certified Alcohol and Drug Programs

As of 9/1/2017

Inyo County

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**Program Name:** ALPINE RECOVERY CENTER  
**Legal Name:** ROBERT B. DIBBLE  
**Address:** 375 EAST LINE STREET  
**City, State Zip:** BISHOP, CA 93514  
**Phone:** (760) 873-4357  
**Record ID:** 140001AP  
**Service Type:** NON  
**Target Population:** 1.1  
**Expiration Date:** 12/31/2017                      IMS:      No

**Program Name:** INYO COUNTY  
**Legal Name:** INYO COUNTY HEALTH AND HUMAN SERVICES  
**Address:** 162 GROVE STREET  
**City, State Zip:** BISHOP, CA 93514  
**Phone:** (760) 873-6533                      Fax:      (760) 873-3277  
**Record ID:** 140002AN  
**Service Type:** NON  
**Target Population:** 1.1  
**Expiration Date:** 6/30/2018                      IMS:      No

State of California, Department of Health Care Services  
Licensed Residential Facilities and/or  
Certified Alcohol and Drug Programs

As of 9/1/2017

Kern County

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**Program Name:** KCHC OUTPATIENT RECOVERY SERVICES  
**Legal Name:** KERN COUNTY HISPANIC COMMISSION ON ALCOHOL AND DRUG ABUSE SERVICES, INC.  
**Address:** 1400 EASTON DRIVE,  
SUITE 151  
**City, State Zip:** BAKERSFIELD, CA 93309  
**Phone:** (661) 634-9877 **Fax:** (661) 864-0198  
**Record ID:** 150003HN  
**Service Type:** NON  
**Target Population:** 1.1  
**Expiration Date:** 4/30/2019 **IMS:** No

**Program Name:** JASON'S RETREAT/CAPISTRANO COMMUNITY FOR WOMEN  
**Legal Name:** BAKERSFIELD RECOVERY SERVICES INC.  
**Address:** 600 BERNARD STREET AND  
2000 BAKER STREET  
**City, State Zip:** BAKERSFIELD, CA 93305  
**Phone:** (661) 325-1817 **Fax:** (661) 325-3929  
**Record ID:** 150004AN  
**Service Type:** RES-DETOX  
**Resident Capacity:** 54  
**Total Occupancy:** 59  
**Target Population:** 1.1  
**Expiration Date:** 2/28/2019 **IMS:** No

**Program Name:** CAPISTRANO LINCOLN STREET RETREAT  
**Legal Name:** BAKERSFIELD RECOVERY SERVICES INC.  
**Address:** 708 LINCOLN STREET  
**City, State Zip:** BAKERSFIELD, CA 93305  
**Phone:** (661) 869-1795 **Fax:** (661) 869-1794  
**Record ID:** 150004GN  
**Service Type:** RES  
**Resident Capacity:** 14  
**Total Occupancy:** 26  
**Target Population:** 1.4  
**Expiration Date:** 9/30/2017 **IMS:** No

**Program Name:** BROTHERHOOD CENTER  
**Legal Name:** COMMUNITY SERVICE ORGANIZATION, BEHAVIORAL HEALTH PROGRAMS  
**Address:** 1124 BAKER STREET  
**City, State Zip:** BAKERSFIELD, CA 93305  
**Phone:** (661) 327-9376 **Fax:** (661) 327-7349  
**Record ID:** 150011BN  
**Service Type:** NON  
**Target Population:** 1.1  
**Expiration Date:** 7/31/2018 **IMS:** No

**Program Name:** CENTRO DE COLORES  
**Legal Name:** COMMUNITY SERVICE ORGANIZATION, BEHAVIORAL HEALTH PROGRAMS  
**Address:** 10420 MAIN STREET  
**City, State Zip:** LAMONT, CA 93241  
**Phone:** (661) 845-3753 **Fax:** (661) 845-4866  
**Record ID:** 150011CN  
**Service Type:** NON  
**Target Population:** 1.1  
**Expiration Date:** 7/31/2018 **IMS:** No

**Program Name:** KEN KENNER SUBSTANCE ABUSE TREATMENT CENTER  
Legal Name: TURNING POINT OF CENTRAL CALIFORNIA, INC.  
Address: 1100 UNION AVENUE  
City, State Zip: BAKERSFIELD, CA 93307  
Phone: (661) 861-6111 Fax: (661) 861-6161  
**Record ID:** 150013BN  
Service Type: RES  
Resident Capacity: 100  
Total Occupancy: 100  
Target Population: 1.1  
Expiration Date: 1/31/2019 IMS: No

**Program Name:** THE NAPD GENESIS PROGRAM (NEW ADVANCES FOR PEOPLE WITH DISABILITIES)  
Legal Name: NEW ADVANCES FOR PEOPLE WITH DISABILITIES  
Address: 1909 16TH STREET  
City, State Zip: BAKERSFIELD, CA 93301  
Phone: (661) 325-3003 Fax: (661) 325-2344  
**Record ID:** 150025AN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 2/28/2018 IMS: No

**Program Name:** WESTCARE CALIFORNIA  
Legal Name: WESTCARE CALIFORNIA, INC.  
Address: 2901 & 2909 SOUTH H STREET  
City, State Zip: BAKERSFIELD, CA 93304  
Phone: (661) 398-4303 Fax: (661) 398-4306  
**Record ID:** 150029AN  
Service Type: RES  
Resident Capacity: 35  
Total Occupancy: 35  
Target Population: 1.2  
Expiration Date: 1/31/2018 IMS: No

**Program Name:** WESTCARE BAKERSFIELD OUTPATIENT  
Legal Name: WESTCARE CALIFORNIA, INC.  
Address: 2901 SOUTH H STREET  
City, State Zip: BAKERSFIELD, CA 93304  
Phone: (661) 398-4303 Fax: (559) 453-7827  
**Record ID:** 150029DN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 12/31/2018 IMS: No

**Program Name:** ASPIRE COUNSELING SERVICES  
Legal Name: ASPIRE COUNSELING SERVICES, INC.  
Address: 9830 BRIMHALL ROAD  
City, State Zip: BAKERSFIELD, CA 93312  
Phone: (661) 213-6990 Fax: (661) 396-7302  
**Record ID:** 150059AP  
Service Type: NON-DETOX  
Target Population: 1.1  
Expiration Date: 10/31/2017 IMS: No

**Program Name:** CASA AURORA  
Legal Name: MENTAL HEALTH SYSTEMS, INC.  
Address: 1932 JESSIE STREET  
City, State Zip: BAKERSFIELD, CA 93305-4114  
Phone: (661) 447-4666  
**Record ID:** 150060CN  
Service Type: NON  
Target Population: 1.3  
Expiration Date: 11/30/2017 IMS: No

**Program Name:** ACTION FAMILY COUNSELING, INC.  
Legal Name: ACTION FAMILY COUNSELING, INC.  
Address: 3801 BUCK OWENS BOULEVARD,  
SUITES 105 - 107  
City, State Zip: BAKERSFIELD, CA 93308  
Phone: (661) 325-4357 Fax: (661) 325-4345  
**Record ID:** 150062AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 2/28/2018 IMS: No

**Program Name:** ACTION FAMILY COUNSELING, INC.  
Legal Name: ACTION FAMILY COUNSELING, INC.  
Address: 407 HELEN WAY, 9301 OPAL STREET AND  
512 STABLE AVENUE  
City, State Zip: BAKERSFIELD, CA 93307  
Phone: (800) 367-8336 Fax: (661) 297-9701  
**Record ID:** 150062BP  
Service Type: RES  
Resident Capacity: 30  
Total Occupancy: 30  
Target Population: 1.1  
Expiration Date: 4/30/2018 IMS: No

**Program Name:** SYNERGY RECOVERY SERVICES  
Legal Name: SYNERGY RECOVERY SERVICES  
Address: 4100 EMPIRE DRIVE,  
#120  
City, State Zip: BAKERSFIELD, CA 93309  
Phone: (661) 878-9100 Fax: (661) 878-9101  
**Record ID:** 150069AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 8/31/2018 IMS: No

**Program Name:** BAKERSFIELD AMERICAN INDIAN HEALTH PROJECT  
Legal Name: BAKERSFIELD AMERICAN INDIAN HEALTH PROJECT  
Address: 1617 30TH STREET  
City, State Zip: BAKERSFIELD, CA 93301  
Phone: (661) 327-4030 Fax: (661) 327-0145  
**Record ID:** 150070AN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 8/31/2018 IMS: No

**Program Name:** OREGON STREET RECOVERY CENTER  
Legal Name: LEGACY VILLAGE, LLC  
Address: 1620 OREGON STREET  
City, State Zip: BAKERSFIELD, CA 93305  
Phone: (661) 843-7360 Fax: (661) 374-4897  
**Record ID:** 150071AP  
Service Type: RES  
Resident Capacity: 20  
Total Occupancy: 20  
Target Population: 1.1  
Expiration Date: 12/31/2018 IMS: No



State of California, Department of Health Care Services  
Licensed Residential Facilities and/or  
Certified Alcohol and Drug Programs

As of 9/1/2017

Kings County

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**Program Name:** ALCOHOL AND DRUG EDUCATION AND COUNSELING CENTER  
**Legal Name:** KINGS VIEW  
**Address:** 1393 BAILEY DRIVE, ROOMS 106, 149, 198 AND 207  
**City, State Zip:** HANFORD, CA 93230  
**Phone:** (559) 582-4481 **Fax:** (559) 582-6547  
**Record ID:** 160004AN  
**Service Type:** NON  
**Target Population:** 1.1  
**Expiration Date:** 5/31/2019 **IMS:** No

**Program Name:** CHAMPIONS RECOVERY ALTERNATIVE PROGRAMS, INC.  
**Legal Name:** CHAMPIONS RECOVERY ALTERNATIVE PROGRAMS, INC.  
**Address:** 623, 629 AND 700 NORTH IRWIN STREET  
**City, State Zip:** HANFORD, CA 93230  
**Phone:** (559) 583-9300 **Fax:** (559) 583-9307  
**Record ID:** 160005AN  
**Service Type:** NON  
**Target Population:** 1.5  
**Expiration Date:** 8/31/2019 **IMS:** No

**Program Name:** HANNAH'S HOUSE  
**Legal Name:** CHAMPIONS RECOVERY ALTERNATIVE PROGRAMS, INC.  
**Address:** 222 WEST KEITH STREET  
**City, State Zip:** HANFORD, CA 93230  
**Phone:** (559) 583-7800 **Fax:** (559) 583-7890  
**Record ID:** 160005BN  
**Service Type:** RES  
**Resident Capacity:** 15  
**Total Occupancy:** 20  
**Target Population:** 1.14  
**Expiration Date:** 7/31/2018 **IMS:** No

**Program Name:** SAMUEL'S HOUSE  
**Legal Name:** CHAMPIONS RECOVERY ALTERNATIVE PROGRAMS, INC.  
**Address:** 11517 15TH AVENUE  
**City, State Zip:** LEMOORE, CA 93245  
**Phone:** (559) 583-7800 **Fax:** (559) 583-9307  
**Record ID:** 160005CN  
**Service Type:** RES  
**Resident Capacity:** 49  
**Total Occupancy:** 49  
**Target Population:** 1.2  
**Expiration Date:** 2/28/2019 **IMS:** No

**Program Name:** WESTCARE  
**Legal Name:** WESTCARE CALIFORNIA, INC.  
**Address:** 410 EAST 7TH STREET  
SUITES 5, 7 AND 9  
**City, State Zip:** HANFORD, CA 93230  
**Phone:** (559) 251-4800  
**Record ID:** 160006CN  
**Service Type:** NON  
**Target Population:** 1.5  
**Expiration Date:** 5/31/2018 **IMS:** No

State of California, Department of Health Care Services  
Licensed Residential Facilities and/or  
Certified Alcohol and Drug Programs

As of 9/1/2017

Lake County

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**Program Name:** CLEARLAKE CLINIC  
Legal Name: LAKE COUNTY ALCOHOL AND OTHER DRUG SERVICES  
Address: 7000-B SOUTH CENTER DRIVE  
City, State Zip: CLEARLAKE, CA 95422  
Phone: (707) 994-7090 Fax: (707) 994-7164  
**Record ID:** 170002BN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 11/30/2018 IMS: No

**Program Name:** LAKE COUNTY DIVISION OF ALCOHOL AND OTHER DRUG SERVICES  
Legal Name: LAKE COUNTY ALCOHOL AND OTHER DRUG SERVICES  
Address: 6302 13TH AVENUE  
City, State Zip: LUCERNE, CA 95458  
Phone: (707) 274-9101 Fax: (707) 274-9132  
**Record ID:** 170002CN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 8/31/2019 IMS: No

**Program Name:** HILLTOP RECOVERY SERVICES  
Legal Name: HILLTOP RECOVERY SERVICES  
Address: 14720 OLD CATHOLIC CHURCH ROAD  
City, State Zip: CLEARLAKE OAKS, CA 95423  
Phone: (707) 998-1800 Fax: (707) 987-2591  
**Record ID:** 170011AN  
Service Type: RES  
Resident Capacity: 28  
Total Occupancy: 32  
Target Population: 1.1  
Expiration Date: 5/31/2019 IMS: No

**Program Name:** HILLTOP RECOVERY INTENSIVE OUTPATIENT PROGRAM  
Legal Name: HILLTOP RECOVERY SERVICES  
Address: 6300 EAST HIGHWAY 20  
City, State Zip: LUCERNE, CA 95458  
Phone: (707) 274-5610 Fax: (707) 274-8327  
**Record ID:** 170011DN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 5/31/2018 IMS: No

**State of California, Department of Health Care Services  
Licensed Residential Facilities and/or  
Certified Alcohol and Drug Programs**

**As of 9/1/2017**

**Lassen County**

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No licensed or certified facilities at this time.

Please check with a neighboring county for services.

State of California, Department of Health Care Services  
Licensed Residential Facilities and/or  
Certified Alcohol and Drug Programs

As of 9/1/2017

Los Angeles County

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**Program Name:** ANTELOPE VALLEY REHABILITATION CENTER - ACTON  
**Legal Name:** LOS ANGELES COUNTY DEPARTMENT OF PUBLIC HEALTH  
**Address:** 30500 ARRASTRE CANYON ROAD  
**City, State Zip:** ACTON, CA 93510  
**Phone:** (661) 269-0062 **Fax:** (661) 269-4507  
**Record ID:** 190001AN  
**Service Type:** RES  
**Resident Capacity:** 166  
**Total Occupancy:** 166  
**Target Population:** 1.1  
**Expiration Date:** 2/28/2018 **IMS:** No

**Program Name:** ANTELOPE VALLEY REHABILITATION CENTERS - HIGH DESERT RECOVERY SERVICES  
**Legal Name:** LOS ANGELES COUNTY DEPARTMENT OF PUBLIC HEALTH  
**Address:** 44900 NORTH 60TH STREET WEST  
**City, State Zip:** LANCASTER, CA 93536  
**Phone:** (661) 940-3549 **Fax:** (661) 266-1772  
**Record ID:** 190001CN  
**Service Type:** NON  
**Target Population:** 1.1  
**Expiration Date:** 6/30/2019 **IMS:** No

**Program Name:** ALCOHOLISM CENTER FOR WOMEN  
**Legal Name:** ALCOHOLISM CENTER FOR WOMEN  
**Address:** 1147 SOUTH ALVARADO STREET  
**City, State Zip:** LOS ANGELES, CA 90006  
**Phone:** (213) 381-8500 **Fax:** (213) 381-9410  
**Record ID:** 190002AN  
**Service Type:** NON  
**Target Population:** 1.1  
**Expiration Date:** 2/28/2019 **IMS:** No

**Program Name:** ALCOHOLISM CENTER FOR WOMEN  
**Legal Name:** ALCOHOLISM CENTER FOR WOMEN  
**Address:** 1135 SOUTH ALVARADO STREET  
**City, State Zip:** LOS ANGELES, CA 90006  
**Phone:** (213) 381-8500 **Fax:** (213) 381-9410  
**Record ID:** 190002BN  
**Service Type:** RES  
**Resident Capacity:** 32  
**Total Occupancy:** 32  
**Target Population:** 1.3  
**Expiration Date:** 2/28/2019 **IMS:** No

**Program Name:** COMFORT RECOVERY IOP LLC  
**Legal Name:** COMFORT RECOVERY IOP LLC  
**Address:** 20011 VENTURA BLVD., SUITE 105  
**City, State Zip:** WOODLAND HILLS, CA 91364  
**Phone:** (818) 821-7878  
**Record ID:** 190005AP  
**Service Type:** NON  
**Target Population:** 1.1  
**Expiration Date:** 6/30/2019 **IMS:** No

**Program Name:** BEACON HOUSE  
Legal Name: THE BEACON HOUSE ASSOCIATION OF SAN PEDRO  
Address: 1003 SOUTH BEACON STREET  
City, State Zip: SAN PEDRO, CA 90731  
Phone: (310) 514-4940  
**Record ID:** 190006AN  
Service Type: RES  
Resident Capacity: 18  
Total Occupancy: 18  
Target Population: 1.2  
Expiration Date: 3/31/2018 IMS: No

**Program Name:** LIGHTHOUSE  
Legal Name: THE BEACON HOUSE ASSOCIATION OF SAN PEDRO  
Address: 132 WEST 10TH STREET  
City, State Zip: SAN PEDRO, CA 90731  
Phone: (310) 514-4940  
**Record ID:** 190006BN  
Service Type: RES  
Resident Capacity: 25  
Total Occupancy: 25  
Target Population: 1.2  
Expiration Date: 3/31/2018 IMS: No

**Program Name:** MCMILLEN HOUSE  
Legal Name: THE BEACON HOUSE ASSOCIATION OF SAN PEDRO  
Address: 1012 SOUTH PALOS VERDES STREET  
City, State Zip: SAN PEDRO, CA 90731  
Phone: (310) 514-4940 Fax: (310) 331-0070  
**Record ID:** 190006DN  
Service Type: RES  
Resident Capacity: 25  
Total Occupancy: 25  
Target Population: 1.2  
Expiration Date: 3/31/2018 IMS: No

**Program Name:** CHANNEL VIEW HOUSE  
Legal Name: THE BEACON HOUSE ASSOCIATION OF SAN PEDRO  
Address: 124 WEST 11TH STREET  
City, State Zip: SAN PEDRO, CA 90731  
Phone: (310) 514-4940  
**Record ID:** 190006EN  
Service Type: RES  
Resident Capacity: 27  
Total Occupancy: 27  
Target Population: 1.2  
Expiration Date: 3/31/2018 IMS: No

**Program Name:** PROPER HOUSE  
Legal Name: THE BEACON HOUSE ASSOCIATION OF SAN PEDRO  
Address: 1021 S. BEACON STREET  
City, State Zip: SAN PEDRO, CA 90731  
Phone: (310) 514-4940 Fax: (310) 831-0070  
**Record ID:** 190006GN  
Service Type: RES  
Resident Capacity: 15  
Total Occupancy: 15  
Target Population: 1.2  
Expiration Date: 7/31/2019 IMS: No

**Program Name:** HOLLYWOOD FAMILY RECOVERY CENTER  
Legal Name: BEHAVIORAL HEALTH SERVICES, INC.  
Address: 6838 SUNSET BOULEVARD  
City, State Zip: HOLLYWOOD, CA 90028  
Phone: (323) 461-3817 Fax: (323) 461-5683  
**Record ID:** 190007AN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 9/30/2017 IMS: No

**Program Name:** WILMINGTON COMMUNITY RECOVERY CENTER  
Legal Name: BEHAVIORAL HEALTH SERVICES, INC.  
Address: 1318A AND 1314B NORTH AVALON BOULEVARD  
City, State Zip: WILMINGTON, CA 90744  
Phone: (310) 549-2715  
**Record ID:** 190007CN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 9/30/2017 IMS: No

**Program Name:** PATTERNS  
Legal Name: BEHAVIORAL HEALTH SERVICES, INC.  
Address: 12917 CERISE AVENUE  
City, State Zip: HAWTHORNE, CA 90250  
Phone: (310) 675-4431  
**Record ID:** 190007FN  
Service Type: RES  
Resident Capacity: 23  
Total Occupancy: 35  
Target Population: 1.4  
Expiration Date: 9/30/2017 IMS: No

**Program Name:** PACIFICA HOUSE  
Legal Name: BEHAVIORAL HEALTH SERVICES, INC.  
Address: 2501 WEST EL SEGUNDO BOULEVARD  
City, State Zip: HAWTHORNE, CA 90250  
Phone: (323) 754-2816 Fax: (323) 754-2828  
**Record ID:** 190007GN  
Service Type: RES  
Resident Capacity: 58  
Total Occupancy: 68  
Target Population: 1.1  
Expiration Date: 9/30/2017 IMS: No

**Program Name:** SOUTH BAY RECOVERY CENTER  
Legal Name: BEHAVIORAL HEALTH SERVICES, INC.  
Address: 15519 CRENSHAW BOULEVARD  
City, State Zip: GARDENA, CA 90249  
Phone: (310) 679-9031  
**Record ID:** 190007HN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 9/30/2017 IMS: No

**Program Name:** AMERICAN RECOVERY CENTER  
Legal Name: BEHAVIORAL HEALTH SERVICES, INC.  
Address: 2180 WEST VALLEY BOULEVARD,  
FLOOR 200  
City, State Zip: POMONA, CA 91768  
Phone: (909) 865-2336 Fax: (909) 865-1831  
**Record ID:** 190007IN  
Service Type: DPH  
Target Population: 1.1  
Expiration Date: 9/30/2017 IMS: No

**Program Name:** BOYLE HEIGHTS FAMILY RECOVERY CENTER  
Legal Name: BEHAVIORAL HEALTH SERVICES, INC.  
Address: 3421 OLYMPIC BOULEVARD  
City, State Zip: LOS ANGELES, CA 90023  
Phone: (323) 262-1786 Fax: (323) 262-2659  
**Record ID:** 190007JN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 9/30/2017 IMS: No

**Program Name:** LINCOLN HEIGHTS FAMILY RECOVERY CENTER  
Legal Name: BEHAVIORAL HEALTH SERVICES, INC.  
Address: 4099 NORTH MISSION ROAD  
City, State Zip: LOS ANGELES, CA 90032  
Phone: (323) 221-1746  
**Record ID:** 190007KN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 9/30/2017 IMS: No

**Program Name:** REDGATE MEMORIAL RECOVERY CENTER  
Legal Name: BEHAVIORAL HEALTH SERVICES, INC.  
Address: 1775 CHESTNUT AVENUE  
City, State Zip: LONG BEACH, CA 90813  
Phone: (562) 599-8444 Fax: (562) 591-6034  
**Record ID:** 190007LN  
Service Type: DPH  
Target Population: 1.1  
Expiration Date: 12/31/2018 IMS: No

**Program Name:** AMERICAN RECOVERY CENTER  
Legal Name: BEHAVIORAL HEALTH SERVICES, INC.  
Address: 2180 WEST VALLEY BOULEVARD,  
FLOORS 100, 300 AND 400  
City, State Zip: POMONA, CA 91768  
Phone: (909) 865-2336  
**Record ID:** 190007MN  
Service Type: RES  
Resident Capacity: 123  
Total Occupancy: 123  
Target Population: 1.1  
Expiration Date: 2/28/2019 IMS: No

**Program Name:** AMERICAN RECOVERY CENTER OUTPATIENT PROGRAM  
Legal Name: BEHAVIORAL HEALTH SERVICES, INC.  
Address: 2180 WEST VALLEY BOULEVARD  
City, State Zip: POMONA, CA 91766  
Phone: (909) 865-2336 Fax: (909) 865-1831  
**Record ID:** 190007ON  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 9/30/2017 IMS: No

**Program Name:** JOINT EFFORTS  
Legal Name: BEHAVIORAL HEALTH SERVICES, INC.  
Address: 590 WEST 8TH STREET  
City, State Zip: SAN PEDRO, CA 90731  
Phone: (310) 831-2358 Fax: (310) 831-2356  
**Record ID:** 190007QN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 4/30/2019 IMS: No

**Program Name:** NATIONAL COUNCIL ON ALCOHOLISM & DRUG DEPENDENCE OF THE SOUTH BAY  
Legal Name: BEHAVIORAL HEALTH SERVICES, INC.  
Address: 1334 POST AVENUE  
City, State Zip: TORRANCE, CA 90501  
Phone: (310) 328-1460 Fax: (310) 328-1964  
**Record ID:** 190007RN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 11/30/2017 IMS: No

**Program Name:** FLOSSIE LEWIS CENTER  
Legal Name: BEHAVIORIAL HEALTH SERVICES, INC.  
Address: 341 & 351 EAST 6TH STREET AND  
615 ELM AVENUE  
City, State Zip: LONG BEACH, CA 90802  
Phone: (562) 435-7350 Fax: (562) 435-4532  
**Record ID:** 190007SN  
Service Type: RES  
Resident Capacity: 27  
Total Occupancy: 27  
Target Population: 1.3  
Expiration Date: 7/31/2018 IMS: No

**Program Name:** LONG BEACH FAMILY RECOVERY CENTER  
Legal Name: BEHAVIORIAL HEALTH SERVICES, INC.  
Address: 514 W. PACIFIC COAST HIGHWAY  
City, State Zip: LONG BEACH , CA 90806-5237  
Phone: (562) 432-0713 Fax: (844) 676-6538  
**Record ID:** 190007VN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 7/31/2018 IMS: No

**Program Name:** HIGH GAIN PROGRAM  
Legal Name: BEHAVIORIAL HEALTH SERVICES, INC.  
Address: 9100 SOUTH SEPULVEDA BLVD. #105  
City, State Zip: LOS ANGELES, CA 90045  
Phone: (310) 644-3659 Fax: (310) 216-6747  
**Record ID:** 190007WN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 4/30/2019 IMS: No

**Program Name:** THE BISHOP GOODEN HOME  
Legal Name: THE GOODEN CENTER  
Address: 191 NORTH EL MOLINO AVENUE  
City, State Zip: PASADENA, CA 91101  
Phone: (626) 356-0078 Fax: (626) 795-2844  
**Record ID:** 190009AN  
Service Type: RES  
Resident Capacity: 19  
Total Occupancy: 19  
Target Population: 1.8  
Expiration Date: 3/31/2018 IMS: No

**Program Name:** DRUG AND ALCOHOL COUNSELING SERVICES  
Legal Name: SOUTHERN CALIFORNIA ALCOHOL AND DRUG PROGRAMS, INC.  
Address: 11500 PARAMOUNT BOULEVARD  
City, State Zip: DOWNEY, CA 90241  
Phone: (562) 923-4545 Fax: (562) 862-5906  
**Record ID:** 190011AAN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 5/31/2018 IMS: No

**Program Name:** POSITIVE STEPS  
Legal Name: SOUTHERN CALIFORNIA ALCOHOL AND DRUG PROGRAMS, INC.  
Address: 8332 IOWA STREET AND  
11501 DOLAN AVENUE  
City, State Zip: DOWNEY, CA 90241  
Phone: (562) 923-7894 Fax: (562) 869-3400  
**Record ID:** 190011AFN  
Service Type: RES-DETOX  
Resident Capacity: 47  
Total Occupancy: 57  
Target Population: 1.1  
Expiration Date: 4/30/2018 IMS: No



**Program Name:** FOLEY HOUSE  
Legal Name: SOUTHERN CALIFORNIA ALCOHOL AND DRUG PROGRAMS, INC.  
Address: 10501, 10505, 10511, 10517, AND 10519 MILLS AVENUE  
City, State Zip: WHITTIER, CA 90604  
Phone: (562) 944-7953 Fax: (562) 946-7494  
**Record ID:** 190011AN  
Service Type: RES-DETOX  
Resident Capacity: 20  
Total Occupancy: 30  
Target Population: 1.4  
Expiration Date: 3/31/2018 IMS: No

**Program Name:** AWAKENINGS  
Legal Name: SOUTHERN CALIFORNIA ALCOHOL AND DRUG PROGRAMS, INC.  
Address: 12322 CLEARGLLEN,  
APARTMENTS 1, 2, 3 AND 4  
City, State Zip: WHITTIER, CA 90604  
Phone: (562) 947-3835 Fax: (562) 943-1235  
**Record ID:** 190011KN  
Service Type: RES-DETOX  
Resident Capacity: 14  
Total Occupancy: 20  
Target Population: 1.1  
Expiration Date: 3/31/2018 IMS: No

**Program Name:** LA CASITA DE LAS MAMAS OF DOWNEY  
Legal Name: SOUTHERN CALIFORNIA ALCOHOL AND DRUG PROGRAMS, INC.  
Address: 10603, 10615 AND 10621 DOWNEY AVENUE  
City, State Zip: DOWNEY, CA 90241  
Phone: (562) 622-2268 Fax: (562) 923-5164  
**Record ID:** 190011ON  
Service Type: RES-DETOX  
Resident Capacity: 18  
Total Occupancy: 26  
Target Population: 1.4  
Expiration Date: 3/31/2018 IMS: No

**Program Name:** ANGEL STEP TOO  
Legal Name: SOUTHERN CALIFORNIA ALCOHOL AND DRUG PROGRAMS, INC.  
Address: 16314, 16316, 16316-1/2, 16318, 16318-1/2, 16322, 16322-1/2,  
AND 16322-7/8 CORNUTA AVENUE  
City, State Zip: BELLFLOWER, CA 90706  
Phone: (562) 461-9272  
**Record ID:** 190011VN  
Service Type: RES  
Resident Capacity: 30  
Total Occupancy: 54  
Target Population: 1.4  
Expiration Date: 11/30/2017 IMS: No

**Program Name:** CASA DE LAS AMIGAS-THE JON DUDLEY OUTPATIENT CENTER  
Legal Name: CASA DE LAS AMIGAS  
Address: 744 EAST WALNUT AVENUE  
City, State Zip: PASADENA, CA 91101  
Phone: (626) 792-2770 Fax: (626) 792-5826  
**Record ID:** 190012BN  
Service Type: NON  
Target Population: 1.8  
Expiration Date: 6/30/2018 IMS: No

**Program Name:** CASA DE LAS AMIGAS  
Legal Name: CASA DE LAS AMIGAS  
Address: 160 NORTH EL MOLINO AVENUE AND  
173 NORTH OAK KNOLL AVENUE  
City, State Zip: PASADENA, CA 91101  
Phone: (626) 792-2770 Fax: (626) 792-5826  
**Record ID:** 190012CN  
Service Type: RES-DETOX  
Resident Capacity: 34  
Total Occupancy: 34  
Target Population: 1.8  
Expiration Date: 3/31/2018 IMS: No

**Program Name:** CASTLE SUBSTANCE ABUSE PROGRAM - WEST  
Legal Name: PEOPLE COORDINATED SERVICES OF SOUTHERN CALIFORNIA  
Address: 1319 SOUTH MANHATTAN PLACE  
City, State Zip: LOS ANGELES, CA 90019  
Phone: (323) 735-7059  
**Record ID:** 190013AN  
Service Type: RES  
Resident Capacity: 40  
Total Occupancy: 40  
Target Population: 1.1  
Expiration Date: 10/31/2017 IMS: No

**Program Name:** CASTLE SUBSTANCE ABUSE PROGRAM-OUTPATIENT  
Legal Name: PEOPLE COORDINATED SERVICES OF SOUTHERN CALIFORNIA  
Address: 3021 SOUTH VERMONT AVENUE  
City, State Zip: LOS ANGELES, CA 90007  
Phone: (323) 732-9124  
**Record ID:** 190013BN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 10/31/2017 IMS: No

**Program Name:** CASTLE SUBSTANCE ABUSE PROGRAM - EAST  
Legal Name: PEOPLE COORDINATED SERVICES OF SOUTHERN CALIFORNIA  
Address: 4771 SOUTH MAIN STREET  
City, State Zip: LOS ANGELES, CA 90037  
Phone: (323) 233-3342  
**Record ID:** 190013CN  
Service Type: RES  
Resident Capacity: 40  
Total Occupancy: 40  
Target Population: 1.1  
Expiration Date: 10/31/2017 IMS: No

**Program Name:** SANTA MONICA RECOVERY CENTER  
Legal Name: CLARE FOUNDATION, INC.  
Address: 905 AND 907 PICO BOULEVARD  
City, State Zip: SANTA MONICA, CA 90405  
Phone: (310) 314-6200  
**Record ID:** 190016BN  
Service Type: RES-DETOX  
Resident Capacity: 49  
Total Occupancy: 49  
Target Population: 1.1  
Expiration Date: 7/31/2018 IMS: No

**Program Name:** WOMEN'S RECOVERY HOME  
Legal Name: CLARE FOUNDATION, INC.  
Address: 844 PICO BOULEVARD  
City, State Zip: SANTA MONICA, CA 90405  
Phone: (310) 314-6200  
**Record ID:** 190016FN  
Service Type: RES-DETOX  
Resident Capacity: 40  
Total Occupancy: 40  
Target Population: 1.3  
Expiration Date: 7/31/2018 IMS: No

**Program Name:** CLARE FOUNDATION INTENSIVE OUTPATIENT PROGRAM  
Legal Name: CLARE FOUNDATION, INC.  
Address: 1020 PICO BOULEVARD  
City, State Zip: SANTA MONICA, CA 90405  
Phone: (310) 314-6200 Ext:3424 Fax: (310) 399-2850  
**Record ID:** 190016HN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 5/31/2019 IMS: No

**Program Name:** CONSCIOUS RECOVERY BY CLARE  
Legal Name: CLARE FOUNDATION, INC.  
Address: 1334 LINCOLN BOULEVARD  
City, State Zip: SANTA MONICA, CA 90401  
Phone: (310) 576-2063 Fax: (310) 396-6974  
**Record ID:** 190016KN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 6/30/2018 IMS: No

**Program Name:** PICO OUTPATIENT  
Legal Name: CLARE FOUNDATION, INC.  
Address: 1002 PICO BOULEVARD  
City, State Zip: SANTA MONICA, CA 90405  
Phone: (310) 314-6200 Fax: (310) 314-6221  
**Record ID:** 190016LN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 5/31/2019 IMS: No

**Program Name:** GRANDVIEW FOUNDATION, INC. - RESIDENTIAL  
Legal Name: GRANDVIEW FOUNDATION, INC.  
Address: 1230 NORTH MARENGO AVENUE AND  
225 GRANDVIEW STREET  
City, State Zip: PASADENA, CA 91103  
Phone: (626) 797-1124 Fax: (626) 398-9674  
**Record ID:** 190022AN  
Service Type: RES  
Resident Capacity: 41  
Total Occupancy: 43  
Target Population: 1.2  
Expiration Date: 3/31/2019 IMS: No

**Program Name:** GRANDVIEW FOUNDATION, INC.  
Legal Name: GRANDVIEW FOUNDATION, INC.  
Address: 1230 NORTH MARENGO AVENUE  
City, State Zip: PASADENA, CA 91103  
Phone: (626) 797-1124 Ext:116 Fax: (626) 398-9674  
**Record ID:** 190022EN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 12/31/2017 IMS: No

**Program Name:** HOPE HARBOR CENTER  
Legal Name: THE SALVATION ARMY  
Address: 3107 SOUTH GRAND AVENUE  
City, State Zip: LOS ANGELES, CA 90007  
Phone: (213) 744-8186 Fax: (213) 626-0717  
**Record ID:** 190023AN  
Service Type: RES  
Resident Capacity: 56  
Total Occupancy: 56  
Target Population: 1.2  
Expiration Date: 4/30/2018 IMS: No

**Program Name:** THE SALVATION ARMY BELL SHELTER--WELLNESS CENTER  
**Legal Name:** THE SALVATION ARMY  
**Address:** 5600 RICKENBACKER ROAD,  
BUILDING 2A-B  
**City, State Zip:** BELL, CA 90201  
**Phone:** (323) 263-1206 **Fax:** (323) 263-8543  
**Record ID:** 190023CN  
**Service Type:** RES  
**Resident Capacity:** 75  
**Total Occupancy:** 75  
**Target Population:** 1.1  
**Expiration Date:** 8/31/2017 **IMS:** No

**Program Name:** THE SALVATION ARMY HOPE HARBOR CENTER  
**Legal Name:** THE SALVATION ARMY  
**Address:** 3107 SOUTH GRAND AVENUE  
**City, State Zip:** LOS ANGELES, CA 90007  
**Phone:** (213) 744-1688 **Fax:** (213) 744-8186  
**Record ID:** 190023HN  
**Service Type:** NON  
**Target Population:** 1.2  
**Expiration Date:** 4/30/2019 **IMS:** No

**Program Name:** HOUSE OF HOPE  
**Legal Name:** HOUSE OF HOPE FOUNDATION, INC.  
**Address:** 221, 223, 225, 227, 229, 235 WEST 9TH STREET  
AND 917 PALOS VERDES STREET, APARTMENT C AND D  
**City, State Zip:** SAN PEDRO, CA 90731  
**Phone:** (310) 831-9411 **Fax:** (310) 831-5796  
**Record ID:** 190025AN  
**Service Type:** RES  
**Resident Capacity:** 24  
**Total Occupancy:** 24  
**Target Population:** 1.3  
**Expiration Date:** 3/31/2018 **IMS:** No

**Program Name:** HOUSE OF HOPE FOUNDATION, INC.  
**Legal Name:** HOUSE OF HOPE FOUNDATION, INC.  
**Address:** 205 WEST 9TH STREET  
**City, State Zip:** SAN PEDRO, CA 90731  
**Phone:** (310) 521-9209 **Fax:** (310) 521-9241  
**Record ID:** 190025GN  
**Service Type:** NON  
**Target Population:** 1.3  
**Expiration Date:** 7/31/2019 **IMS:** No

**Program Name:** JAN CLAYTON CENTER  
**Legal Name:** VOLUNTEERS OF AMERICA OF LOS ANGELES  
**Address:** 4969 SUNSET BOULEVARD  
**City, State Zip:** LOS ANGELES, CA 90027  
**Phone:** (323) 660-8042 **Fax:** (323) 660-9265  
**Record ID:** 190027AN  
**Service Type:** RES-DETOX  
**Resident Capacity:** 48  
**Total Occupancy:** 48  
**Target Population:** 1.1  
**Expiration Date:** 2/28/2018 **IMS:** No

**Program Name:** VOA OF CENTRAL CITY RECOVERY SERVICES  
**Legal Name:** VOLUNTEERS OF AMERICA OF LOS ANGELES  
**Address:** 515 EAST 6TH STREET,  
9TH FLOOR  
**City, State Zip:** LOS ANGELES, CA 90021  
**Phone:** (323) 660-8042 **Fax:** (213) 622-6831  
**Record ID:** 190027BN  
**Service Type:** RES  
**Resident Capacity:** 48  
**Total Occupancy:** 48  
**Target Population:** 1.1  
**Expiration Date:** 2/28/2018 **IMS:** No

**Program Name:** VS-21  
Legal Name: VOLUNTEERS OF AMERICA OF LOS ANGELES  
Address: 622 SOUTH WALL STREET,  
BUILDING C  
City, State Zip: LOS ANGELES, CA 90014  
Phone: (213) 623-8580  
**Record ID:** 190027FN  
Service Type: RES  
Resident Capacity: 80  
Total Occupancy: 80  
Target Population: 1.1  
Expiration Date: 9/30/2017 IMS: No

**Program Name:** HOMELESS VETERANS CORRECTIONAL REHABILITATION / VS90  
Legal Name: VOLUNTEERS OF AMERICA OF LOS ANGELES  
Address: 1765 SOUTH LA CIENEGA BOULEVARD  
City, State Zip: LOS ANGELES, CA 90035  
Phone: (310) 204-0690  
**Record ID:** 190027HN  
Service Type: RES  
Resident Capacity: 50  
Total Occupancy: 50  
Target Population: 1.2  
Expiration Date: 12/31/2018 IMS: No

**Program Name:** LITTLE HOUSE  
Legal Name: LITTLE HOUSE  
Address: 9718 HARVARD STREET  
City, State Zip: BELLFLOWER, CA 90706-3699  
Phone: (562) 925-2777 Fax: (562) 925-7572  
**Record ID:** 190029AN  
Service Type: RES  
Resident Capacity: 28  
Total Occupancy: 34  
Target Population: 1.3  
Expiration Date: 9/30/2017 IMS: No

**Program Name:** PALM HOUSE RECOVERY HOME  
Legal Name: PALM HOUSE, INCORPORATED  
Address: 2515 EAST JEFFERSON STREET  
City, State Zip: CARSON, CA 90810  
Phone: (310) 830-7803 Fax: (310) 830-6606  
**Record ID:** 190040AN  
Service Type: RES  
Resident Capacity: 16  
Total Occupancy: 16  
Target Population: 1.2  
Expiration Date: 7/31/2018 IMS: No

**Program Name:** PASADENA SUBSTANCE USE PREVENTION & TREATMENT SERVICES  
Legal Name: PASADENA PUBLIC HEALTH DEPARTMENT  
Address: 1845 NORTH FAIR OAKS AVENUE  
City, State Zip: PASADENA, CA 91103  
Phone: (626) 744-6001 Fax: (626) 744-6096  
**Record ID:** 190041AN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 10/31/2017 IMS: No

**Program Name:** NATIONAL COUNCIL ON ALCOHOLISM AND  
DRUG DEPENDENCE OF THE SAN FERNANDO VALLEY  
Legal Name: NATIONAL COUNCIL ON ALCOHOLISM AND  
DRUG DEPENDENCE OF THE SAN FERNANDO VALLEY  
Address: 6166 VESPER AVENUE  
City, State Zip: VAN NUYS, CA 91411  
Phone: (818) 997-0414 Fax: (818) 997-0851  
**Record ID:** 190049AN  
Service Type: NON  
Target Population: 1.5  
Expiration Date: 4/30/2018 IMS: No

**Program Name:** NATIONAL COUNCIL ON ALCOHOLISM AND  
DRUG DEPENDENCE OF THE SAN FERNANDO VALLEY  
Legal Name: NATIONAL COUNCIL ON ALCOHOLISM AND  
DRUG DEPENDENCE OF THE SAN FERNANDO VALLEY  
Address: 24460 LYONS AVENUE  
City, State Zip: SANTA CLARITA, CA 91321  
Phone: (616) 253-9400 Fax: (818) 997-0851  
**Record ID:** 190049BN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 2/28/2019 IMS: No

**Program Name:** RICKMAN RECOVERY CENTERS  
Legal Name: NORMAN L. RICKMAN  
Address: 1433 E. ROUTE 66, SUITE F  
City, State Zip: GLENDORA, CA 91740  
Phone: (626) 962-3203 Fax: (626) 962-0036  
**Record ID:** 190062BP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 5/31/2018 IMS: No

**Program Name:** HIS SHELTERING ARMS, INC. INTEGRATED BEHAVIORAL HEALTHCARE SYSTEMS  
Legal Name: HIS SHELTERING ARMS INC.  
Address: 112 WEST 111TH STREET AND  
11101 SOUTH MAIN STREET  
City, State Zip: LOS ANGELES, CA 90061  
Phone: (323) 755-6646 Fax: (323) 777-2209  
**Record ID:** 190064BN  
Service Type: RES  
Resident Capacity: 49  
Total Occupancy: 69  
Target Population: 1.4  
Expiration Date: 5/31/2019 IMS: No

**Program Name:** HIS SHELTERING ARMS, INC.-INTEGRATED BEHAVIORIAL HEALTHCARE SYSTEMS  
Legal Name: HIS SHELTERING ARMS INC.  
Address: 11101 SOUTH MAIN STREET,  
SUITE 115  
City, State Zip: LOS ANGELES, CA 90061-1925  
Phone: (323) 755-6646 Fax: (323) 777-2209  
**Record ID:** 190064CN  
Service Type: NON  
Target Population: 1.4  
Expiration Date: 8/31/2017 IMS: No

**Program Name:** MUJERES RECOVERY HOME  
Legal Name: CALIFORNIA HISPANIC COMMISSION ON ALCOHOL AND DRUG ABUSE, INC.  
Address: 530 NORTH AVENUE 54  
City, State Zip: LOS ANGELES, CA 90042  
Phone: (323) 254-2423  
**Record ID:** 190065AN  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.3  
Expiration Date: 6/30/2018 IMS: No

**Program Name:** LATINOS RECOVERY HOME  
Legal Name: CALIFORNIA HISPANIC COMMISSION ON ALCOHOL AND DRUG ABUSE, INC.  
Address: 2436 WABASH AVENUE  
City, State Zip: LOS ANGELES, CA 90033  
Phone: (323) 780-8756 Fax: (323) 780-8333  
**Record ID:** 190065CN  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.2  
Expiration Date: 6/30/2018 IMS: No

**Program Name:** LATINAS RECOVERY HOME  
Legal Name: CALIFORNIA HISPANIC COMMISSION ON ALCOHOL AND DRUG ABUSE, INC.  
Address: 327 NORTH SAINT LOUIS STREET  
City, State Zip: LOS ANGELES, CA 90063  
Phone: (323) 261-7810 Fax: (323) 261-1375  
**Record ID:** 190065EN  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.3  
Expiration Date: 6/30/2018 IMS: No

**Program Name:** SAN GABRIEL VALLEY CENTER  
Legal Name: CALIFORNIA HISPANIC COMMISSION ON ALCOHOL AND DRUG ABUSE, INC.  
Address: 11046 VALLEY MALL  
City, State Zip: EL MONTE, CA 91731  
Phone: (626) 444-6000 Fax: (626) 444-9044  
**Record ID:** 190065HN  
Service Type: NON  
Target Population: 1.7  
Expiration Date: 1/31/2018 IMS: No

**Program Name:** LATINO FAMILY ALCOHOL AND DRUG SERVICES  
Legal Name: CALIFORNIA HISPANIC COMMISSION ON ALCOHOL AND DRUG ABUSE, INC.  
Address: 3316-3320 WEST BEVERLY BOULEVARD  
City, State Zip: MONTEBELLO, CA 90640  
Phone: (323) 722-4529 Fax: (323) 722-4450  
**Record ID:** 190065IN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 10/31/2017 IMS: No

**Program Name:** MENTAL HEALTH AND ADDICTION SERVICES FOR ADOLESCENTS  
Legal Name: CALIFORNIA HISPANIC COMMISSION ON ALCOHOL AND DRUG ABUSE, INC.  
Address: 2309 DALY STREET  
City, State Zip: LOS ANGELES, CA 90031  
Phone: (323) 222-4591 Fax: (323) 222-4614  
**Record ID:** 190065JN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 3/31/2018 IMS: No

**Program Name:** SAFE REFUGE  
Legal Name: SAFE REFUGE  
Address: 3111, 3113, 3115, 3119, 3125, AND 3131 EAST SEVENTH ST. APTS 1, 3, 4, 5, 6;  
719 APTS 1-10, 727 & 729 OBISPO AVE; AND 718, 728, 728A, 728 1/2 FREEMAN AV  
City, State Zip: LONG BEACH, CA 90804  
Phone: (562) 987-5722 Fax: (562) 987-4586  
**Record ID:** 190077AHN  
Service Type: RES-DETOX  
Resident Capacity: 89  
Total Occupancy: 89  
Target Population: 1.9  
Expiration Date: 10/31/2018 IMS: No

**Program Name:** SAFE REFUGE  
Legal Name: SAFE REFUGE  
Address: 3125, 3137 AND 3139 EAST SEVENTH STREET  
City, State Zip: LONG BEACH, CA 90804  
Phone: (562) 987-5722 Fax: (562) 987-4586  
**Record ID:** 190077CN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 5/31/2019 IMS: No

**Program Name:** SAFE REFUGE  
Legal Name: SAFE REFUGE  
Address: 1046 REDONDO AVENUE  
City, State Zip: LONG BEACH, CA 90804  
Phone: (562) 987-5722 Fax: (562) 987-4586  
**Record ID:** 190077RN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 7/31/2018 IMS: No

**Program Name:** LIVE AGAIN RECOVERY HOME - CAMP CISQUITO  
Legal Name: LIVE AGAIN MINISTRIES  
Address: 38215 NORTH SAN FRANCISQUITO CANYON ROAD  
City, State Zip: SAUGUS, CA 91350  
Phone: (661) 270-0025  
**Record ID:** 190079BN  
Service Type: RES  
Resident Capacity: 12  
Total Occupancy: 12  
Target Population: 1.2  
Expiration Date: 9/30/2017 IMS: No

**Program Name:** THE RIVER COMMUNITY  
Legal Name: SOCIAL MODEL RECOVERY SYSTEMS, INC.  
Address: 23701 EAST FORK STREET  
City, State Zip: AZUSA, CA 91702  
Phone: (626) 250-3290 Fax: (626) 910-1380  
**Record ID:** 190081AN  
Service Type: RES  
Resident Capacity: 38  
Total Occupancy: 38  
Target Population: 1.8  
Expiration Date: 3/31/2018 IMS: No

**Program Name:** RIVER COMMUNITY DAY TREATMENT  
Legal Name: SOCIAL MODEL RECOVERY SYSTEMS, INC.  
Address: 510 SOUTH SECOND AVENUE,  
SUITE 6 AND 7  
City, State Zip: COVINA, CA 91723-3017  
Phone: (626) 974-8123  
**Record ID:** 190081BN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 10/31/2017 IMS: No

**Program Name:** SOCIAL MODEL RECOVERY SYSTEMS (PCADD)  
Legal Name: SOCIAL MODEL RECOVERY SYSTEMS, INC.  
Address: 1245 EAST WALNUT STREET,  
SUITE 101, 103, 107, 109, 115, 117 AND 118  
City, State Zip: PASADENA, CA 91106  
Phone: (626) 795-9127 Fax: (626) 795-0979  
**Record ID:** 190081EN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 10/31/2018 IMS: No

**Program Name:** OMNI CENTER  
Legal Name: SOCIAL MODEL RECOVERY SYSTEMS, INC.  
Address: 3426 AND 3430 COGSWELL ROAD  
City, State Zip: EL MONTE, CA 91732  
Phone: (626) 453-3400  
**Record ID:** 190081FN  
Service Type: RES  
Resident Capacity: 18  
Total Occupancy: 18  
Target Population: 1.2  
Expiration Date: 2/28/2018 IMS: No



**Program Name:** MARIPOSA RECOVERY HOME  
Legal Name: SOCIAL MODEL RECOVERY SYSTEMS, INC.  
Address: 453 SOUTH INDIANA STREET  
City, State Zip: LOS ANGELES, CA 90063  
Phone: (323) 266-7726 Fax: (323) 266-7742  
**Record ID:** 190081GN  
Service Type: RES  
Resident Capacity: 13  
Total Occupancy: 15  
Target Population: 1.3  
Expiration Date: 10/31/2018 IMS: No

**Program Name:** MID VALLEY OUTPATIENT SERVICES  
Legal Name: SOCIAL MODEL RECOVERY SYSTEMS, INC.  
Address: 3131 SANTA ANITA AVENUE,  
SUITE 112B  
City, State Zip: EL MONTE, CA 91733  
Phone: (626) 453-3432 Fax: (626) 453-3415  
**Record ID:** 190081HN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 3/31/2019 IMS: No

**Program Name:** STEPPING STONES HOME I & II  
Legal Name: SOCIAL MODEL RECOVERY SYSTEMS, INC.  
Address: 17719 AND 17727 EAST CYPRESS STREET  
City, State Zip: COVINA, CA 91722  
Phone: (626) 967-2677 Fax: (626) 858-4923  
**Record ID:** 190081IN  
Service Type: RES  
Resident Capacity: 18  
Total Occupancy: 23  
Target Population: 1.4  
Expiration Date: 1/31/2018 IMS: No

**Program Name:** ROYAL PALMS RECOVERY HOME  
Legal Name: SOCIAL MODEL RECOVERY SYSTEMS, INC.  
Address: 360 SOUTH WESTLAKE AVENUE  
City, State Zip: LOS ANGELES, CA 90057  
Phone: (213) 483-9201 Fax: (626) 332-3145  
**Record ID:** 190081JN  
Service Type: RES  
Resident Capacity: 115  
Total Occupancy: 115  
Target Population: 1.2  
Expiration Date: 12/31/2017 IMS: No

**Program Name:** RENA B. RECOVERY HOME  
Legal Name: SOCIAL MODEL RECOVERY SYSTEMS, INC.  
Address: 4439, 4445 AND 4455 BURNS AVENUE  
City, State Zip: LOS ANGELES, CA 90029  
Phone: (323) 664-8940 Fax: (626) 332-3145  
**Record ID:** 190081KN  
Service Type: RES  
Resident Capacity: 76  
Total Occupancy: 76  
Target Population: 1.1  
Expiration Date: 12/31/2017 IMS: No

**Program Name:** BIMINI RECOVERY CENTER  
Legal Name: SOCIAL MODEL RECOVERY SYSTEMS, INC.  
Address: 155 SOUTH BIMINI PLACE  
City, State Zip: LOS ANGELES, CA 90004  
Phone: (213) 388-5423 Fax: (213) 388-1317  
**Record ID:** 190081LN  
Service Type: RES  
Resident Capacity: 84  
Total Occupancy: 84  
Target Population: 1.1  
Expiration Date: 7/31/2017 IMS: No

**Program Name:** RENA B. RECOVERY CENTER  
 Legal Name: SOCIAL MODEL RECOVERY SYSTEMS, INC.  
 Address: 4445 BURNS AVENUE  
 City, State Zip: LOS ANGELES, CA 90029  
 Phone: (323) 664-8940 Fax: (626) 974-4164  
**Record ID:** 190081MN  
 Service Type: NON  
 Target Population: 1.1  
 Expiration Date: 8/31/2017 IMS: No

**Program Name:** GLENDALE ADVENTIST ALCOHOL AND DRUG SERVICES  
 Legal Name: GLENDALE ADVENTIST MEDICAL CENTER  
 Address: 335 MISSION ROAD  
 City, State Zip: GLENDALE, CA 91205  
 Phone: (818) 242-3116 Fax: (818) 242-5759  
**Record ID:** 190082BN  
 Service Type: RES-DETOX  
 Resident Capacity: 24  
 Total Occupancy: 24  
 Target Population: 1.1  
 Expiration Date: 6/30/2018 IMS: No

**Program Name:** TARZANA TREATMENT CENTERS  
 Legal Name: TARZANA TREATMENT CENTERS, INC.  
 Address: 18646 OXNARD STREET,  
 SOUTH AND WEST WINGS  
 City, State Zip: TARZANA, CA 91356  
 Phone: (818) 996-1051 Fax: (818) 654-3906  
**Record ID:** 190085AN  
 Service Type: RES-DETOX  
 Resident Capacity: 152  
 Total Occupancy: 165  
 Target Population: 1.1  
 Expiration Date: 11/30/2017 IMS: Yes

**Program Name:** TARZANA TREATMENT CENTER - LONG BEACH  
 Legal Name: TARZANA TREATMENT CENTERS, INC.  
 Address: 2101 MAGNOLIA AVENUE  
 City, State Zip: LONG BEACH, CA 90806  
 Phone: (562) 218-1868 Fax: (562) 596-0346  
**Record ID:** 190085BN  
 Service Type: RES-DETOX  
 Resident Capacity: 84  
 Total Occupancy: 109  
 Target Population: 1.9  
 Expiration Date: 11/30/2017 IMS: Yes

**Program Name:** TARZANA TREATMENT CENTER - DETOX  
 Legal Name: TARZANA TREATMENT CENTERS, INC.  
 Address: 18646 OXNARD STREET,  
 DETOXIFICATION UNIT  
 City, State Zip: TARZANA, CA 91356  
 Phone: (818) 996-1051 Fax: (818) 654-3906  
**Record ID:** 190085DN  
 Service Type: NON  
 Target Population: 1.1  
 Expiration Date: 11/30/2017 IMS: No

**Program Name:** TARZANA TREATMENT CENTER OUTPATIENT SERVICES  
 Legal Name: TARZANA TREATMENT CENTERS, INC.  
 Address: 18646 OXNARD STREET  
 City, State Zip: TARZANA, CA 91356  
 Phone: (818) 996-1051 Fax: (818) 654-3906  
**Record ID:** 190085FN  
 Service Type: NON-DETOX  
 Target Population: 1.1  
 Expiration Date: 11/30/2017 IMS: No

**Program Name:** Tarzana Treatment Centers, Inc.  
Legal Name: TARZANA TREATMENT CENTERS, INC.  
Address: 44447 NORTH 10TH STREET WEST  
BUILDING A  
City, State Zip: LANCASTER, CA 93534  
Phone: (661) 726-2630 Fax: (818) 975-5013  
**Record ID:** 190085GN  
Service Type: NON-DETOX  
Target Population: 1.1  
Expiration Date: 6/30/2019 IMS: No

**Program Name:** TARZANA TREATMENT CENTER - NORTHRIDGE  
Legal Name: TARZANA TREATMENT CENTERS, INC.  
Address: 18700 OXNARD STREET  
City, State Zip: TARZANA, CA 91356  
Phone: (818) 996-1051 Fax: (818) 966-3051  
**Record ID:** 190085HN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 3/31/2019 IMS: No

**Program Name:** TARZANA TREATMENT CENTER YOUTH SERVICES - LANCASTER  
Legal Name: TARZANA TREATMENT CENTERS, INC.  
Address: 44443 NORTH 10TH STREET WEST  
City, State Zip: LANCASTER, CA 93535  
Phone: (818) 996-1051 Fax: (818) 966-3051  
**Record ID:** 190085JN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 3/31/2019 IMS: No

**Program Name:** TARZANA TREATMENT CENTER  
Legal Name: TARZANA TREATMENT CENTERS, INC.  
Address: 7101 BAIRD AVENUE  
City, State Zip: RESEDA, CA 91335  
Phone: (818) 996-1051 Fax: (818) 996-3051  
**Record ID:** 190085KN  
Service Type: NON-DETOX  
Target Population: 1.1  
Expiration Date: 5/31/2019 IMS: No

**Program Name:** TARZANA TREATMENT CENTER - LANCASTER  
Legal Name: TARZANA TREATMENT CENTERS, INC.  
Address: 44447 NORTH 10TH STREET WEST  
BUILDING B  
City, State Zip: LANCASTER, CA 93534  
Phone: (661) 726-2630 Fax: (818) 996-3051  
**Record ID:** 190085LN  
Service Type: RES-DETOX  
Resident Capacity: 40  
Total Occupancy: 51  
Target Population: 1.1  
Expiration Date: 10/31/2017 IMS: Yes

**Program Name:** TARZANA TREATMENT CENTERS, INC.  
Legal Name: TARZANA TREATMENT CENTERS, INC.  
Address: 5190 ATLANTIC AVENUE  
City, State Zip: LONG BEACH, CA 90806  
Phone: (818) 428-4111  
**Record ID:** 190085NN  
Service Type: NON-DETOX  
Target Population: 1.1  
Expiration Date: 12/31/2018 IMS: No

**Program Name:** TARZANA TREATMENT CENTERS  
Legal Name: TARZANA TREATMENT CENTERS, INC.  
Address: 44459 10TH STREET WEST  
City, State Zip: LANCASTER, CA 93534  
Phone: (818) 996-1051 Ext:4100 Fax: (818) 996-3051  
**Record ID:** 190085ON  
Service Type: NON-DETOX  
Target Population: 1.1  
Expiration Date: 2/28/2018 IMS: No

**Program Name:** TARZANA TREATMENT CENTERS - LANCASTER  
Legal Name: TARZANA TREATMENT CENTERS, INC.  
Address: 44447 NORTH 10TH STREET WEST,  
BUILDING C  
City, State Zip: LANCASTER, CA 93534  
Phone: (818) 996-1051 Fax: (818) 966-3051  
**Record ID:** 190085PN  
Service Type: DSS  
Target Population: 1.1  
Expiration Date: 3/31/2019 IMS: No

**Program Name:** CHABAD RESIDENTIAL TREATMENT CENTER  
Legal Name: CHABAD OF CALIFORNIA  
Address: 5675 WEST OLYMPIC BOULEVARD  
City, State Zip: LOS ANGELES, CA 90036  
Phone: (323) 965-1365 Fax: (323) 965-1275  
**Record ID:** 190087CN  
Service Type: RES  
Resident Capacity: 44  
Total Occupancy: 44  
Target Population: 1.1  
Expiration Date: 3/31/2019 IMS: No

**Program Name:** CHABAD RECOVERY OUTPATIENT CENTER  
Legal Name: CHABAD OF CALIFORNIA  
Address: 1750 SOUTH LA CIENEGA BLVD  
City, State Zip: LOS ANGELES, CA 90035  
Phone: (323) 965-1365  
**Record ID:** 190087DN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 1/31/2018 IMS: No

**Program Name:** DIDI HIRSCH MENTAL HEALTH SERVICES  
Legal Name: DIDI HIRSCH PSYCHIATRIC SERVICE  
Address: 11643 GLENOAKS BOULEVARD  
City, State Zip: PACOIMA, CA 913311050  
Phone: (310) 897-2609 Fax: (818) 890-7159  
**Record ID:** 190092AN  
Service Type: RES  
Resident Capacity: 40  
Total Occupancy: 60  
Target Population: 1.4  
Expiration Date: 7/31/2018 IMS: No

**Program Name:** DIDI HIRSCH COMMUNITY MENTAL HEALTH CENTER,  
OUTPATIENT SUBSTANCE ABUSE SERVICES  
Legal Name: DIDI HIRSCH PSYCHIATRIC SERVICE  
Address: 11133 WASHINGTON BOULEVARD  
City, State Zip: CULVER CITY, CA 90230  
Phone: (310) 895-2300 Fax: (310) 398-5690  
**Record ID:** 190092BN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 7/31/2018 IMS: No

**Program Name:** DIDI HIRSCH MENTAL HEALTH SERVICES- YOUTH SUBSTANCE ABUSE SERVICES PROGRAM  
**Legal Name:** DIDI HIRSCH PSYCHIATRIC SERVICE  
**Address:** 12420 VENICE BOULEVARD,  
SUITE 200  
**City, State Zip:** LOS ANGELES, CA 90066  
**Phone:** (310) 751-1200 **Fax:** (310) 398-0312  
**Record ID:** 190092CN  
**Service Type:** NON  
**Target Population:** 1.5  
**Expiration Date:** 12/31/2017 **IMS:** No

**Program Name:** DIDI HIRSCH PSYCHIATRIC SERVICE  
**Legal Name:** DIDI HIRSCH PSYCHIATRIC SERVICE  
**Address:** 1540 COLORADO STREET  
**City, State Zip:** GLENDALE, CA 91205-1514  
**Phone:** (818) 244-7257 **Fax:** (818) 244-5431  
**Record ID:** 190092DN  
**Service Type:** NON  
**Target Population:** 1.1  
**Expiration Date:** 6/30/2018 **IMS:** No

**Program Name:** DIDI HIRSCH MENTAL HEALTH SERVICES  
**Legal Name:** DIDI HIRSCH PSYCHIATRIC SERVICE  
**Address:** 323 NORTH PRAIRIE AVENUE,  
**City, State Zip:** INGLEWOOD, CA 90301  
**Phone:** (310) 677-7808  
**Record ID:** 190092EN  
**Service Type:** NON  
**Target Population:** 1.1  
**Expiration Date:** 12/31/2018 **IMS:** No

**Program Name:** IMPACT DRUG AND ALCOHOL TREATMENT CENTER  
**Legal Name:** PRINCIPLES, INC.  
**Address:** 1680 NORTH FAIR OAKS AVENUE  
**City, State Zip:** PASADENA, CA 91103  
**Phone:** (626) 798-0884 **Fax:** (626) 798-6970  
**Record ID:** 190094AN  
**Service Type:** RES  
**Resident Capacity:** 130  
**Total Occupancy:** 130  
**Target Population:** 1.1  
**Expiration Date:** 10/31/2017 **IMS:** No

**Program Name:** IMPACT OUTPATIENT/AFTERCARE PROGRAM  
**Legal Name:** PRINCIPLES, INC.  
**Address:** 1450 NORTH LAKE AVENUE,  
SUITE 200  
**City, State Zip:** PASADENA, CA 91104  
**Phone:** (626) 564-4240 **Fax:** (626) 577-4250  
**Record ID:** 190094GN  
**Service Type:** NON  
**Target Population:** 1.1  
**Expiration Date:** 7/31/2019 **IMS:** No

**Program Name:** PRINCIPLES, INC., D.B.A. IMPACT  
**Legal Name:** PRINCIPLES, INC.  
**Address:** 333 SOUTH CENTRAL AVENUE  
**City, State Zip:** LOS ANGELES, CA 90013  
**Phone:** (213) 625-5009 **Fax:** (213) 577-4250  
**Record ID:** 190094HN  
**Service Type:** NON  
**Target Population:** 1.1  
**Expiration Date:** 9/30/2018 **IMS:** No

**Program Name:** CRI-HELP, PFLEGER RESIDENTIAL  
Legal Name: CRI-HELP, INC.  
Address: 11027 BURBANK BOULEVARD  
City, State Zip: NORTH HOLLYWOOD, CA 91601  
Phone: (818) 985-8323 Fax: (818) 506-7066  
**Record ID:** 190095AN  
Service Type: RES-DETOX  
Resident Capacity: 135  
Total Occupancy: 135  
Target Population: 1.1  
Expiration Date: 12/31/2017 IMS: No

**Program Name:** CRI-HELP - PFLEGER OUTPATIENT  
Legal Name: CRI-HELP, INC.  
Address: 8330 LANKERSHIM BOULEVARD  
City, State Zip: NORTH HOLLYWOOD, CA 91605  
Phone: (818) 985-8323  
**Record ID:** 190095KN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 12/31/2017 IMS: No

**Program Name:** SOCORRO  
Legal Name: CRI-HELP, INC.  
Address: 2010 NORTH LINCOLN PARK AVENUE  
City, State Zip: LINCOLN HEIGHTS, CA 90031  
Phone: (323) 222-1440  
**Record ID:** 190095MN  
Service Type: RES  
Resident Capacity: 41  
Total Occupancy: 41  
Target Population: 1.1  
Expiration Date: 5/31/2019 IMS: No

**Program Name:** SOCORRO  
Legal Name: CRI-HELP, INC.  
Address: 2029 KEITH STREET  
City, State Zip: LOS ANGELES, CA 90031  
Phone: (323) 222-6509  
**Record ID:** 190095NN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 5/31/2019 IMS: No

**Program Name:** BROWN SCAPULAR PROGRAM  
Legal Name: CANON HUMAN SERVICES CENTERS, INC.  
Address: 9705 SOUTH HOLMES AVENUE  
City, State Zip: LOS ANGELES, CA 90002  
Phone: (323) 249-9097 Fax: (323) 249-9121  
**Record ID:** 190099DN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 1/31/2018 IMS: No

**Program Name:** BROWN SCAPULAR PROGRAM  
Legal Name: CANON HUMAN SERVICES CENTERS, INC.  
Address: 9705 SOUTH HOLMES STREET  
City, State Zip: LOS ANGELES, CA 90002  
Phone: (323) 249-9097 Fax: (323) 249-9121  
**Record ID:** 190099EN  
Service Type: RES  
Resident Capacity: 43  
Total Occupancy: 43  
Target Population: 1.2  
Expiration Date: 2/28/2018 IMS: No

**Program Name:** L.A. CADA  
Legal Name: LOS ANGELES CENTERS FOR ALCOHOL AND DRUG ABUSE  
Address: 11015 BLOOMFIELD AVENUE  
City, State Zip: SANTA FE SPRINGS, CA 90670-4601  
Phone: (562) 906-2676 Fax: (562) 906-2681  
**Record ID:** 190100BN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 1/31/2018 IMS: No

**Program Name:** L.A. CADA  
Legal Name: LOS ANGELES CENTERS FOR ALCOHOL AND DRUG ABUSE  
Address: 470 EAST THIRD STREET,  
SUITES A AND B  
City, State Zip: LOS ANGELES, CA 90013  
Phone: (213) 626-6411 Fax: (562) 906-2676  
**Record ID:** 190100EN  
Service Type: NON  
Target Population: 1.7  
Expiration Date: 1/31/2018 IMS: No

**Program Name:** ALLEN HOUSE  
Legal Name: LOS ANGELES CENTERS FOR ALCOHOL AND DRUG ABUSE  
Address: 10425 SOUTH PAINTER AVENUE  
City, State Zip: SANTA FE SPRINGS, CA 90670  
Phone: (562) 906-2685 Fax: (562) 236-9899  
**Record ID:** 190100IN  
Service Type: RES-DETOX  
Resident Capacity: 55  
Total Occupancy: 55  
Target Population: 1.1  
Expiration Date: 11/30/2018 IMS: No

**Program Name:** H.O.W. HOUSE  
Legal Name: LOS ANGELES CENTERS FOR ALCOHOL AND DRUG ABUSE  
Address: 14100, 14100 1/4, 14100 1/2, GLENGYLE STREET  
City, State Zip: WHITTIER, CA 90604  
Phone: (562) 777-1222 Fax: (562) 906-1222  
**Record ID:** 190100LN  
Service Type: RES  
Resident Capacity: 18  
Total Occupancy: 19  
Target Population: 1.2  
Expiration Date: 8/31/2018 IMS: No

**Program Name:** SUNRISE COMMUNITY COUNSELING CENTER  
Legal Name: SUNRISE COMMUNITY COUNSELING CENTER  
Address: 537 SOUTH ALVARADO STREET  
City, State Zip: LOS ANGELES, CA 90057-2903  
Phone: (213) 207-2770 Fax: (213) 207-2773  
**Record ID:** 190110CN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 9/30/2017 IMS: No

**Program Name:** VAN NESS RECOVERY HOUSE  
Legal Name: VAN NESS RECOVERY HOUSE  
Address: 1919 NORTH BEACHWOOD DRIVE  
City, State Zip: LOS ANGELES, CA 90068  
Phone: (323) 463-4266 Fax: (323) 962-6721  
**Record ID:** 190111AN  
Service Type: RES  
Resident Capacity: 20  
Total Occupancy: 20  
Target Population: 1.1  
Expiration Date: 10/31/2018 IMS: No

**Program Name:** ASIAN AMERICAN DRUG ABUSE PROGRAM  
Legal Name: ASIAN AMERICAN DRUG ABUSE PROGRAM, INC.  
Address: 5318 SOUTH CRENSHAW BOULEVARD  
City, State Zip: LOS ANGELES, CA 90043  
Phone: (323) 293-6291 Fax: (323) 293-1091  
**Record ID:** 190112AN  
Service Type: RES  
Resident Capacity: 29  
Total Occupancy: 31  
Target Population: 1.1  
Expiration Date: 1/31/2018 IMS: No

**Program Name:** ASIAN AMERICAN DRUG ABUSE PROGRAM  
Legal Name: ASIAN AMERICAN DRUG ABUSE PROGRAM, INC.  
Address: 1088 SOUTH LA BREA AVENUE  
City, State Zip: LOS ANGELES, CA 90019  
Phone: (323) 295-0262 Fax: (323) 295-2533  
**Record ID:** 190112CN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 5/31/2019 IMS: No

**Program Name:** ASIAN-AMERICAN DRUG ABUSE PROGRAM  
Legal Name: ASIAN AMERICAN DRUG ABUSE PROGRAM, INC.  
Address: 520 NORTH LA BREA,  
SUITE 209  
City, State Zip: INGLEWOOD, CA 90302  
Phone: (323) 294-4932 Fax: (323) 294-2533  
**Record ID:** 190112DN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 2/28/2019 IMS: No

**Program Name:** ASIAN AMERICAN DRUG ABUSE PROGRAM, INC.  
Legal Name: ASIAN AMERICAN DRUG ABUSE PROGRAM, INC.  
Address: 13931 SOUTH VAN NESS AVENUE  
City, State Zip: GARDENA, CA 90249  
Phone: (323) 293-6284 Fax: (323) 295-4075  
**Record ID:** 190112EN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 10/31/2017 IMS: No

**Program Name:** ASIAN AMERICAN DRUG ABUSE PROGRAM, INC.  
Legal Name: ASIAN AMERICAN DRUG ABUSE PROGRAM, INC.  
Address: 5825 W. OLYMPIC BLVD.  
City, State Zip: LOS ANGELES, CA 90036  
Phone: (323) 933-9022 Fax: (323) 933-4029  
**Record ID:** 190112FN  
Service Type: DSS  
Target Population: 1.5  
Expiration Date: 9/30/2018 IMS: No

**Program Name:** PHOENIX HOUSE - VENICE  
Legal Name: PHOENIX HOUSES OF LOS ANGELES, INC.  
Address: 503 OCEAN FRONT WALK  
City, State Zip: VENICE, CA 90291  
Phone: (310) 392-3070 Fax: (310) 392-9068  
**Record ID:** 190115AN  
Service Type: RES-DETOX  
Resident Capacity: 53  
Total Occupancy: 53  
Target Population: 1.2  
Expiration Date: 12/31/2017 IMS: No



**Program Name:** PHOENIX HOUSES OF LOS ANGELES  
Legal Name: PHOENIX HOUSES OF LOS ANGELES, INC.  
Address: 11600 ELDRIDGE AVENUE  
City, State Zip: LAKE VIEW TERRACE, CA 91342  
Phone: (818) 686-3013  
**Record ID:** 190115BN  
Service Type: DSS  
Target Population: 1.1  
Expiration Date: 7/31/2018 IMS: No

**Program Name:** PHOENIX HOUSE: OUTPATIENT SERVICES  
Legal Name: PHOENIX HOUSES OF LOS ANGELES, INC.  
Address: 503 OCEAN FRONT WALK  
City, State Zip: VENICE, CA 90291  
Phone: (310) 392-3070 Fax: (310) 392-9068  
**Record ID:** 190115CN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 12/31/2017 IMS: No

**Program Name:** PHOENIX HOUSE ACADEMY OUTPATIENT CENTER  
Legal Name: PHOENIX HOUSES OF LOS ANGELES, INC  
Address: 11600 ELDRIDGE AVENUE  
City, State Zip: LAKE VIEW TERRACE, CA 91342  
Phone: (818) 686-3170  
**Record ID:** 190115DN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 2/28/2019 IMS: No

**Program Name:** FRED BROWN'S RECOVERY SERVICES, INC.  
Legal Name: FRED BROWN'S RECOVERY SERVICES, INC.  
Address: 270 WEST 14TH STREET  
City, State Zip: SAN PEDRO, CA 90731  
Phone: (310) 519-8723 Fax: (310) 519-9428  
**Record ID:** 190135CN  
Service Type: RES  
Resident Capacity: 14  
Total Occupancy: 14  
Target Population: 1.2  
Expiration Date: 11/30/2018 IMS: No

**Program Name:** FRED BROWN'S RECOVERY SERVICES, INC.  
Legal Name: FRED BROWN'S RECOVERY SERVICES, INC.  
Address: 856 WEST 19TH STREET  
City, State Zip: SAN PEDRO, CA 90731  
Phone: (310) 548-1196 Fax: (310) 519-9428  
**Record ID:** 190135EN  
Service Type: RES  
Resident Capacity: 12  
Total Occupancy: 12  
Target Population: 1.1  
Expiration Date: 11/30/2017 IMS: No

**Program Name:** FRED BROWN'S RECOVERY SERVICES  
Legal Name: FRED BROWN'S RECOVERY SERVICES, INC.  
Address: 278 WEST 14TH STREET  
City, State Zip: SAN PEDRO, CA 90731  
Phone: (310) 519-8723 Fax: (310) 519-9428  
**Record ID:** 190135IN  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.2  
Expiration Date: 2/28/2018 IMS: No

**Program Name:** FRED BROWN'S RECOVERY SERVICES  
Legal Name: FRED BROWN'S RECOVERY SERVICES, INC.  
Address: 276 WEST 14TH STREET  
City, State Zip: SAN PEDRO, CA 90731  
Phone: (310) 519-8723 Fax: (310) 519-9428  
**Record ID:** 190135JN  
Service Type: RES  
Resident Capacity: 4  
Total Occupancy: 4  
Target Population: 1.2  
Expiration Date: 2/28/2018 IMS: No

**Program Name:** FRED BROWN'S RECOVERY SERVICES  
Legal Name: FRED BROWN'S RECOVERY SERVICES, INC.  
Address: 270 WEST 14TH STREET,  
#3  
City, State Zip: SAN PEDRO, CA 90731  
Phone: (310) 519-8723 Fax: (310) 519-9428  
**Record ID:** 190135MN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 10/31/2017 IMS: No

**Program Name:** S. H. A. W. L. HOUSE  
Legal Name: SUPPORT FOR HARBOR AREA WOMEN'S LIVES  
Address: 936 SOUTH CENTRE STREET  
City, State Zip: SAN PEDRO, CA 90731  
Phone: (310) 521-9310 Fax: (310) 521-9310  
**Record ID:** 190147AN  
Service Type: RES  
Resident Capacity: 13  
Total Occupancy: 13  
Target Population: 1.12  
Expiration Date: 6/30/2019 IMS: No

**Program Name:** OASIS WOMEN'S RECOVERING COMMUNITY  
Legal Name: OASIS WOMEN'S RECOVERING COMMUNITY  
Address: 13832 POLK STREET  
City, State Zip: SYLMAR, CA 91342  
Phone: (818) 362-0986 Fax: (818) 833-0922  
**Record ID:** 190155BN  
Service Type: RES  
Resident Capacity: 14  
Total Occupancy: 17  
Target Population: 1.3  
Expiration Date: 8/31/2019 IMS: No

**Program Name:** DARE U TO CARE OUTREACH MINISTRY  
Legal Name: DARE U TO CARE OUTREACH MINISTRY  
Address: 1004 WEST 120TH STREET  
City, State Zip: LOS ANGELES, CA 90044  
Phone: (323) 208-7575 Fax: (323) 777-2872  
**Record ID:** 190182DN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 8/31/2019 IMS: No

**Program Name:** DARE U TO CARE DRUG/ALCOHOL TREATMENT PROGRAM  
Legal Name: DARE U TO CARE OUTREACH MINISTRY  
Address: 316 WEST 120TH STREET  
City, State Zip: LOS ANGELES, CA 90061  
Phone: (323) 777-2372 Fax: (323) 777-2488  
**Record ID:** 190182EN  
Service Type: RES  
Resident Capacity: 20  
Total Occupancy: 21  
Target Population: 1.1  
Expiration Date: 9/30/2017 IMS: No

**Program Name:** NEW FOUND LIFE  
Legal Name: NEW FOUND LIFE, INC.  
Address: 2211, 2213, 2135 AND 2137 EAST OCEAN BOULEVARD  
City, State Zip: LONG BEACH, CA 90803-2440  
Phone: (562) 434-4060 Fax: (562) 987-3924  
**Record ID:** 190184AP  
Service Type: RES  
Resident Capacity: 30  
Total Occupancy: 30  
Target Population: 1.1  
Expiration Date: 12/31/2017 IMS: No

**Program Name:** WESTSIDE RESIDENCE HALL  
Legal Name: UNITED STATES VETERANS INITIATIVE  
Address: 733 SOUTH HINDRY AVE.  
SUITES 203, 208, 209, 210, AND 211  
City, State Zip: INGLEWOOD, CA 90301  
Phone: (310) 348-7600 Fax: (310) 641-2661  
**Record ID:** 190188AN  
Service Type: RES  
Resident Capacity: 50  
Total Occupancy: 50  
Target Population: 1.2  
Expiration Date: 4/30/2018 IMS: No

**Program Name:** CROSSROADS  
Legal Name: CROSSROADS, INCORPORATED  
Address: 1269 NORTH HARVARD AVE.; 615 SAN JOSE AVE.;  
AND 250 W. 1ST ST., SUITE 254  
City, State Zip: CLAREMONT, CA 91711-0015  
Phone: (909) 626-7847 Fax: (909) 626-7867  
**Record ID:** 190205AN  
Service Type: RES  
Resident Capacity: 12  
Total Occupancy: 14  
Target Population: 1.3  
Expiration Date: 9/30/2017 IMS: No

**Program Name:** SSG HOP-ICS  
Legal Name: SPECIAL SERVICE FOR GROUPS, INC.  
Address: 5715 SOUTH BROADWAY  
City, State Zip: LOS ANGELES, CA 90037  
Phone: (323) 948-0444 Fax: (323) 948-0443  
**Record ID:** 190210BN  
Service Type: NON  
Target Population: 1.5  
Expiration Date: 3/31/2019 IMS: No

**Program Name:** PACIFIC ASIAN ALCOHOL AND DRUG PROGRAM  
Legal Name: SPECIAL SERVICE FOR GROUPS, INC.  
Address: 2001 BEVERLY BOULEVARD,  
SUITE 201  
City, State Zip: LOS ANGELES, CA 90057  
Phone: (213) 413-1622 Fax: (213) 413-5456  
**Record ID:** 190210CN  
Service Type: NON  
Target Population: 1.5  
Expiration Date: 12/31/2018 IMS: No

**Program Name:** SSG WEBER COMMUNITY CENTER  
Legal Name: SPECIAL SERVICE FOR GROUPS, INC.  
Address: 5849 SOUTH CROCKER STREET  
City, State Zip: LOS ANGELES, CA 90003  
Phone: (323) 234-4445 Fax: (213) 553-1822  
**Record ID:** 190210EN  
Service Type: NON  
Target Population: 1.5  
Expiration Date: 7/31/2017 IMS: No

**Program Name:** CREATIVE CARE - MALIBU  
Legal Name: CREATIVE CARE, INC.  
Address: 5909, 5927, 5941 AND 5947 TRANCAS CANYON ROAD  
City, State Zip: MALIBU, CA 90265  
Phone: (818) 223-9334 Fax: (310) 589-5547  
**Record ID:** 190226AP  
Service Type: RES-DETOX  
Resident Capacity: 24  
Total Occupancy: 24  
Target Population: 1.1  
Expiration Date: 2/28/2019 IMS: No

**Program Name:** DAY TREATMENT AND OUTPATIENT ALCOHOL AND/OR OTHER DRUG SERVICES  
Legal Name: EL PROYECTO DEL BARRIO, INC.  
Address: 9140 VAN NUYS BOULEVARD,  
SUITES 104-107, 201, 203, AND 208-211  
City, State Zip: PANORAMA CITY, CA 91402  
Phone: (818) 895-2206 Fax: (818) 895-0824  
**Record ID:** 190236BN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 7/31/2017 IMS: No

**Program Name:** ARK OUTPATIENT DRUG FREE SERVICES/DRUG COURT  
Legal Name: SHIELDS FOR FAMILIES  
Address: 11705 DEPUTY YAMAMOTO PLACE,  
SUITE A  
City, State Zip: LYNWOOD, CA 90262  
Phone: (323) 357-6930 Fax: (323) 569-1979  
**Record ID:** 190238CN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 3/31/2019 IMS: No

**Program Name:** GENESIS FAMILY DAY TREATMENT PROGRAM  
Legal Name: SHIELDS FOR FAMILIES  
Address: 12021 SOUTH WILMINGTON AVENUE,  
LOT C  
City, State Zip: LOS ANGELES, CA 90059  
Phone: (310) 668-8260  
**Record ID:** 190238DN  
Service Type: NON  
Target Population: 1.7  
Expiration Date: 3/31/2019 IMS: No

**Program Name:** EXODUS FAMILY DAY TREATMENT PROGRAM  
Legal Name: SHIELDS FOR FAMILIES  
Address: 1500 EAST KAY STREET, UNITS 100, 1704, 1708, 1710, 1712, 1714, 1716, 1720,  
1736, 1740, 1746, AND 1762  
City, State Zip: COMPTON, CA 90221  
Phone: (310) 898-2450 Fax: (310) 898-2452  
**Record ID:** 190238EN  
Service Type: NON  
Target Population: 1.7  
Expiration Date: 5/31/2019 IMS: No

**Program Name:** EDEN DUAL DIAGNOSIS PROGRAM  
Legal Name: SHIELDS FOR FAMILIES  
Address: 2620 INDUSTRY WAY,  
SUITE A  
City, State Zip: LYNWOOD, CA 90262  
Phone: (323) 242-5000 Fax: (323) 242-5011  
**Record ID:** 190238FN  
Service Type: NON  
Target Population: 1.7  
Expiration Date: 3/31/2019 IMS: No

**Program Name:** SHIELDS FOR FAMILIES - MT. CARMEL TREATMENT CENTER  
Legal Name: SHIELDS FOR FAMILIES  
Address: 801 WEST 70TH STREET  
City, State Zip: LOS ANGELES, CA 90044  
Phone: (323) 242-5000 Fax: (323) 242-5011  
**Record ID:** 190238GN  
Service Type: RES  
Resident Capacity: 46  
Total Occupancy: 46  
Target Population: 1.1  
Expiration Date: 3/31/2018 IMS: No

**Program Name:** AMERICAN INDIAN CHANGING SPIRITS  
Legal Name: AMERICAN INDIAN CHANGING SPIRITS  
Address: 2120 W. WILLIAMS STREET,  
BUILDING 1 AND 2  
City, State Zip: LONG BEACH, CA 90810  
Phone: (562) 388-8118 Fax: (562) 799-1807  
**Record ID:** 190239AN  
Service Type: RES  
Resident Capacity: 16  
Total Occupancy: 16  
Target Population: 1.2  
Expiration Date: 3/31/2018 IMS: No

**Program Name:** NATIONAL COUNCIL ON ALCOHOLISM AND  
DRUG DEPENDENCE OF EAST SAN GABRIEL AND POMON  
Legal Name: NATIONAL COUNCIL ON ALCOHOLISM AND  
DRUG DEPENDENCE OF EAST SAN GABRIEL AND POMON  
Address: 656 NORTH PARK AVENUE  
City, State Zip: POMONA, CA 91768  
Phone: (909) 629-4084 Fax: (909) 629-4086  
**Record ID:** 190241BN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 7/31/2018 IMS: No

**Program Name:** NATIONAL COUNCIL ON ALCOHOLISM &  
DRUG DEPENDENCE OF EAST SAN GABRIEL & POMONA  
Legal Name: NATIONAL COUNCIL ON ALCOHOLISM AND  
DRUG DEPENDENCE OF EAST SAN GABRIEL AND POMON  
Address: 4626 NORTH GRAND AVENUE  
City, State Zip: COVINA, CA 91724  
Phone: (626) 331-5316 Fax: (626) 332-2219  
**Record ID:** 190241CN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 3/31/2018 IMS: No

**Program Name:** INTEGRATED TREATMENT PROGRAM FOR CO-OCCURRING DISORDERS  
Legal Name: HOMELESS HEALTH CARE LOS ANGELES  
Address: 2330 BEVERLY BOULEVARD  
City, State Zip: LOS ANGELES, CA 90057  
Phone: (213) 744-0724 Fax: (213) 749-2432  
**Record ID:** 190246AN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 9/30/2018 IMS: No

**Program Name:** SPIRITT FAMILY SERVICES  
Legal Name: SPIRITT FAMILY SERVICES  
Address: 8000 PAINTER AVENUE  
City, State Zip: WHITTIER, CA 90602  
Phone: (562) 903-7000 Fax: (502) 903-7707  
**Record ID:** 190247BN  
Service Type: NON  
Target Population: 1.5  
Expiration Date: 12/31/2018 IMS: No

**Program Name:** SPIRITT FAMILY SERVICES  
Legal Name: SPIRITT FAMILY SERVICES  
Address: 2000 TYLER AVENUE  
City, State Zip: SOUTH EL MONTE, CA 91733  
Phone: (626) 968-0091 Fax: (626) 968-0041  
**Record ID:** 190247CN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 12/31/2018 IMS: No

**Program Name:** SPIRITT FAMILY SERVICES  
Legal Name: SPIRITT FAMILY SERVICES  
Address: 147 SOUTH SIXTH AVENUE  
City, State Zip: LA PUENTE, CA 91746  
Phone: (626) 968-0041  
**Record ID:** 190247DN  
Service Type: NON  
Target Population: 1.5  
Expiration Date: 12/31/2018 IMS: No

**Program Name:** PASADENA RECOVERY CENTER  
Legal Name: PASADENA RECOVERY CENTER, INC.  
Address: 1811 NORTH RAYMOND AVENUE  
City, State Zip: PASADENA, CA 91103-1840  
Phone: (626) 345-9992 Fax: (626) 345-9995  
**Record ID:** 190250AP  
Service Type: RES-DETOX  
Resident Capacity: 88  
Total Occupancy: 88  
Target Population: 1.1  
Expiration Date: 10/31/2018 IMS: No

**Program Name:** PACIFIC CLINICS SUBSTANCE ABUSE AND MENTAL HEALTH SERVICES  
Legal Name: PACIFIC CLINICS  
Address: 11721 A TELEGRAPH ROAD  
City, State Zip: SANTA FE SPRINGS, CA 90670-3691  
Phone: (626) 254-5000 Fax: (562) 949-4807  
**Record ID:** 190254KN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 8/31/2019 IMS: No

**Program Name:** AMITY FOUNDATION-AMISTAD DE LOS ANGELES  
Legal Name: EPIDAURUS  
Address: 3735, 3739 AND 3745 SOUTH GRAND AVENUE  
City, State Zip: LOS ANGELES, CA 90007  
Phone: (213) 743-9078 Fax: (213) 748-5102  
**Record ID:** 190259AN  
Service Type: RES  
Resident Capacity: 184  
Total Occupancy: 184  
Target Population: 1.2  
Expiration Date: 5/31/2019 IMS: No

**Program Name:** AMITY FOUNDATION  
Legal Name: EPIDAURUS  
Address: 3750 SOUTH GRAND AVENUE  
City, State Zip: LOS ANGELES, CA 90007  
Phone: (213) 743-9075 Fax: (866) 763-2186  
**Record ID:** 190259CN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 1/31/2019 IMS: No

**Program Name:** THE HIGH ROAD PROGRAM  
Legal Name: THE HIGH ROAD PROGRAM  
Address: 700 SOUTH ARROYO PARKWAY  
City, State Zip: PASADENA, CA 91105  
Phone: (626) 793-6159 Fax: (626) 795-9540  
**Record ID:** 190262AN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 5/31/2019 IMS: No

**Program Name:** THE HIGH ROAD PROGRAM  
Legal Name: THE HIGH ROAD PROGRAM  
Address: 14430 SHERMAN WAY  
City, State Zip: VAN NUYS, CA 91405  
Phone: (818) 785-9119 Fax: (818) 785-2150  
**Record ID:** 190262BN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 5/31/2019 IMS: No

**Program Name:** SOUTH BAY HUMAN SERVICES  
Legal Name: SOUTH BAY HUMAN SERVICES COALITION, INC.  
Address: 2370 WEST CARSON STREET, SUITE 136  
City, State Zip: TORRANCE, CA 90501  
Phone: (310) 328-0780  
**Record ID:** 190268AN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 4/30/2019 IMS: No

**Program Name:** MENLO HOUSE RESIDENTIAL  
Legal Name: SADLER HEALTHCARE, INC.  
Address: 1731 SOUTH MENLO AVENUE  
City, State Zip: LOS ANGELES, CA 90006  
Phone: (323) 734-3284 Fax: (323) 724-0019  
**Record ID:** 190279CP  
Service Type: RES  
Resident Capacity: 30  
Total Occupancy: 30  
Target Population: 1.2  
Expiration Date: 12/31/2018 IMS: No

**Program Name:** MARIPOSA HOUSE  
Legal Name: SADLER HEALTHCARE, INC.  
Address: 220 N. NORMANDIE AVENUE AND  
225 N. MARIPOSA AVENUE  
City, State Zip: LOS ANGELES, CA 90004  
Phone: (213) 220-4482  
**Record ID:** 190279DP  
Service Type: RES  
Resident Capacity: 48  
Total Occupancy: 48  
Target Population: 1.2  
Expiration Date: 3/31/2019 IMS: No

**Program Name:** PASSAGES  
Legal Name: GRASSHOPPER HOUSE LLC  
Address: 6428 MEADOWS COURT  
City, State Zip: MALIBU, CA 90265  
Phone: (310) 589-2880 Fax: (310) 464-0663  
**Record ID:** 190283AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 7/31/2019 IMS: No

**Program Name:** PASSAGES C  
Legal Name: GRASSHOPPER HOUSE LLC  
Address: 6439 SYCAMORE MEADOWS DRIVE  
City, State Zip: MALIBU, CA 90265  
Phone: (310) 589-2880 Fax: (310) 464-0663  
**Record ID:** 190283CP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 8/31/2019 IMS: No

**Program Name:** PASSAGES VISTA HOUSE  
Legal Name: GRASSHOPPER HOUSE LLC  
Address: 6380 MEADOWS COURT  
City, State Zip: MALIBU, CA 90265  
Phone: (310) 589-2880 Fax: (310) 464-6592  
**Record ID:** 190283DP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 12/31/2017 IMS: No

**Program Name:** PASSAGES  
Legal Name: GRASSHOPPER HOUSE LLC  
Address: 6447 SYCAMORE MEADOWS DRIVE  
City, State Zip: MALIBU, CA 90265  
Phone: (310) 589-2880 Fax: (310) 464-0663  
**Record ID:** 190283FP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 5/31/2019 IMS: No

**Program Name:** BIENVENIDOS COMMUNITY HEALTH CENTER  
Legal Name: BIENVENIDOS COMMUNITY HEALTH CENTER  
Address: 501-507 SOUTH ATLANTIC BOULEVARD  
City, State Zip: LOS ANGELES, CA 90022  
Phone: (323) 268-5442 Fax: (323) 728-3483  
**Record ID:** 190285AN  
Service Type: NON  
Target Population: 1.3  
Expiration Date: 5/31/2017 IMS: No

**Program Name:** THE NESS COUNSELING CENTER  
Legal Name: THE NESS COUNSELING CENTER, INC.  
Address: 8512 WHITWORTH DRIVE  
City, State Zip: LOS ANGELES, CA 90035  
Phone: (310) 360-8512 Fax: (310) 360-8510  
**Record ID:** 190286AN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 5/31/2019 IMS: No

**Program Name:** MJB RECOVERY, INC.  
Legal Name: MJB TRANSITIONAL RECOVERY, INC.  
Address: 11152 SOUTH MAIN STREET  
City, State Zip: LOS ANGELES, CA 90061  
Phone: (323) 777-2491 Fax: (323) 777-0426  
**Record ID:** 190288BN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 10/31/2017 IMS: No



**Program Name:** POSITIVE STEPS, INC.  
Legal Name: POSITIVE STEPS, INC.  
Address: 5230 NORTH CLARK AVENUE, SUITE 18  
City, State Zip: LAKEWOOD, CA 90712  
Phone: (562) 804-2700 Fax: (562) 496-2104  
**Record ID:** 190289AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 6/30/2019 IMS: No

**Program Name:** TWIN TOWN TREATMENT CENTERS - TORRANCE  
Legal Name: TWIN TOWN CORPORATION  
Address: 20300 S. VERMONT AVENUE, SUITE 245  
City, State Zip: TORRANCE, CA 90502  
Phone: (310) 787-1335 Fax: (562) 493-1280  
**Record ID:** 190290AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 2/28/2019 IMS: No

**Program Name:** TWIN TOWN TREATMENT CENTERS - NORTH HOLLYWOOD  
Legal Name: TWIN TOWN CORPORATION  
Address: 6180 LAUREL CANYON BOULEVARD, SUITE 275  
City, State Zip: NORTH HOLLYWOOD, CA 91606  
Phone: (818) 985-0560 Fax: (562) 493-1280  
**Record ID:** 190290BP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 2/28/2019 IMS: No

**Program Name:** TWIN TOWN TREATMENT CENTERS, WEST HOLLYWOOD  
Legal Name: TWIN TOWN CORPORATION  
Address: 8739 SANTA MONICA BOULEVARD  
City, State Zip: WEST HOLLYWOOD, CA 90069  
Phone: (562) 493-1280 Fax: (310) 854-0134  
**Record ID:** 190290CP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 5/31/2019 IMS: No

**Program Name:** AM/PM VAN NUYS BUDGET SCHOOL - ESCUELA LATINA  
Legal Name: DRIVER SAFETY SCHOOLS, INC.  
Address: 6740 KESTER AVENUE, SUITE 206  
City, State Zip: VAN NUYS, CA 91405  
Phone: (818) 787-7878 Fax: (310) 575-0500  
**Record ID:** 190294AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 6/30/2017 IMS: No

**Program Name:** MATRIX INSTITUTE  
Legal Name: MATRIX INSTITUTE ON ADDICTIONS  
Address: 20301 VENTURA BOULEVARD, SUITE 121  
City, State Zip: WOODLAND HILLS, CA 91364  
Phone: (818) 226-6070 Fax: (818) 704-8948  
**Record ID:** 190297AN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 8/31/2019 IMS: No

**Program Name:** MATRIX INSTITUTE  
Legal Name: MATRIX INSTITUTE ON ADDICTIONS  
Address: 1849 SAWTELLE BOULEVARD, SUITE 100  
City, State Zip: LOS ANGELES, CA 90025  
Phone: (310) 478-8305 Fax: (310) 478-8639  
**Record ID:** 190297BN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 8/31/2017 IMS: No

**Program Name:** ACTION FAMILY COUNSELING, INC-RANCH  
Legal Name: ACTION FAMILY COUNSELING, INC.  
Address: 30035 BOUQUET CANYON ROAD  
City, State Zip: SAUGUS, CA 91350  
Phone: (661) 297-9705 Fax: (661) 297-9701  
**Record ID:** 190315DP  
Service Type: NON  
Target Population: 1.5  
Expiration Date: 8/31/2018 IMS: No

**Program Name:** ACTION FAMILY COUNSELING, INC.  
Legal Name: ACTION FAMILY COUNSELING, INC.  
Address: 22722 SOLEDAD CANYON ROAD  
City, State Zip: SANTA CLARITA, CA 91350  
Phone: (661) 297-9716 Fax: (661) 297-9701  
**Record ID:** 190315FP  
Service Type: NON  
Target Population: 1.8  
Expiration Date: 2/28/2018 IMS: No

**Program Name:** ACTION FAMILY COUNSELING, INC., ADULT RESIDENTIAL UNIT  
Legal Name: ACTION FAMILY COUNSELING, INC.  
Address: 30010 BOUQUET CANYON ROAD  
City, State Zip: SANTA CLARITA, CA 91390  
Phone: (800) 367-8336 Fax: (661) 297-9701  
**Record ID:** 190315HP  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 3/31/2018 IMS: No

**Program Name:** LIVING PROOF RECOVERY CENTER  
Legal Name: LIVING PROOF RECOVERY CENTER  
Address: 324 W. FOOTHILL BOULEVARD  
City, State Zip: MONROVIA, CA 91016-6420  
Phone: (626) 205-2518 Fax: (626) 386-5250  
**Record ID:** 190316BP  
Service Type: NON  
Target Population: 1.13  
Expiration Date: 8/31/2017 IMS: No

**Program Name:** I-ADARP, (INTER-AGENCY DRUG ABUSE RECOVERY PROGRAM)  
Legal Name: I-ADARP, INC.  
Address: 8330 LANKERSHIM BOULEVARD, 1ST FLOOR  
City, State Zip: NORTH HOLLYWOOD, CA 91605  
Phone: (818) 994-7454 Fax: (818) 252-1410  
**Record ID:** 190321AN  
Service Type: NON  
Target Population: 1.9  
Expiration Date: 10/31/2017 IMS: No

**Program Name:** BEIT T'SHUVAH  
Legal Name: BEIT T'SHUVAH  
Address: 8831 VENICE BOULEVARD  
City, State Zip: LOS ANGELES, CA 90034  
Phone: (310) 204-5200 Fax: (310) 204-8908  
**Record ID:** 190326AN  
Service Type: RES  
Resident Capacity: 98  
Total Occupancy: 120  
Target Population: 1.1  
Expiration Date: 12/31/2017 IMS: No

**Program Name:** ALTERNATIVE OPTIONS INTENSIVE OUTPATIENT PROGRAM  
FOR ALCOHOL & SUBSTANCE ABUSE  
Legal Name: ALTERNATIVE OPTIONS COUNSELING CENTER, INC.  
Address: 17326 EDWARDS ROAD, SUITE A115  
City, State Zip: CERRITOS, CA 90703  
Phone: (562) 921-5701 Fax: (562) 921-5703  
**Record ID:** 190340BN  
Service Type: NON  
Expiration Date: 5/31/2017 IMS: No

**Program Name:** FIRST TO SERVE, INC.  
Legal Name: FIRST TO SERVE  
Address: 4052 BUDLONG AVENUE  
City, State Zip: LOS ANGELES, CA 90037  
Phone: (323) 595-7502 Fax: (323) 758-4011  
**Record ID:** 190342CN  
Service Type: RES  
Resident Capacity: 28  
Total Occupancy: 28  
Target Population: 1.1  
Expiration Date: 10/31/2018 IMS: No

**Program Name:** VALLEY COMMUNITY HEALTHCARE DRUG AND ALCOHOL TREATMENT PROGRAM  
Legal Name: VALLEY COMMUNITY HEALTHCARE  
Address: 6801 COLDWATER CANYON AVENUE  
City, State Zip: NORTH HOLLYWOOD, CA 91605-5104  
Phone: (818) 763-1718 Fax: (818) 763-7231  
**Record ID:** 190349AN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 4/30/2018 IMS: No

**Program Name:** STORK CLUB - OPTIONS FOR RECOVERY AT  
HARBOR UCLA RESEARCH AND EDUCATION INSTITUTE  
Legal Name: LOS ANGELES BIOMEDICAL RESEARCH INSTITUTE AT HARBOR-UCLA MEDICAL CENTER  
Address: 1124 WEST CARSON STREET, BUILDING N-33  
City, State Zip: TORRANCE, CA 90502  
Phone: (310) 222-5410 Fax: (310) 787-7742  
**Record ID:** 190351AN  
Service Type: NON  
Target Population: 1.3  
Expiration Date: 8/31/2018 IMS: No

**Program Name:** CAMBODIAN ASSOCIATION OF AMERICA, COMMUNITY PREVENTION AND RECOVERY PROGRAM  
Legal Name: CAMBODIAN ASSOCIATION OF AMERICA  
Address: 2501 ATLANTIC AVENUE  
City, State Zip: LONG BEACH, CA 90806  
Phone: (562) 988-1863 Fax: (562) 427-1678  
**Record ID:** 190358AN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 11/30/2018 IMS: No

**Program Name:** ROBERT SUNDANCE FAMILY WELLNESS CENTER  
Legal Name: UNITED AMERICAN INDIAN INVOLVEMENT, INC.  
Address: 1125 WEST 6TH STREET, SUITES 103 AND 303  
City, State Zip: LOS ANGELES, CA 90017  
Phone: (213) 202-3970 Fax: (213) 202-3977  
**Record ID:** 190364AN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 9/30/2018 IMS: No

**Program Name:** CLINICA MSR. OSCAR A. ROMERO  
Legal Name: CLINICA MSR. OSCAR A ROMERO  
Address: 2032 MARENGO STREET  
SUITE B  
City, State Zip: LOS ANGELES, CA 90033  
Phone: (213) 989-7700 Fax: (213) 989-7701  
**Record ID:** 190368AN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 11/30/2018 IMS: No

**Program Name:** ANTELOPE VALLEY COUNCIL ON ALCOHOLISM & DRUG DEPENDENCY  
Legal Name: ANTELOPE VALLEY COUNCIL ON ALCOHOLISM & DRUG DEPENDENCY  
Address: 311 EAST AVENUE K-4  
City, State Zip: LANCASTER, CA 93535  
Phone: (661) 948-5046 Fax: (661) 948-5049  
**Record ID:** 190376AN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 2/28/2019 IMS: No

**Program Name:** HOUSE OF UHURU  
Legal Name: WATTS HEALTHCARE CORPORATION  
Address: 8005 SOUTH FIGUEROA STREET  
City, State Zip: LOS ANGELES, CA 90003  
Phone: (323) 568-5400 Fax: (323) 752-8031  
**Record ID:** 190377AN  
Service Type: RES  
Resident Capacity: 66  
Total Occupancy: 66  
Target Population: 1.1  
Expiration Date: 3/31/2019 IMS: No

**Program Name:** HOUSE OF UHURU  
Legal Name: WATTS HEALTHCARE CORPORATION  
Address: 8005 SOUTH FIGUEROA STREET  
City, State Zip: LOS ANGELES, CA 90003  
Phone: (323) 568-5400 Fax: (323) 752-8031  
**Record ID:** 190377BN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 3/31/2019 IMS: No

**Program Name:** HELPLINE YOUTH COUNSELING  
Legal Name: HELPLINE YOUTH COUNSELING  
Address: 14181 TELEGRAPH ROAD, WEST WING  
City, State Zip: WHITTIER, CA 90604  
Phone: (562) 273-0722 Fax: (562) 946-3641  
**Record ID:** 190386AN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 5/31/2018 IMS: No

**Program Name:** NEW PERCEPTIONS  
Legal Name: NEW PERCEPTIONS, INC.  
Address: 17826 ROMAR STREET  
City, State Zip: NORTHRIDGE, CA 91325  
Phone: (818) 943-2175 Fax: (818) 885-9595  
**Record ID:** 190416AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 8/31/2018 IMS: No

**Program Name:** MCINTYRE HOUSE  
Legal Name: MCINTYRE HOUSE  
Address: 544 NORTH KENMORE AVENUE  
City, State Zip: LOS ANGELES, CA 90004  
Phone: (323) 662-0855 Fax: (323) 622-0842  
**Record ID:** 190420AN  
Service Type: RES  
Resident Capacity: 16  
Total Occupancy: 19  
Target Population: 1.2  
Expiration Date: 6/30/2018 IMS: No

**Program Name:** CLEARVIEW TREATMENT PROGRAMS  
Legal Name: CLEARVIEW CENTERS, LLC  
Address: 2432 AND 2432 1/2 WALNUT AVENUE  
City, State Zip: VENICE, CA 90291  
Phone: (310) 862-8980 Fax: (310) 862-8822  
**Record ID:** 190438AP  
Service Type: RES-DETOX  
Resident Capacity: 9  
Total Occupancy: 9  
Target Population: 1.1  
Expiration Date: 6/30/2018 IMS: No

**Program Name:** CLEARVIEW TREATMENT PROGRAMS  
Legal Name: CLEARVIEW CENTERS, LLC  
Address: 2435 GLYNDON AVENUE  
City, State Zip: VENICE, CA 90291  
Phone: (310) 305-2691 Fax: (310) 305-2693  
**Record ID:** 190438CP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 8/31/2018 IMS: No

**Program Name:** CLEARVIEW TREATMENT PROGRAMS  
Legal Name: CLEARVIEW CENTERS, LLC  
Address: 2427 WALNUT AVENUE  
City, State Zip: VENICE, CA 90291  
Phone: (310) 448-8822 Fax: (310) 448-8833  
**Record ID:** 190438DP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 11/30/2017 IMS: No

**Program Name:** THE CANYON AT PEACE PARK  
Legal Name: THE CANYON AT PEACE PARK  
Address: 2890 AND 2900 KANAN DUME ROAD  
City, State Zip: MALIBU, CA 90265  
Phone: (310) 457-3209 Fax: (310) 457-4440  
**Record ID:** 190441AP  
Service Type: RES-DETOX  
Resident Capacity: 16  
Total Occupancy: 16  
Target Population: 1.1  
Expiration Date: 5/31/2018 IMS: No

**Program Name:** CENTER FOR INTEGRATED FAMILY AND HEALTH SERVICES (THE FAMILY CENTER)  
Legal Name: CENTER FOR INTEGRATED FAMILY AND HEALTH SERVICES, INCORPORATED  
Address: 540 SOUTH EREMLAND DRIVE, SUITES A-D  
City, State Zip: COVINA, CA 91723  
Phone: (626) 967-5103 Fax: (626) 967-1339  
**Record ID:** 190442AN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 7/31/2018 IMS: No

**Program Name:** ALCOHOL & DRUG PROGRAM  
Legal Name: CHILD & FAMILY CENTER  
Address: 21545 CENTRE POINTE PARKWAY  
City, State Zip: SANTA CLARITA, CA 91350  
Phone: (661) 259-9439 Fax: (661) 259-9658  
**Record ID:** 190459AN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 2/28/2019 IMS: No

**Program Name:** ABSOLUTE CONTROL TRANSITIONAL COUNSELING CENTER  
Legal Name: ABSOLUTE CONTROL TRANSITIONAL COUNSELING CENTER INC.  
Address: 3111 WINONA AVENUE, SUITE 201  
City, State Zip: BURBANK, CA 91504  
Phone: (626) 792-8797 Fax: (626) 792-8798  
**Record ID:** 190462AN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 3/31/2019 IMS: No

**Program Name:** SUBSTANCE ABUSE PREVENTION AND TREATMENT PROGRAM,  
DIV. OF ADOLESCENT MED., CHILD  
Legal Name: CHILDREN'S HOSPITAL LOS ANGELES  
Address: 5000 SUNSET BOULEVARD, 7TH FLOOR, SUITE 701  
City, State Zip: LOS ANGELES, CA 90027  
Phone: (323) 361-2463 Fax: (323) 913-7951  
**Record ID:** 190473AN  
Service Type: NON  
Target Population: 1.5  
Expiration Date: 5/31/2019 IMS: No

**Program Name:** CLIFFSIDE MALIBU  
Legal Name: CLIFFSIDE MALIBU  
Address: 30060 ANDROMEDA LANE  
City, State Zip: MALIBU, CA 90265  
Phone: (310) 589-2800 Fax: (310) 589-2802  
**Record ID:** 190474AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 6/30/2019 IMS: No

**Program Name:** INGLEWOOD AREA ALCOHOL AND DRUG PROGRAM  
Legal Name: LEWIS PROFESSIONAL SERVICES, INCORPORATED  
Address: 400 SOUTH LA BREA, SUITE # 101,102, 200, 202, 203, 204 AND 205  
City, State Zip: INGELWOOD, CA 90301  
Phone: (310) 674-6267 Fax: (310) 673-5904  
**Record ID:** 190480AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 3/31/2018 IMS: No

**Program Name:** VALLEY WOMEN'S CENTER  
Legal Name: VALLEY WOMEN'S CENTER, INC.  
Address: 22110 ROSCOE BOULEVARD, SUITE 204  
City, State Zip: CANOGA PARK, CA 91304  
Phone: (818) 713-8700 Fax: (818) 713-8585  
**Record ID:** 190502AN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 1/31/2018 IMS: No

**Program Name:** HELPING KIDS TO RECOVER, INC.  
Legal Name: HELPING KIDS TO RECOVER, INC.  
Address: 637 EAST ALBERTONI STREET, SUITES 200, 201 AND 203  
City, State Zip: CARSON, CA 90746  
Phone: (310) 217-0616 Fax: (310) 217-0545  
**Record ID:** 190503AN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 5/31/2018 IMS: No

**Program Name:** NEW HOPE DRUG AND ALCOHOL TREATMENT PROGRAM  
Legal Name: NEW HOPE DRUG ALCOHOL TREATMENT PROGRAM, INC.  
Address: 1841 AND 1841 1/2 WEST IMPERIAL HIGHWAY  
City, State Zip: LOS ANGELES, CA 90047  
Phone: (323) 750-2850 Fax: (323) 750-0851  
**Record ID:** 190504AN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 2/28/2018 IMS: No

**Program Name:** COASTAL RECOVERY CENTER  
Legal Name: TRANSCULTURAL HEALTH DEVELOPMENT, INC.  
Address: 117 EAST HARRY BRIDGES BOULEVARD  
City, State Zip: WILMINGTON, CA 90744  
Phone: (310) 549-8383 Fax: (310) 549-9304  
**Record ID:** 190511BP  
Service Type: NON-DETOX  
Target Population: 1.1  
Expiration Date: 3/31/2019 IMS: No

**Program Name:** PASSAGES EAST  
Legal Name: FEDERAL RECOVERY SYSTEMS LLC  
Address: 6439 (B) SYCAMORE MEADOWS DRIVE  
City, State Zip: MALIBU, CA 90265  
Phone: (310) 589-2880 Fax: (310) 464-6592  
**Record ID:** 190516AP  
Service Type: RES-DETOX  
Resident Capacity: 5  
Total Occupancy: 5  
Target Population: 1.1  
Expiration Date: 12/31/2017 IMS: No

**Program Name:** PASSAGES NORTHEAST  
Legal Name: FEDERAL RECOVERY SYSTEMS LLC  
Address: 6428 - B MEADOWS COURT  
City, State Zip: MALIBU, CA 90265  
Phone: (310) 589-2880 Fax: (310) 464-6592  
**Record ID:** 190516BP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 12/31/2017 IMS: No

**Program Name:** EATON CANYON TREATMENT CENTER  
Legal Name: EATON CANYON RECOVERY SERVICES, INC.  
Address: 3323 EAST FAIRPOINT STREET  
City, State Zip: PASADENA, CA 91107  
Phone: (626) 798-0150 Fax: (626) 798-8685  
**Record ID:** 190521AP  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 9  
Target Population: 1.1  
Expiration Date: 3/31/2018 IMS: No

**Program Name:** EATON CANYON TREATMENT CENTER OUT PATIENT SERVICES  
Legal Name: EATON CANYON RECOVERY SERVICES, INC.  
Address: 259 NORTH SIERRA MADRE VILLA  
City, State Zip: PASADENA, CA 91107  
Phone: (626) 798-0150 Fax: (626) 798-8685  
**Record ID:** 190521BP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 2/28/2019 IMS: No

**Program Name:** EATON CANYON TREATMENT CENTER - WEST  
Legal Name: EATON CANYON RECOVERY SERVICES, INC.  
Address: 743 NORTH HILL AVENUE  
City, State Zip: PASADENA, CA 91104  
Phone: (626) 798-0150 Fax: (626) 798-8685  
**Record ID:** 190521CP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 8  
Target Population: 1.1  
Expiration Date: 6/30/2019 IMS: No

**Program Name:** KB RECOVERY  
Legal Name: KEVIN BABAYAN  
Address: 15722 TUPPER STREET  
City, State Zip: NORTH HILLS, CA 91343  
Phone: (818) 231-8054 Fax: (818) 892-9471  
**Record ID:** 190527AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 6/30/2018 IMS: No

**Program Name:** WEINGART CENTER ASSOCIATION/EPIC  
Legal Name: WEINGART CENTER ASSOCIATION  
Address: 554 AND 566 SOUTH SAN PEDRO STREET,  
4TH, 7TH AND 8TH FLOOR  
City, State Zip: LOS ANGELES, CA 90013  
Phone: (213) 617-9000 Fax: (213) 623-0408  
**Record ID:** 190541AN  
Service Type: RES  
Resident Capacity: 85  
Total Occupancy: 85  
Target Population: 1.1  
Expiration Date: 1/31/2019 IMS: No

**Program Name:** CHARTER OAK RECOVERY CENTER  
Legal Name: AURORA CHARTER OAK - LOS ANGELES, LLC  
Address: 1161 EAST COVINA BOULEVARD,  
BUILDING C  
City, State Zip: COVINA, CA 91724  
Phone: (626) 966-1632  
**Record ID:** 190551AP  
Service Type: RES  
Resident Capacity: 12  
Total Occupancy: 12  
Target Population: 1.1  
Expiration Date: 11/30/2018 IMS: No

**Program Name:** MALIBU BEACH RECOVERY CENTER  
Legal Name: MALIBU BEACH RECOVERY CENTER, LLC  
Address: 1752 CORRAL CANYON ROAD  
City, State Zip: MALIBU, CA 90265  
Phone: (310) 317-9133  
**Record ID:** 190562AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 6/30/2019 IMS: No

**Program Name:** MALIBU BEACH RECOVERY CENTER - IOP  
Legal Name: MALIBU BEACH RECOVERY CENTER, LLC  
Address: 15415 W. SUNSET BOULEVARD, SUITE 200  
City, State Zip: PACIFIC PALISADES, CA 90272  
Phone: (310) 456-2026  
**Record ID:** 190562BP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 9/30/2018 IMS: No



**Program Name:** MALIBU BEACH RECOVERY CENTER - BRENTWOOD HOUSE  
Legal Name: MALIBU BEACH RECOVERY CENTER, LLC  
Address: 101 SOUTH SALTAIR AVENUE  
City, State Zip: LOS ANGELES, CA 90049  
Phone: (310) 472-0139  
**Record ID:** 190562CP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 9/30/2018 IMS: No

**Program Name:** MALIBU BEACH RECOVERY CENTER  
Legal Name: MALIBU BEACH RECOVERY CENTER, LLC  
Address: 4322 ESCONDIDO DRIVE  
City, State Zip: MALIBU, CA 90265  
Phone: (424) 235-2346  
**Record ID:** 190562EP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 6/30/2019 IMS: No

**Program Name:** ALCOHOL AND SUBSTANCE ABUSE PROGRAMS, INC.  
Legal Name: ALCOHOL AND SUBSTANCE ABUSE PROGRAMS, INC.  
Address: 1084 & 1092 NEW YORK DRIVE  
City, State Zip: ALTADENA, CA 91001  
Phone: (818) 421-7890 Fax: (626) 798-2777  
**Record ID:** 190569AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 10/31/2017 IMS: No

**Program Name:** SUNSET MALIBU  
Legal Name: SUNSET MALIBU  
Address: 30042 ANDROMEDA LANE  
City, State Zip: MALIBU, CA 90265  
Phone: (310) 457-9500 Fax: (310) 457-9544  
**Record ID:** 190575BP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 1/31/2018 IMS: No

**Program Name:** AUTHENTIC RECOVERY CENTER  
Legal Name: AUTHENTIC RECOVERY, LLC  
Address: 2203 OVERLAND AVENUE  
City, State Zip: LOS ANGELES, CA 90064  
Phone: (310) 474-2100 Fax: (310) 481-2272  
**Record ID:** 190577AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 8/31/2019 IMS: No

**Program Name:** AUTHENTIC RECOVERY CENTER  
Legal Name: AUTHENTIC RECOVERY, LLC  
Address: 2207 PELHAM AVENUE  
City, State Zip: LOS ANGELES, CA 90064  
Phone: (310) 401-4692 Fax: (310) 481-2264  
**Record ID:** 190577BP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 3/31/2018 IMS: No

**Program Name:** AUTHENTIC RECOVERY CENTER  
Legal Name: AUTHENTIC RECOVERY, LLC  
Address: 10780 SANTA MONICA BOULEVARD, SUITE 230 & 260  
City, State Zip: LOS ANGELES, CA 90025  
Phone: (310) 474-2100 Fax: (310) 481-2264  
**Record ID:** 190577CP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 10/31/2018 IMS: No

**Program Name:** AUTHENTIC RECOVERY CENTER  
Legal Name: AUTHENTIC RECOVERY, LLC  
Address: 10700 CUSHDON AVE.  
City, State Zip: LOS ANGELES, CA 90064  
Phone: (310) 474-2100 Fax: (310) 481-2264  
**Record ID:** 190577DP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.8  
Expiration Date: 2/28/2019 IMS: Yes

**Program Name:** HARBOR AREA SUBSTANCE ABUSE TREATMENT CENTER  
Legal Name: HACC INC.  
Address: 599 WEST 9TH STREET  
City, State Zip: SAN PEDRO, CA 90731  
Phone: (310) 831-0331 Fax: (310) 831-0004  
**Record ID:** 190586AP  
Service Type: NON  
Target Population: 1.5  
Expiration Date: 11/30/2017 IMS: No

**Program Name:** DIVINE HEALTHCARE SERVICES, INC.  
Legal Name: DIVINE HEALTHCARE SERVICES, INC.  
Address: 405 WEST MANCHESTER BOULEVARD, SUITE A  
City, State Zip: INGLEWOOD, CA 90301  
Phone: (310) 672-3820  
**Record ID:** 190604AN  
Service Type: NON  
Target Population: 1.5  
Expiration Date: 5/31/2018 IMS: No

**Program Name:** YOUR EMPOWERING SOLUTIONS  
Legal Name: YOUR EMPOWERING SOLUTIONS  
Address: 4020 PALOS VERDES DRIVE NORTH, SUITE 201  
City, State Zip: ROLLING HILLS ESTATE, CA 90274  
Phone: (310) 541-6350 Fax: (310) 541-6497  
**Record ID:** 190605AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 3/31/2018 IMS: No

**Program Name:** CIVIGENICS, INC., LONG BEACH FACILITY  
Legal Name: COMMUNITY EDUCATION CENTERS, INC., DBA CALIFORNIA AS CEC INTL., INC.  
Address: 2233 EAST 69TH STREET  
City, State Zip: LONG BEACH, CA 90805  
Phone: (562) 663-0711 Fax: (562) 663-1343  
**Record ID:** 190606AP  
Service Type: RES  
Resident Capacity: 112  
Total Occupancy: 112  
Target Population: 1.2  
Expiration Date: 5/31/2018 IMS: No

**Program Name:** SUMMIT MALIBU  
Legal Name: MALIBU LIGHTHOUSE TREATMENT CENTER, LLC  
Address: 28011 PAQUET PLACE  
City, State Zip: MALIBU, CA 90265  
Phone: (310) 457-0787 Fax: (310) 457-8067  
**Record ID:** 190612BP  
Service Type: RES-DETOX  
Resident Capacity: 7  
Total Occupancy: 7  
Target Population: 1.1  
Expiration Date: 5/31/2018 IMS: No

**Program Name:** SUMMIT MALIBU LOWER  
Legal Name: MALIBU LIGHTHOUSE TREATMENT CENTER, LLC  
Address: 27026 SEA VISTA DRIVE  
City, State Zip: MALIBU, CA 90265  
Phone: (310) 457-0787 Fax: (310) 457-8067  
**Record ID:** 190612CP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 9/30/2018 IMS: No

**Program Name:** PROMISES TREATMENT CENTERS IV  
Legal Name: PROMAL4, INC.  
Address: 20729 ROCKCROFT DRIVE  
City, State Zip: MALIBU, CA 90265  
Phone: (310) 317-9233 Fax: (310) 317-9233  
**Record ID:** 190617AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 12/31/2018 IMS: No

**Program Name:** DIXON RECOVERY INSTITUTE, INC.  
Legal Name: DIXON RECOVERY INSTITUTE, INC.  
Address: 1512 W. SLAUSON AVENUE, ROOMS 103, 202 & 210  
City, State Zip: LOS ANGELES, CA 90047  
Phone: (323) 244-5677 Fax: (866) 582-9013  
**Record ID:** 190622AN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 2/28/2018 IMS: No

**Program Name:** PROMISES TREATMENT CENTERS III  
Legal Name: SBAR2 INC.  
Address: 3743 SOUTH BARRINGTON AVENUE  
City, State Zip: LOS ANGELES, CA 90066  
Phone: (310) 390-2340  
**Record ID:** 190623AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 12/31/2018 IMS: No

**Program Name:** PROMISES TREATMENT CENTERS II  
Legal Name: PROMAL2 INC.  
Address: 20723 ROCKCROFT DRIVE  
City, State Zip: MALIBU, CA 90265  
Phone: (310) 317-9233 Fax: (310) 943-0438  
**Record ID:** 190624AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 12/31/2018 IMS: No

**Program Name:** PROMISES RESIDENTIAL TREATMENT CENTERS  
Legal Name: WESTSIDE SOBER LIVING CENTERS, INC.  
Address: 20725 ROCKCROFT DRIVE  
City, State Zip: MALIBU, CA 90265  
Phone: (310) 317-9233 Fax: (310) 943-0438  
**Record ID:** 190625AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 12/31/2018 IMS: No

**Program Name:** PROMISES RESIDENTIAL TREATMENT CENTERS  
Legal Name: WESTSIDE SOBER LIVING CENTERS, INC.  
Address: 3743 1/2 SOUTH BARRINGTON AVENUE  
City, State Zip: LOS ANGELES, CA 90066  
Phone: (310) 390-2340 Fax: (310) 391-6436  
**Record ID:** 190625CP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 12/31/2018 IMS: No

**Program Name:** PROMISES TREATMENT CENTERS VI  
Legal Name: WESTSIDE SOBER LIVING CENTERS, INC.  
Address: 20713 ROCKCROFT DRIVE  
City, State Zip: MALIBU, CA 90265  
Phone: (310) 317-9233 Fax: (310) 317-9287  
**Record ID:** 190625EP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 1/31/2019 IMS: No

**Program Name:** PROMISES TREATMENT CENTERS - OUTPATIENT PROGRAM  
Legal Name: WESTSIDE SOBER LIVING CENTERS, INC.  
Address: 2045 S. BARRINGTON AVENUE SUITE B  
City, State Zip: LOS ANGELES, CA 90025  
Phone: (310) 268-7737 Fax: (310) 479-3520  
**Record ID:** 190625FP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 2/28/2019 IMS: No

**Program Name:** PROFESSIONALS TREATMENT AT PROMISES  
Legal Name: WESTSIDE SOBER LIVING CENTERS, INC.  
Address: 2515 WILSHIRE BOULEVARD  
City, State Zip: SANTA MONICA, CA 90403  
Phone: (424) 744-5155 Fax: (310) 943-3389  
**Record ID:** 190625GP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 2/28/2019 IMS: No

**Program Name:** RIDGEVIEW RANCH  
Legal Name: RIDGEVIEW DRIVE RANCH, LLC  
Address: 3085 RIDGEVIEW DRIVE  
City, State Zip: ALTADENA, CA 91001  
Phone: (626) 482-3478 Fax: (626) 791-1592  
**Record ID:** 190627AP  
Service Type: RES  
Resident Capacity: 10  
Total Occupancy: 10  
Target Population: 1.1  
Expiration Date: 2/28/2018 IMS: No

**Program Name:** RIDGEVIEW RANCH II  
Legal Name: RIDGEVIEW DRIVE RANCH, LLC  
Address: 3323 MARENGO AVENUE  
City, State Zip: ALTADENA, CA 91001  
Phone: (626) 765-9600 Fax: (626) 765-9605  
**Record ID:** 190627BP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 10  
Target Population: 1.1  
Expiration Date: 8/31/2018 IMS: No

**Program Name:** RIDGEVIEW RANCH III  
Legal Name: RIDGEVIEW DRIVE RANCH, LLC  
Address: 915 GREEN LANE  
City, State Zip: LA CANADA FLINTRIDGE, CA 91011  
Phone: (626) 254-7881  
**Record ID:** 190627FP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 10  
Target Population: 1.1  
Expiration Date: 6/30/2019 IMS: Yes

**Program Name:** MEDI-CURE HEALTH SERVICES, INC.  
Legal Name: MEDI-CURE HEALTH SERVICES, INC.  
Address: 3756 SANTA ROSALIA DRIVE # 417  
City, State Zip: LOS ANGELES, CA 90008  
Phone: (323) 295-1136 Fax: (323) 295-1071  
**Record ID:** 190636AN  
Service Type: NON  
Target Population: 1.5  
Expiration Date: 10/31/2018 IMS: No

**Program Name:** DAVID & MARGARET YOUTH AND FAMILY SERVICES RECOVERY PROGRAM  
Legal Name: DAVID AND MARGARET HOME, INC.  
Address: 1350 THIRD STREET  
City, State Zip: LA VERNE, CA 91750  
Phone: (909) 596-5921 Ext:3500 Fax: (909) 596-3954  
**Record ID:** 190641AN  
Service Type: DSS  
Target Population: 1.5  
Expiration Date: 5/31/2019 IMS: No

**Program Name:** MILESTONES 1, THE RANCH MALIBU VENTURE 1  
Legal Name: THE RANCH MALIBU VENTURE 1  
Address: 200 VERA CANYON ROAD  
City, State Zip: MALIBU, CA 90265  
Phone: (818) 879-9110 Fax: (818) 879-9011  
**Record ID:** 190649AP  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 4/30/2019 IMS: No

**Program Name:** MILESTONES 2, THE RANCH MALIBU VENTURE 1  
Legal Name: THE RANCH MALIBU VENTURE 1  
Address: 221 VERA CANYON ROAD  
City, State Zip: MALIBU, CA 90265  
Phone: (818) 879-9110 Fax: (818) 879-9011  
**Record ID:** 190649BP  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 4/30/2019 IMS: No

**Program Name:** PASSAGES 8  
Legal Name: 6390 MEADOWS COURT LLC  
Address: 6390 MEADOWS COURT  
City, State Zip: MALIBU, CA 90265  
Phone: (310) 589-2880 Fax: (310) 464-0663  
**Record ID:** 190650AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 9/30/2018 IMS: No

**Program Name:** PASSAGES 9  
Legal Name: 6390A MEADOWS COURT LLC  
Address: 6390-B MEADOWS COURT  
(REAR GUEST HOUSE)  
City, State Zip: MALIBU, CA 90265  
Phone: (310) 589-2880 Fax: (310) 464-0663  
**Record ID:** 190652AP  
Service Type: RES-DETOX  
Resident Capacity: 5  
Total Occupancy: 5  
Target Population: 1.1  
Expiration Date: 9/30/2018 IMS: No

**Program Name:** 2ND CHANCE FOR RECOVERY  
Legal Name: 2ND CHANCE FOR RECOVERY, INC.  
Address: 600 E 7TH STREET, SUITE 104 & 105  
City, State Zip: LOS ANGELES, CA 90021  
Phone: (213) 537-0110 Fax: (213) 537-0880  
**Record ID:** 190653AN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 7/31/2018 IMS: No

**Program Name:** SERENITY MALIBU  
Legal Name: SEASONS RECOVERY CENTERS LLC  
Address: 6021 GALAHAD ROAD  
City, State Zip: MALIBU, CA 90265  
Phone: (424) 234-2044 Fax: (818) 337-0365  
**Record ID:** 190655AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 8  
Target Population: 1.1  
Expiration Date: 4/30/2019 IMS: No

**Program Name:** SEASONS AGOURA  
Legal Name: SEASONS RECOVERY CENTERS LLC  
Address: 5850 LAPWORTH DRIVE  
City, State Zip: AGOURA HILLS, CA 91301  
Phone: (747) 222-7802 Fax: (424) 235-2017  
**Record ID:** 190655CP  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 6/30/2019 IMS: No

**Program Name:** YOU CAN ALCOHOL AND DRUG COUNSELING AND EDUCATION PROGRAM  
Legal Name: YOU CAN HEALTH SERVICES  
Address: 600 WEST MANCHESTER AVENUE, SUITE 5  
City, State Zip: LOS ANGELES, CA 90044  
Phone: (310) 349-9778  
**Record ID:** 190656AN  
Service Type: NON  
Target Population: 1.5  
Expiration Date: 9/30/2018 IMS: No

**Program Name:** CLIFFSIDE MALIBU II  
Legal Name: CLIFFSIDE MALIBU II  
Address: 5853 BUSCH DRIVE  
City, State Zip: MALIBU, CA 90265  
Phone: (800) 332-9202 Fax: (424) 781-4708  
**Record ID:** 190658AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 2/28/2019 IMS: No

**Program Name:** SOBA TREATMENT CENTER  
Legal Name: SOBALIVING LLC.  
Address: 22677 PACIFIC COAST HIGHWAY  
City, State Zip: MALIBU, CA 90265  
Phone: (310) 457-5250  
**Record ID:** 190664AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 4/30/2019 IMS: No

**Program Name:** SOBA RECOVERY CENTER  
Legal Name: SOBALIVING LLC.  
Address: 27437 WINDING WAY  
City, State Zip: MALIBU, CA 90265  
Phone: (310) 589-2180 Fax: (310) 919-3667  
**Record ID:** 190664BP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 7/31/2018 IMS: No

**Program Name:** HANNAH'S FIRST STEP TREATMENT CENTER  
Legal Name: HANNA'S HOUSE  
Address: 5900 SOUTH EASTERN AVENUE, SUITE 186  
City, State Zip: COMMERCE, CA 90040  
Phone: (323) 278-6501 Fax: (323) 278-6515  
**Record ID:** 190678AN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 10/31/2018 IMS: No

**Program Name:** OCEANSIDE MALIBU  
Legal Name: OCEANSIDE TRANSITIONAL LIVING IN MALIBU, INC.  
Address: 21022 PACIFIC COAST HIGHWAY  
City, State Zip: MALIBU, CA 90265  
Phone: (818) 917-3225 Fax: (310) 456-3305  
**Record ID:** 190687AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 5/31/2019 IMS: No

**Program Name:** OCEANSIDE TRANSITIONAL LIVING IN MALIBU, INC.  
Legal Name: OCEANSIDE TRANSITIONAL LIVING IN MALIBU, INC.  
Address: 23480 PARK SORRENTO,  
217A  
City, State Zip: CALABASAS, CA 91302  
Phone: (818) 917-3225 Fax: (888) 999-9477  
**Record ID:** 190687BP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 10/31/2018 IMS: No

**Program Name:** KLEAN WEST HOLLYWOOD  
Legal Name: KLEAN W. HOLLYWOOD, LLC  
Address: 840, 842, 844, 846, 848, 850, 852, 852 1/2, 854 HILLDALE AVENUE  
City, State Zip: WEST HOLLYWOOD, CA 90069  
Phone: (310) 895-7095 Fax: (310) 358-9374  
**Record ID:** 190692AP  
Service Type: RES-DETOX  
Resident Capacity: 26  
Total Occupancy: 26  
Target Population: 1.1  
Expiration Date: 12/31/2018 IMS: No

**Program Name:** KLEAN W. HOLLYWOOD OUTPATIENT  
Legal Name: KLEAN W. HOLLYWOOD, LLC  
Address: 9000 SUNSET BOULEVARD, SUITE 650-B  
City, State Zip: WEST HOLLYWOOD, CA 90069  
Phone: (310) 922-2264  
**Record ID:** 190692HP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 6/30/2018 IMS: No

**Program Name:** SEASONS IN MALIBU  
Legal Name: SEASONS RECOVERY CENTERS LLC  
Address: 32223 PACIFIC COAST HIGHWAY  
City, State Zip: MALIBU, CA 90265  
Phone: (424) 457-8396 Fax: (424) 235-2017  
**Record ID:** 190695AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 8  
Target Population: 1.1  
Expiration Date: 5/31/2018 IMS: No

**Program Name:** THE HILLS TREATMENT CENTER, LLC  
Legal Name: THE HILLS TREATMENT CENTER, LLC  
Address: 8147, 8171 AND 8207 MULHOLLAND DRIVE, AND  
8507 WILLOW GLEN ROAD  
City, State Zip: LOS ANGELES, CA 90046  
Phone: (323) 791-5489 Fax: (877) 729-8207  
**Record ID:** 190703AP  
Service Type: RES-DETOX  
Resident Capacity: 21  
Total Occupancy: 21  
Target Population: 1.1  
Expiration Date: 10/31/2018 IMS: No

**Program Name:** CHAPMAN HOUSE  
Legal Name: CHAPMAN HOUSE, INC.  
Address: 834 PACIFIC AVENUE  
City, State Zip: LONG BEACH, CA 90813  
Phone: (714) 742-2909 Fax: (714) 288-6130  
**Record ID:** 190706AP  
Service Type: RES  
Resident Capacity: 37  
Total Occupancy: 37  
Target Population: 1.3  
Expiration Date: 6/30/2018 IMS: No

**Program Name:** PACIFICA RECOVERY, INC.  
Legal Name: PACIFICA RECOVERY, INC.  
Address: 415 WEST FOOTHILL BOULEVARD, SUITES 210 AND 211  
City, State Zip: CLAREMONT, CA 91711  
Phone: (919) 447-5081 Fax: (919) 447-5974  
**Record ID:** 190712AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 2/28/2019 IMS: No



**Program Name:** MELA COUNSELING SERVICES CENTER, INC.  
Legal Name: MELA COUNSELING SERVICES CENTER, INC.  
Address: 5723 WHITTIER BOULEVARD  
City, State Zip: LOS ANGELES, CA 90022-4222  
Phone: (323) 721-6855 Fax: (323) 721-8631  
**Record ID:** 190713AN  
Service Type: NON  
Target Population: 1.10  
Expiration Date: 3/31/2019 IMS: No

**Program Name:** MINI HOUSE RESIDENTIAL TREATMENT  
Legal Name: JWCH INSTITUTE, INC.  
Address: 303 EAST 52ND STREET  
City, State Zip: LOS ANGELES, CA 90011  
Phone: (323) 813-0200 Fax: (323) 215-0170  
**Record ID:** 190718AN  
Service Type: RES  
Resident Capacity: 31  
Total Occupancy: 31  
Target Population: 1.4  
Expiration Date: 4/30/2019 IMS: No

**Program Name:** SOLUTION FAMILY RESOURCE CENTER  
Legal Name: JWCH INSTITUTE, INC.  
Address: 1218 EAST COMPTON BOULEVARD  
City, State Zip: COMPTON, CA 90221  
Phone: (310) 608-1505 Fax: (323) 215-0170  
**Record ID:** 190718BN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 3/31/2019 IMS: No

**Program Name:** CENTER FOR COMMUNITY HEALTH  
Legal Name: JWCH INSTITUTE, INC.  
Address: 522 S SAN PEDRO STREET  
City, State Zip: LOS ANGELES, CA 90013  
Phone: (213) 486-4050 Fax: (213) 627-4015  
**Record ID:** 190718CN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 7/31/2018 IMS: No

**Program Name:** ALTERNATIVES RECOVERY  
Legal Name: SPENCER RECOVERY CENTERS, INC.  
Address: 2530 HYPERION AVENUE  
City, State Zip: LOS ANGELES, CA 90027  
Phone: (949) 313-5223  
**Record ID:** 190721AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 9/30/2017 IMS: No

**Program Name:** PROMINENCE TREATMENT CENTER  
Legal Name: PROMINENCE CORPORATION  
Address: 2150 COLD CANYON ROAD  
City, State Zip: CALABASAS, CA 91302  
Phone: (818) 591-6869 Fax: (818) 914-6279  
**Record ID:** 190722AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 12  
Target Population: 1.1  
Expiration Date: 6/30/2019 IMS: No

**Program Name:** MALIBU CANYON REHABILITATION  
Legal Name: PROMINENCE CORPORATION  
Address: 4505 LAS VIRGENES ROAD, SUITE 205 & 207  
City, State Zip: CALABASAS, CA 91302-1956  
Phone: (818) 878-6900 Fax: (818) 878-6902  
**Record ID:** 190722BP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 6/30/2019 IMS: No

**Program Name:** PROMINENCE TREATMENT CENTER  
Legal Name: PROMINENCE CORPORATION  
Address: 25053 MULHOLLAND HIGHWAY  
City, State Zip: CALABASAS, CA 91302  
Phone: (818) 225-8102 Fax: (818) 914-6840  
**Record ID:** 190722CP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 7/31/2018 IMS: No

**Program Name:** THE CONTROL CENTER  
Legal Name: THE CONTROL CENTER, INC.  
Address: 8383 WILSHIRE BOULEVARD, SUITE 228  
City, State Zip: BEVERLY HILLS, CA 90211-2433  
Phone: (310) 271-8700 Fax: (310) 271-8703  
**Record ID:** 190723AP  
Service Type: NON-DETOX  
Target Population: 1.1  
Expiration Date: 8/31/2019 IMS: No

**Program Name:** LA FUENTE HOLLYWOOD TREATMENT CENTER LLC  
Legal Name: LA FUENTE HOLLYWOOD TREATMENT CENTER LLC  
Address: 5718 & 5718 1/2 FOUNTAIN AVENUE  
City, State Zip: LOS ANGELES, CA 90028  
Phone: (323) 464-2947 Fax: (323) 464-2947  
**Record ID:** 190725AP  
Service Type: RES-DETOX  
Resident Capacity: 10  
Total Occupancy: 10  
Target Population: 1.10  
Expiration Date: 9/30/2017 IMS: No

**Program Name:** LA FUENTE HOLLYWOOD OUTPATIENT  
Legal Name: LA FUENTE HOLLYWOOD TREATMENT CENTER LLC  
Address: 1601 NORTH GOWER STREET, SUITE 101  
City, State Zip: LOS ANGELES, CA 90028  
Phone: (323) 464-2947 Fax: (323) 544-6307  
**Record ID:** 190725BP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 5/31/2019 IMS: No

**Program Name:** HEALTHRIGHT 360  
Legal Name: HEALTHRIGHT 360  
Address: 12423 DAHLIA AVENUE  
City, State Zip: EL MONTE, CA 91732  
Phone: (626) 258-0325 Fax: (415) 865-0119  
**Record ID:** 190728AN  
Service Type: RES  
Resident Capacity: 72  
Total Occupancy: 102  
Target Population: 1.4  
Expiration Date: 8/31/2019 IMS: No

**Program Name:** HEALTHRIGHT 360  
Legal Name: HEALTHRIGHT 360  
Address: 2307 WEST 6TH STREET  
City, State Zip: LOS ANGELES, CA 90057  
Phone: (415) 970-7500  
**Record ID:** 190728BN  
Service Type: RES  
Resident Capacity: 200  
Total Occupancy: 200  
Target Population: 1.2  
Expiration Date: 9/30/2018 IMS: No

**Program Name:** HEALTHRIGHT 360  
Legal Name: HEALTHRIGHT 360  
Address: 145 WEST 22ND STREET  
City, State Zip: LOS ANGELES, CA 90007  
Phone: (415) 970-7500  
**Record ID:** 190728CN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 7/31/2019 IMS: No

**Program Name:** PROTOTYPES OUTPATIENT BEHAVIORAL HEALTH SERVICES CENTER  
Legal Name: HEALTHRIGHT 360  
Address: 2555 E. COLORADO BLVD. SUITE 100-101  
City, State Zip: PASADENA, CA 91107  
Phone: (626) 577-2261 Fax: (626) 577-2305  
**Record ID:** 190728DN  
Service Type: NON  
Target Population: 1.8  
Expiration Date: 2/28/2018 IMS: No

**Program Name:** PROTOTYPES OUTPATIENT BEHAVIORAL HEALTH SERVICES CENTER, POMONA  
Legal Name: HEALTHRIGHT 360  
Address: 831 E. ARROW HIGHWAY  
City, State Zip: POMONA, CA 91767  
Phone: (909) 398-4383  
**Record ID:** 190728EN  
Service Type: NON  
Target Population: 1.8  
Expiration Date: 1/31/2018 IMS: No

**Program Name:** PROTOTYPES RESOLVE RECOVERY  
Legal Name: HEALTHRIGHT 360  
Address: 6109 AFTON PLACE  
City, State Zip: LOS ANGELES, CA 90028  
Phone: (323) 461-4118 Fax: (323) 461-4119  
**Record ID:** 190728FN  
Service Type: RES-DETOX  
Resident Capacity: 34  
Total Occupancy: 34  
Target Population: 1.4  
Expiration Date: 2/28/2019 IMS: No

**Program Name:** PROTOTYPES WOMEN'S CENTER  
Legal Name: HEALTHRIGHT 360  
Address: 845 E. ARROW HIGHWAY  
City, State Zip: POMONA, CA 91767  
Phone: (909) 624-1233  
**Record ID:** 190728GN  
Service Type: RES-DETOX  
Resident Capacity: 164  
Total Occupancy: 254  
Target Population: 1.4  
Expiration Date: 7/31/2018 IMS: No

**Program Name:** INSPIRE MALIBU  
Legal Name: MALIBU CALIFORNIA MODEL DRUG TREATMENT CENTER, INC.  
Address: 30101 AGOURA COURT  
SUITE 103  
City, State Zip: AGOURA HILLS, CA 91301  
Phone: (818) 532-6243 Fax: (818) 532-6244  
**Record ID:** 190729AP  
Service Type: NON-DETOX  
Target Population: 1.8  
Expiration Date: 10/31/2017 IMS: No

**Program Name:** INSPIRE MALIBU  
Legal Name: MALIBU CALIFORNIA MODEL DRUG TREATMENT CENTER, INC.  
Address: 3875 KANAN ROAD  
City, State Zip: AGOURA HILLS, CA 91301  
Phone: (818) 359-3666 Fax: (818) 532-6244  
**Record ID:** 190729BP  
Service Type: RES-DETOX  
Resident Capacity: 11  
Total Occupancy: 11  
Target Population: 1.1  
Expiration Date: 4/30/2018 IMS: No

**Program Name:** INSPIRE MALIBU  
Legal Name: MALIBU CALIFORNIA MODEL DRUG TREATMENT CENTER, INC.  
Address: 33239 MULHOLLAND HIGHWAY  
City, State Zip: MALIBU, CA 90265  
Phone: (818) 359-3666 Ext:824 Fax: (818) 532-6244  
**Record ID:** 190729DP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 3/31/2019 IMS: No

**Program Name:** FFC SUBSTANCE ABUSE DISORDER TREATMENT PROGRAM  
Legal Name: FAMILIES FOR CHILDREN INC.  
Address: 2504 W. MANCHESTER BOULEVARD  
City, State Zip: INGLEWOOD, CA 90305  
Phone: (323) 750-5855 Fax: (310) 750-5885  
**Record ID:** 190730AN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 11/30/2017 IMS: No

**Program Name:** PAX HOUSE  
Legal Name: PAX HOUSE, INC.  
Address: 324 WAPELLO STREET  
City, State Zip: ALTADENA, CA 91001  
Phone: (626) 398-3897  
**Record ID:** 190732AP  
Service Type: RES-DETOX  
Resident Capacity: 12  
Total Occupancy: 12  
Target Population: 1.1  
Expiration Date: 10/31/2018 IMS: No

**Program Name:** PAX HOUSE  
Legal Name: PAX HOUSE, INC.  
Address: 2052 N. LAKE AVENUE, SUITE F  
City, State Zip: ALTADENA, CA 91001  
Phone: (323) 821-6226 Fax: (626) 243-4425  
**Record ID:** 190732BP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 4/30/2018 IMS: No

**Program Name:** CYCLES OF CHANGE RECOVERY SERVICES  
Legal Name: DESIGN FOR LIVING BEHAVIOR HEALTH, INC.  
Address: 43858 BEECH AVENUE  
City, State Zip: LANCASTER, CA 93534  
Phone: (661) 729-8155 Fax: (661) 949-8131  
**Record ID:** 190735AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 12/31/2017 IMS: No

**Program Name:** CYCLES OF CHANGE II  
Legal Name: DESIGN FOR LIVING BEHAVIOR HEALTH, INC.  
Address: 36451 EL CAMINO DRIVE  
City, State Zip: PALMDALE, CA 93551  
Phone: (818) 489-3779 Fax: (661) 800-4827  
**Record ID:** 190735BP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 4/30/2018 IMS: No

**Program Name:** CYCLES OF CHANGE RECOVERY SERVICES  
Legal Name: DESIGN FOR LIVING BEHAVIOR HEALTH, INC.  
Address: 1805 WEST AVENUE K, SUITE 202  
City, State Zip: LANCASTER, CA 93534  
Phone: (661) 948-8390 Fax: (661) 948-8184  
**Record ID:** 190735CP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 4/30/2018 IMS: No

**Program Name:** CYCLES OF CHANGE III  
Legal Name: DESIGN FOR LIVING BEHAVIOR HEALTH, INC.  
Address: 44210 61ST STREET WEST  
City, State Zip: LANCASTER, CA 93536  
Phone: (661) 846-2662  
**Record ID:** 190735DP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 2/28/2019 IMS: No

**Program Name:** ADVANCES IN MENTAL HEALTH AND ADDICTIONS TREATMENT, INC.  
Legal Name: ADVANCES IN MENTAL HEALTH AND ADDICTIONS TREATMENT, INC.  
Address: 5199 E. PACIFIC COAST HIGHWAY, SUITE 330N  
City, State Zip: LONG BEACH, CA 90804  
Phone: (562) 365-2020 Fax: (562) 239-3135  
**Record ID:** 190736AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 12/31/2018 IMS: No

**Program Name:** SCHARP - OASIS HOUSE  
Legal Name: SOUTHERN CALIFORNIA HEALTH & REHABILITATION PROGRAM  
Address: 5201 S. VERMONT AVENUE  
City, State Zip: LOS ANGELES, CA 90037  
Phone: (323) 751-2677 Fax: (323) 751-0971  
**Record ID:** 190745AN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 6/30/2018 IMS: No

**Program Name:** THE CANYON AT SANTA MONICA  
Legal Name: THE CANYON AT SANTA MONICA, LLC  
Address: 12304 SANTA MONICA BOULEVARD, SUITE #112  
City, State Zip: LOS ANGELES, CA 90025  
Phone: (424) 832-7368  
**Record ID:** 190746AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 4/30/2018 IMS: No

**Program Name:** H & H TESTING OUTPATIENT  
Legal Name: H & H TESTING, INC.  
Address: 10801 NATIONAL BOULEVARD,  
SUITE 251, 420 AND 579  
City, State Zip: LOS ANGELES, CA 90064  
Phone: (424) 293-2224 Fax: (424) 293-2264  
**Record ID:** 190750AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 1/31/2019 IMS: No

**Program Name:** MOTIVATIONAL RECOVERY SERVICES, INC.  
Legal Name: MOTIVATIONAL RECOVERY SERVICES, INC.  
Address: 2116 S. CENTRAL AVENUE  
#2118  
City, State Zip: LOS ANGELES, CA 90011  
Phone: (213) 493-4664 Fax: (213) 493-4665  
**Record ID:** 190751AN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 7/31/2018 IMS: No

**Program Name:** AVALON MALIBU  
Legal Name: AVALON BY THE SEA, INC.  
WHICH WILL DO BUSINESS IN CALIFORNIA AS MALIBU INTEGRATA  
Address: 32430 PACIFIC COAST HIGHWAY  
City, State Zip: MALIBU, CA 90265  
Phone: (310) 457-9111 Fax: (310) 457-3013  
**Record ID:** 190752AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 9/30/2018 IMS: No

**Program Name:** MALIBU INTEGRATIVE RECOVERY  
Legal Name: AVALON BY THE SEA, INC.  
WHICH WILL DO BUSINESS IN CALIFORNIA AS MALIBU INTEGRATA  
Address: 29350 PACIFIC COAST HIGHWAY, #9 AND 11  
City, State Zip: MALIBU, CA 90265  
Phone: (424) 235-2229 Fax: (424) 235-2230  
**Record ID:** 190752CP  
Service Type: NON-DETOX  
Target Population: 1.1  
Expiration Date: 9/30/2018 IMS: No

**Program Name:** HOPE ALIVE COUNSELING CENTERS, LLC  
Legal Name: HOPE ALIVE COUNSELING CENTERS, LLC  
Address: 4242 LAVINIA AVENUE  
City, State Zip: LYNWOOD, CA 90262  
Phone: (310) 710-2280  
**Record ID:** 190753AP  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 8/31/2018 IMS: No

**Program Name:** HOPE ALIVE COUNSELING CENTERS, LLC  
Legal Name: HOPE ALIVE COUNSELING CENTERS, LLC  
Address: 11157 ATLANTIC AVENUE  
City, State Zip: LYNWOOD, CA 90262  
Phone: (310) 710-2280  
**Record ID:** 190753BP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 8/31/2018 IMS: No

**Program Name:** TURNING POINT ALCOHOL AND DRUG EDUCATION PROGRAM  
Legal Name: TURNING POINT ALCOHOL AND DRUG EDUCATION PROGRAM, INC.  
Address: 3756 SANTA ROSALIA DRIVE, SUITE 617  
City, State Zip: LOS ANGELES, CA 90008  
Phone: (323) 810-3153  
**Record ID:** 190758AN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 8/31/2018 IMS: No

**Program Name:** REBOS  
Legal Name: LIVING REBOS, LLC  
Address: 1772 S ROBERTSON BOULEVARD  
City, State Zip: LOS ANGELES, CA 90035  
Phone: (310) 694-5590 Fax: (310) 694-3278  
**Record ID:** 190759AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 8/31/2018 IMS: No

**Program Name:** VISIONS TREATMENT CENTERS, LLC  
Legal Name: VISIONS TREATMENT CENTERS, LLC  
Address: 119 BARRINGTON PLACE AND 115 BARRINGTON WALK  
City, State Zip: LOS ANGELES, CA 90049  
Phone: (310) 476-0033 Fax: (310) 694-3278  
**Record ID:** 190760AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 9/30/2018 IMS: No

**Program Name:** SOVEREIGN HEALTH OF CALIFORNIA  
Legal Name: DUAL DIAGNOSIS TREATMENT CENTER, INC.  
Address: 6167 BRISTOL PARKWAY,  
SUITE 100  
City, State Zip: CULVER CITY, CA 90230  
Phone: (424) 207-2220 Fax: (949) 276-5183  
**Record ID:** 190762AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 1/31/2018 IMS: No

**Program Name:** SOVEREIGN HEALTH OF LOS ANGELES I  
Legal Name: DUAL DIAGNOSIS TREATMENT CENTER, INC.  
Address: 12832 SHORT AVENUE  
City, State Zip: LOS ANGELES, CA 90066  
Phone: (949) 923-7895  
**Record ID:** 190762BP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 9/30/2017 IMS: No

**Program Name:** ARTEMIS HILL RECOVERY  
Legal Name: ARTEMIS HILL RECOVERY INC.  
Address: 1858 LEES AVENUE  
City, State Zip: LONG BEACH, CA 90815  
Phone: (562) 431-8459  
**Record ID:** 190763AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.3  
Expiration Date: 11/30/2018 IMS: No

**Program Name:** THE DISCOVERY HOUSE RESIDENTIAL TREATMENT  
Legal Name: THE DISCOVERY HOUSE, LLC  
Address: 6957 ENFIELD AVENUE AND  
6956 BERTRAND AVENUE AND 6953 ENFIELD AVENUE  
City, State Zip: RESEDA, CA 91335  
Phone: (818) 654-4907 Fax: (818) 401-9387  
**Record ID:** 190764AP  
Service Type: RES-DETOX  
Resident Capacity: 30  
Total Occupancy: 30  
Target Population: 1.1  
Expiration Date: 1/31/2019 IMS: No

**Program Name:** TDH FAMILY CONSULTING OUTPATIENT HEALTHCARE SERVICES  
Legal Name: THE DISCOVERY HOUSE, LLC  
Address: 17635 VANOWEN STREET  
City, State Zip: VAN NUYS, CA 91406  
Phone: (805) 991-2002 Fax: (818) 401-9387  
**Record ID:** 190764DP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 2/28/2019 IMS: No

**Program Name:** PROGRESSIONS TLC, LLC  
Legal Name: PROGRESSIONS TLC, LLC  
Address: 5336 WINNETKA AVENUE  
City, State Zip: WOODLAND HILLS, CA 91364  
Phone: (818) 324-2507 Fax: (888) 310-4278  
**Record ID:** 190768AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 1/31/2019 IMS: No

**Program Name:** ELIJAH'S HOUSE TREATMENT CENTER  
Legal Name: ELIJAH'S HOUSE TX CORP.  
Address: 1617 ASBURY DRIVE  
City, State Zip: PASADENA, CA 91104  
Phone: (626) 394-9565 Fax: (626) 696-3242  
**Record ID:** 190769AP  
Service Type: RES-DETOX  
Resident Capacity: 10  
Total Occupancy: 10  
Target Population: 1.1  
Expiration Date: 1/31/2019 IMS: No

**Program Name:** HELPFUL HANDS DRUG AND ALCOHOL OUTPATIENT PROGRAM, INC.  
Legal Name: HELPFUL HANDS DRUG AND ALCOHOL OUTPATIENT PROGRAM, INC.  
Address: 1249 S. LA BREA AVENUE  
City, State Zip: LOS ANGELES, CA 90019  
Phone: (323) 592-3722 Fax: (323) 931-4748  
**Record ID:** 190770AN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 2/28/2019 IMS: No



**Program Name:** THE BEACH HOUSE  
Legal Name: JAMES & BENTZ, INC.  
Address: 31450 BROAD BEACH ROAD  
City, State Zip: MALIBU, CA 90265  
Phone: (424) 644-0808 Fax: (424) 644-0990  
**Record ID:** 190773AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 9/30/2017 IMS: No

**Program Name:** THE BEACH HOUSE CENTER FOR WELLNESS  
Legal Name: JAMES & BENTZ, INC.  
Address: 22601 PACIFIC COAST HIGHWAY SUITE 235  
City, State Zip: MALIBU, CA 90265  
Phone: (310) 317-0228 Fax: (310) 317-0312  
**Record ID:** 190773BP  
Service Type: NON-DETOX  
Target Population: 1.8  
Expiration Date: 5/31/2019 IMS: No

**Program Name:** EXODUS RECOVERY INTEGRATED CLINIC  
Legal Name: EXODUS RECOVERY, INC.  
Address: 1920 MARENGO STREET  
City, State Zip: LOS ANGELES, CA 90033  
Phone: (310) 945-3350 Fax: (323) 276-6479  
**Record ID:** 190774AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 7/31/2019 IMS: No

**Program Name:** HARMONY DETOX CENTER  
Legal Name: HARMONY HOLLYWOOD LLC  
Address: 826 NORTH MARIPOSA AVENUE  
City, State Zip: LOS ANGELES, CA 90029  
Phone: (323) 375-5356 Fax: (323) 454-4598  
**Record ID:** 190775BP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 6/30/2018 IMS: No

**Program Name:** HOLLYWOOD DETOX CENTER  
Legal Name: HARMONY HOLLYWOOD LLC  
Address: 830 & 832 NORTH MARIPOSA AVENUE  
City, State Zip: LOS ANGELES, CA 90029  
Phone: (323) 375-5356 Fax: (323) 454-4598  
**Record ID:** 190775CP  
Service Type: RES-DETOX  
Resident Capacity: 12  
Total Occupancy: 12  
Target Population: 1.1  
Expiration Date: 6/30/2018 IMS: No

**Program Name:** 1736 FAMILY CRISIS CENTER  
Legal Name: 1736 FAMILY CRISIS CENTER  
Address: 21707 HAWTHORNE BOULEVARD, SUITE 300  
City, State Zip: TORRANCE, CA 90503  
Phone: (310) 543-9900  
**Record ID:** 190777AN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 2/28/2018 IMS: No

**Program Name:** 1736 FAMILY CRISIS CENTER  
Legal Name: 1736 FAMILY CRISIS CENTER  
Address: 2116 ARLINGTON AVENUE, SUITE 200  
City, State Zip: LOS ANGELES, CA 90018  
Phone: (310) 543-9900  
**Record ID:** 190777BN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 4/30/2018 IMS: No

**Program Name:** KOOL LIVING RECOVERY CENTER  
Legal Name: KOOL LIVING, INC.  
Address: 20138 ELKWOOD STREET  
City, State Zip: WINNETKA, CA 91306-2312  
Phone: (818) 626-8704 Fax: (707) 202-0622  
**Record ID:** 190778AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 11/30/2017 IMS: No

**Program Name:** KOOL LIVING, INC.  
Legal Name: KOOL LIVING, INC.  
Address: 226421 CROWN VALLEY PARKWAY, SUITE 200  
City, State Zip: MISSION VIEGO, CA 95691  
Phone: (951) 427-4807 Fax: (747) 202-0622  
**Record ID:** 190778BP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 6/30/2018 IMS: No

**Program Name:** KOOL LIVING RECOVERY CENTER  
Legal Name: KOOL LIVING, INC.  
Address: 18960 KESWICK STREET  
City, State Zip: RESEDA, CA 91335  
Phone: (818) 862-9180 Fax: (747) 202-0622  
**Record ID:** 190778CP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 6/30/2018 IMS: No

**Program Name:** KOOL LIVING RECOVERY CENTER  
Legal Name: KOOL LIVING, INC.  
Address: 7735 WINNETKA AVENUE  
City, State Zip: WINNETKA, CA 91306  
Phone: (951) 427-4807 Fax: (747) 202-0622  
**Record ID:** 190778DP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 6/30/2018 IMS: No

**Program Name:** CORNERSTONE OUTPATIENT TREATMENT PROGRAM  
Legal Name: SAN FERNANDO VALLEY COMMUNITY MENTAL HEALTH CENTER, INCORPORATED  
Address: 5950 CEDROS STREET  
City, State Zip: VAN NUYS, CA 91411  
Phone: (818) 901-4836 Fax: (818) 376-0044  
**Record ID:** 190780AN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 9/30/2017 IMS: No

**Program Name:** NATIONWIDE DRUG AND ALCOHOL COUNSELING, INC.  
Legal Name: NATIONWIDE DRUG AND ALCOHOL COUNSELING, INC.  
Address: 1040 ELM AVENUE, SUITE 310  
City, State Zip: LONG BEACH, CA 90813  
Phone: (562) 901-6880  
**Record ID:** 190784AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 9/30/2017 IMS: No

**Program Name:** COMPATIOR, INC.  
Legal Name: COMPATIOR, INC.  
Address: 9637 CALIFORNIA AVENUE  
City, State Zip: SOUTH GATE, CA 90280  
Phone: (323) 378-2009  
**Record ID:** 190785AN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 5/31/2018 IMS: No

**Program Name:** ACADIA MALIBU  
Legal Name: ACADIA MALIBU, INC.  
Address: 5922 PHILIP AVENUE  
City, State Zip: MALIBU, CA 90265  
Phone: (310) 457-4417 Fax: (310) 494-0442  
**Record ID:** 190786AP  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 9/30/2017 IMS: No

**Program Name:** ALO HOUSE RECOVERY CENTERS  
Legal Name: ACADIA MALIBU, INC.  
Address: 28955 PACIFIC COAST HIGHWAY  
#200  
City, State Zip: MALIBU, CA 90265  
Phone: (310) 975-5344 Fax: (310) 494-0442  
**Record ID:** 190786CP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 6/30/2018 IMS: No

**Program Name:** ACADIA MALIBU, INC.  
Legal Name: ACADIA MALIBU, INC.  
Address: 28901 SELFRIDGE DRIVE  
City, State Zip: MALIBU, CA 90265  
Phone: (310) 975-5344 Fax: (310) 494-0442  
**Record ID:** 190786DP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 4/30/2018 IMS: No

**Program Name:** ALO HOUSE RECOVERY CENTERS OUTPATIENT PROGRAM  
Legal Name: ACADIA MALIBU, INC.  
Address: 3042 ROWENA AVENUE  
City, State Zip: LOS ANGELES, CA 90039  
Phone: (310) 975-5344  
**Record ID:** 190786EP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 4/30/2019 IMS: No

**Program Name:** BREATHE LIFE HEALING CENTER  
Legal Name: BREATHE WEHO TREATMENT SERVICES LLC  
Address: 8730 WEST SUNSET BOULEVARD EAST TOWER, 5TH FLOOR  
City, State Zip: WEST HOLLYWOOD, CA 90069  
Phone: (800) 929-5904 Fax: (800) 763-1597  
**Record ID:** 190788AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 9/30/2017 IMS: No

**Program Name:** BREATHE WEHO TREATMENT SERVICES  
Legal Name: BREATHE WEHO TREATMENT SERVICES LLC  
Address: 8020 JOVENITA CANYON DRIVE  
City, State Zip: LOS ANGELES, CA 90046  
Phone: (323) 997-4409 Fax: (310) 659-9088  
**Record ID:** 190788BP  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 12/31/2017 IMS: No

**Program Name:** REHOBOTH DRUG AND ALCOHOL PREVENTION CENTER  
Legal Name: REHOBOTH DRUG AND ALCOHOL PREVENTION CENTER  
Address: 716 W. COMPTON BOULEVARD  
City, State Zip: COMPTON, CA 90220  
Phone: (310) 663-0789  
**Record ID:** 190793AN  
Service Type: NON  
Target Population: 1.8  
Expiration Date: 6/30/2018 IMS: No

**Program Name:** GROWTH EXTENDED, INC.  
Legal Name: GROWTH EXTENDED, INC.  
Address: 15743 COVELLO STREET  
City, State Zip: LAKE BALBOA, CA 91406  
Phone: (888) 447-1116 Ext:8 Fax: (888) 751-6166  
**Record ID:** 190794AP  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 7/31/2018 IMS: No

**Program Name:** DESIGN FOR CHANGE  
Legal Name: DESIGN FOR CHANGE  
Address: 1066 EAST AVENUE J &  
44319 11TH STREET EAST  
City, State Zip: LANCASTER, CA 93535  
Phone: (661) 942-1026 Fax: (661) 349-4737  
**Record ID:** 190795AP  
Service Type: RES-DETOX  
Resident Capacity: 12  
Total Occupancy: 12  
Target Population: 1.1  
Expiration Date: 6/30/2018 IMS: No

**Program Name:** DESIGN FOR CHANGE OUTPATIENT  
Legal Name: DESIGN FOR CHANGE  
Address: 44501 16TH STREET WEST,  
SUITE 101  
City, State Zip: LANCASTER, CA 93534  
Phone: (661) 945-2317 Fax: (661) 945-5750  
**Record ID:** 190795BP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 9/30/2018 IMS: No

**Program Name:** DESIGN FOR CHANGE II  
Legal Name: DESIGN FOR CHANGE  
Address: 40516 MILAN DRIVE  
City, State Zip: PALMDALE, CA 93551  
Phone: (661) 947-9967 Fax: (661) 526-4383  
**Record ID:** 190795CP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 2/28/2019 IMS: No

**Program Name:** RENAISSANCE SOUTH LA, INC.  
Legal Name: RENAISSANCE SOUTH LA, INC.  
Address: 19401 S. VERMONT AVENUE, SUITE B-102 & C-100  
City, State Zip: TORRANCE, CA 90502  
Phone: (310) 919-5500 Fax: (310) 756-6575  
**Record ID:** 190796AN  
Service Type: NON-DETOX  
Target Population: 1.1  
Expiration Date: 6/30/2018 IMS: No

**Program Name:** CAREFORWARD HEALTH  
Legal Name: CAREFORWARD HEALTH, LLC  
Address: 9730 WILSHIRE BOULEVARD, SUITE 109  
City, State Zip: BEVERLY HILLS, CA 90212  
Phone: (310) 463-5521 Fax: (424) 201-2696  
**Record ID:** 190797AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 5/31/2018 IMS: No

**Program Name:** NEW START DAY TREATMENT AND I.O.P.PROGRAM  
Legal Name: A NEW START TREATMENT AND RECOVERY CENTER, LLC  
Address: 10401 VENICE BOULEVARD, SUITE 250  
City, State Zip: LOS ANGELES, CA 90034  
Phone: (310) 636-1819 Fax: (310) 287-1949  
**Record ID:** 190798AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 10/31/2018 IMS: No

**Program Name:** A NEW START TREATMENT AND RECOVERY CENTER, LLC  
Legal Name: A NEW START TREATMENT AND RECOVERY CENTER, LLC  
Address: 11241, 11243 & 11245 LUCERNE AVENUE  
City, State Zip: LOS ANGELES, CA 90230  
Phone: (310) 741-1018 Fax: (310) 202-6410  
**Record ID:** 190798CP  
Service Type: RES-DETOX  
Resident Capacity: 18  
Total Occupancy: 18  
Target Population: 1.1  
Expiration Date: 12/31/2018 IMS: No

**Program Name:** A NEW START TREATMENT AND RECOVERY CENTER, LLC  
Legal Name: A NEW START TREATMENT AND RECOVERY CENTER, LLC  
Address: 4111, 4113, 4115, 4117 MILTON AVENUE  
City, State Zip: CULVER CITY, CA 90232  
Phone: (310) 287-1919 Fax: (310) 287-1949  
**Record ID:** 190798DP  
Service Type: RES-DETOX  
Resident Capacity: 24  
Total Occupancy: 24  
Target Population: 1.1  
Expiration Date: 10/31/2017 IMS: No

**Program Name:** VALLEY HOPE OUTPATIENT  
Legal Name: FERNANDO RODRIGUEZ  
Address: 14416 FRIAR STREET, SUITE C  
City, State Zip: VAN NUYS, CA 91401  
Phone: (818) 902-1100 Fax: (818) 902-1300  
**Record ID:** 190803AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 6/30/2018 IMS: No

**Program Name:** THE VILLAGE FAMILY SERVICES  
Legal Name: THE VILLAGE FAMILY SERVICES, INC.  
Address: 6736 LAUREL CANYON BOULEVARD, SUITE 200  
City, State Zip: NORTH HOLLYWOOD, CA 91606  
Phone: (818) 755-8786 Fax: (818) 755-8789  
**Record ID:** 190804AN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 8/31/2018 IMS: No

**Program Name:** THE VILLAGE FAMILY SERVICES ALCOHOL AND SUBSTANCE USE TREATMENT PROGRAM  
Legal Name: THE VILLAGE FAMILY SERVICES, INC.  
Address: 6801 COLDWATER CANYON AVENUE,  
E1  
City, State Zip: NORTH HOLLYWOOD, CA 91605  
Phone: (818) 755-8786 Fax: (818) 755-8789  
**Record ID:** 190804BN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 12/31/2018 IMS: No

**Program Name:** NULIFE OUTPATIENT  
Legal Name: HARP, LLC, THE  
Address: 4232 LAS VIRGENES ROAD, SUITE B  
City, State Zip: CALABASAS, CA 91302  
Phone: (888) 508-1179  
**Record ID:** 190805DP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 7/31/2019 IMS: No

**Program Name:** CENTRAL CITY COMMUNITY HEALTH CENTER, INC.  
Legal Name: CENTRAL CITY COMMUNITY HEALTH CENTER, INC.  
Address: 5970 S. CENTRAL AVENUE  
City, State Zip: LOS ANGELES, CA 90022  
Phone: (323) 724-0019 Fax: (323) 724-3539  
**Record ID:** 190806AN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 7/31/2018 IMS: No

**Program Name:** THE VILLA TREATMENT CENTER  
Legal Name: THE VILLA TREATMENT CENTER, LLC  
Address: 5051 HOOD DRIVE  
City, State Zip: WOODLAND HILLS, CA 91364  
Phone: (747) 226-0187 Fax: (818) 975-5414  
**Record ID:** 190807AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 9/30/2018 IMS: No

**Program Name:** BIENESTAR DRUG TREATMENT PROGRAM  
Legal Name: BIENESTAR HUMAN SERVICES, INC.  
Address: 8134 VAN NUYS BOULEVARD, SUITE 200  
City, State Zip: PANORAMA CITY, CA 91402  
Phone: (818) 908-3820 Fax: (818) 908-3844  
**Record ID:** 190808AN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 6/30/2018 IMS: No

**Program Name:** BLVD CENTERS  
Legal Name: BLVD CENTERS, INC.  
Address: 1776 NORTH HIGHLAND AVENUE  
City, State Zip: LOS ANGELES, CA 90028  
Phone: (424) 281-6147 Fax: (213) 262-2082  
**Record ID:** 190810AP  
Service Type: NON  
Target Population: 1.8  
Expiration Date: 6/30/2018 IMS: No

**Program Name:** BLVD CENTERS  
Legal Name: BLVD CENTERS, INC.  
Address: 1608 SAWTELLE BOULEVARD  
City, State Zip: LOS ANGELES, CA 90025  
Phone: (425) 285-8054  
**Record ID:** 190810BP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 5/31/2018 IMS: No

**Program Name:** FREEHAB  
Legal Name: THE TEEN PROJECT, INC.  
Address: 8140 SUNLAND BOULEVARD  
City, State Zip: SUN VALLEY, CA 91352  
Phone: (949) 283-1260 Fax: (818) 582-8836  
**Record ID:** 190811AN  
Service Type: RES  
Resident Capacity: 74  
Total Occupancy: 74  
Target Population: 1.1  
Expiration Date: 7/31/2018 IMS: No

**Program Name:** LOS ANGELES LGBT CENTER  
Legal Name: LOS ANGELES LGBT CENTER  
Address: 1625 N. SCHRADER BOULEVARD, SUITE 106, 114K, 202A, 402 & 405  
City, State Zip: LOS ANGELES, CA 90028  
Phone: (323) 993-7448 Fax: (323) 308-4041  
**Record ID:** 190812AN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 10/31/2018 IMS: No

**Program Name:** SOBER STAGES INC. OUTPATIENT PROGRAM  
Legal Name: SOBER STAGES INCORPORATED OUTPATIENT PROGRAM  
Address: 19562 VENTURA BOULEVARD, SUITE 233  
City, State Zip: TARZANA, CA 91356  
Phone: (818) 705-6363 Fax: (818) 705-4449  
**Record ID:** 190813AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 9/30/2018 IMS: No

**Program Name:** CLIFFSIDE MALIBU OUTPATIENT SERVICES  
Legal Name: CLIFFSIDE MALIBU OUTPATIENT SERVICES  
Address: 28990 WEST PACIFIC COAST HIGHWAY, SUITE 203  
City, State Zip: MALIBU, CA 90265  
Phone: (310) 457-3999 Fax: (310) 457-6047  
**Record ID:** 190815AP  
Service Type: NON  
Target Population: 1.8  
Expiration Date: 9/30/2018 IMS: No

**Program Name:** HAVEN HOUSE  
Legal Name: HAVEN HOUSE, INC.  
Address: 2252 HILLSBORO AVENUE  
City, State Zip: LOS ANGELES, CA 90034  
Phone: (310) 876-0988  
**Record ID:** 190816AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 12/31/2018 IMS: No

**Program Name:** ROOTS THROUGH RECOVERY  
Legal Name: ROOTS, INC.  
Address: 3939 ATLANTIC AVENUE, SUITE # 102  
City, State Zip: LONG BEACH, CA 90807  
Phone: (562) 473-0827  
**Record ID:** 190817AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 10/31/2018 IMS: No

**Program Name:** A STEP IN THE RIGHT DIRECTION INTENSIVE OUTPATIENT PROGRAM  
Legal Name: A STEP IN THE RIGHT DIRECTION  
Address: 9535 RESEDA BOULEVARD, SUITE 300  
City, State Zip: NORTHRIDGE, CA 91324  
Phone: (818) 231-1400 Fax: (747) 224-0003  
**Record ID:** 190818AP  
Service Type: NON-DETOX  
Target Population: 1.1  
Expiration Date: 10/31/2018 IMS: No

**Program Name:** NEW DIRECTIONS ALCOHOL & DRUG SERVICES, INC.  
Legal Name: NEW DIRECTIONS ALCOHOL AND DRUG SERVICES, INC.  
Address: 1331 WEST AVENUE J, SUITE 206  
City, State Zip: LANCASTER, CA 93534  
Phone: (661) 942-2255 Fax: (661) 949-1480  
**Record ID:** 190819AN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 11/30/2018 IMS: No

**Program Name:** LAT INTENSIVE OUTPATIENT PROGRAMS, INC.  
Legal Name: LAT INTENSIVE OUTPATIENT PROGRAMS INC.  
Address: 11936 JEFFERSON BOULEVARD, SUITE D  
City, State Zip: CULVER CITY, CA 90230  
Phone: (310) 572-7000 Fax: (310) 572-7003  
**Record ID:** 190820AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 11/30/2018 IMS: No

**Program Name:** CLUB SOBA  
Legal Name: SOBA CHEVIOT HILLS LLC  
Address: 3384 MOTOR AVENUE  
City, State Zip: LOS ANGELES, CA 90034-3712  
Phone: (310) 457-5250  
**Record ID:** 190822AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 11/30/2018 IMS: No



**Program Name:** CLUB SOBA  
Legal Name: SOBA CHEVIOT HILLS LLC  
Address: 3142 PATRICIA AVENUE  
City, State Zip: LOS ANGELES, CA 90064-4718  
Phone: (424) 298-8353 Fax: (310) 919-3103  
**Record ID:** 190822BP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 9/30/2017 IMS: No

**Program Name:** CLUB SOBA  
Legal Name: SOBA CHEVIOT HILLS LLC  
Address: 3818 DUNN DRIVE  
City, State Zip: CULVER CITY, CA 90232  
Phone: (310) 425-8139 Fax: (310) 919-3103  
**Record ID:** 190822CP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 5/31/2018 IMS: No

**Program Name:** CROSSROADS RECOVERY CENTERS  
Legal Name: DIVINE REHABILITATION, EDUCATION, & HOUSING NETWORK  
Address: 11503 GLADHILL ROAD  
City, State Zip: WHITTIER, CA 90604  
Phone: (877) 293-0722 Fax: (562) 393-4442  
**Record ID:** 190824AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 2/28/2019 IMS: No

**Program Name:** MALIBU BALANCE DAY TREATMENT, INC.  
Legal Name: MALIBU BALANCE DAY TREATMENT INC.  
Address: 4505 LAS VIRGENES ROAD, SUITE 200, 201  
City, State Zip: CALABASAS, CA 91302  
Phone: (818) 880-0800  
**Record ID:** 190826AP  
Service Type: NON-DETOX  
Target Population: 1.1  
Expiration Date: 2/28/2019 IMS: No

**Program Name:** WESTSIDE TREATMENT  
Legal Name: WESTSIDE TREATMENT, LLC  
Address: 11150 W. OLYMPIC BOULEVARD, #760  
City, State Zip: LOS ANGELES, CA 90064  
Phone: (424) 835-6183 Fax: (310) 943-3883  
**Record ID:** 190827AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 2/28/2019 IMS: No

**Program Name:** ALTERNATIVES BEHAVIORAL HEALTH, LLC  
Legal Name: ALTERNATIVES BEHAVIORAL HEALTH, LLC  
Address: 822 S. ROBERTSON BOULEVARD, SUITE 300  
City, State Zip: LOS ANGELES, CA 90035  
Phone: (888) 532-9137 Fax: (888) 739-6925  
**Record ID:** 190829AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 3/31/2019 IMS: No

**Program Name:** SEA CHANGE SANTA MONICA  
Legal Name: SEA CHANGE SANTA MONICA, L.P.  
Address: 1831 WILSHIRE BOULEVARD, #C  
City, State Zip: SANTA MONICA, CA 90403  
Phone: (424) 268-4322 Fax: (310) 998-8696  
**Record ID:** 190831AP  
Service Type: NON-DETOX  
Target Population: 1.1  
Expiration Date: 7/31/2019 IMS: No

**Program Name:** SEA CHANGE SANTA MONICA  
Legal Name: SEA CHANGE SANTA MONICA, L.P.  
Address: 1051 PRINCETON STREET  
City, State Zip: SANTA MONICA, CA 90403  
Phone: (888) 823-3310 Fax: (323) 843-9800  
**Record ID:** 190831BP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 1/31/2018 IMS: Yes

**Program Name:** AWAKENINGS  
Legal Name: AGOURA NEUROFEEDBACK, INC.  
Address: 28720 ROADSIDE DRIVE, #200  
City, State Zip: AGOURA HILLS, CA 91301  
Phone: (310) 848-5418 Fax: (858) 348-8097  
**Record ID:** 190833AP  
Service Type: NON-DETOX  
Target Population: 1.1  
Expiration Date: 2/28/2019 IMS: No

**Program Name:** HILLS TREATMENT CORP.  
Legal Name: MALIBU HILLS TREATMENT CORP.  
Address: 265 WESTLAKE BOULEVARD  
City, State Zip: MALIBU, CA 90265  
Phone: (818) 706-9000 Fax: (818) 706-9009  
**Record ID:** 190834BP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 5/31/2019 IMS: No

**Program Name:** MALIBU HILLS TREATMENT CORP.  
Legal Name: MALIBU HILLS TREATMENT CORP.  
Address: 415 WESTLAKE BOULEVARD  
City, State Zip: MALIBU, CA 90265  
Phone: (818) 706-9000 Fax: (818) 706-9009  
**Record ID:** 190834CP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 4/30/2018 IMS: No

**Program Name:** PASSAGES MALIBU PHP LLC.  
Legal Name: PASSAGES MALIBU PHP, LLC  
Address: 1728 ABBOT KINNEY BOULEVARD, #103  
City, State Zip: VENICE, CA 90291  
Phone: (310) 595-5831 Fax: (310) 464-6904  
**Record ID:** 190835AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 6/30/2019 IMS: No

**Program Name:** REVIVE DETOX  
Legal Name: REVIVE DETOX  
Address: 360 N. VISTA STREET  
City, State Zip: LOS ANGELES, CA 90036  
Phone: (323) 452-0921 Fax: (323) 544-6079  
**Record ID:** 190836AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 2/28/2019 IMS: No

**Program Name:** HILLSMAN CENTER  
Legal Name: LMPG FOUNDATION, LLC  
Address: 1440 E. 41ST STREET  
City, State Zip: LOS ANGELES, CA 90011  
Phone: (323) 231-2585 Fax: (323) 231-8771  
**Record ID:** 190838AP  
Service Type: RES  
Resident Capacity: 34  
Total Occupancy: 38  
Target Population: 1.1  
Expiration Date: 6/30/2019 IMS: No

**Program Name:** A NEW SOLUTION  
Legal Name: CHANGING STEPS NETWORK INC.  
Address: 942 W. 12TH STREET  
City, State Zip: SAN PEDRO, CA 90731  
Phone: (323) 202-8432  
**Record ID:** 190841BP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 8/31/2017 IMS: No

**Program Name:** A NEW SOLUTION  
Legal Name: CHANGING STEPS NETWORK INC.  
Address: 9339 LOUISE AVENUE  
City, State Zip: NORTHRIDGE, CA 91325  
Phone: (818) 362-0986  
**Record ID:** 190841CP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 10/31/2017 IMS: No

**Program Name:** A NEW SOLUTION  
Legal Name: CHANGING STEPS NETWORK INC.  
Address: 14540 HAMLIN STREET, SUITE I  
City, State Zip: VAN NUYS, CA 91411  
Phone: (818) 477-2874  
**Record ID:** 190841DP  
Service Type: NON-DETOX  
Target Population: 1.1  
Expiration Date: 3/31/2018 IMS: No

**Program Name:** DESTINATIONS TO RECOVERY  
Legal Name: DESTINATIONS TO RECOVERY, LLC  
Address: 21051 WARNER CENTER LANE, SUITE 220  
City, State Zip: WOODLAND HILLS, CA 91367  
Phone: (818) 737-2221 Fax: (310) 728-4039  
**Record ID:** 190842AP  
Service Type: NON  
Target Population: 1.4  
Expiration Date: 8/31/2019 IMS: No

**Program Name:** DESTINATIONS TO RECOVERY  
Legal Name: DESTINATIONS TO RECOVERY, LLC  
Address: 6222 WILSHIRE BOULEVARD,  
#313  
City, State Zip: LOS ANGELES , CA 90048  
Phone: (818) 737-2221 Fax: (818) 737-2222  
**Record ID:** 190842BP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 9/30/2018 IMS: No

**Program Name:** VALLEY RECOVERY TREATMENT  
Legal Name: CALIFORNIA RECOVERY CENTERS LLC  
Address: 23304 HAPPY VALLEY DRIVE  
City, State Zip: NEWHALL, CA 91321  
Phone: (818) 404-6505 Fax: (818) 348-4401  
**Record ID:** 190843AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 7/31/2019 IMS: No

**Program Name:** NOVA VITAE TREATMENT CENTER  
Legal Name: NOVA VITAE TREATMENT CENTER  
Address: 16670 MOORPARK STREET,  
#B  
City, State Zip: ENCINO, CA 91436  
Phone: (818) 422-3442  
**Record ID:** 190844AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.2  
Expiration Date: 10/31/2017 IMS: No

**Program Name:** SOVEREIGN HEALTH OF LOS ANGELES II  
Legal Name: SATYA HEALTH OF CALIFORNIA, INC.  
Address: 5919 W. 74TH STREET  
City, State Zip: LOS ANGELES, CA 90045  
Phone: (424) 227-2783  
**Record ID:** 190845AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 8/31/2017 IMS: No

**Program Name:** FOREFRONT HEALTH OF BEVERLY HILLS  
Legal Name: SOUTHERN CALIFORNIA RECOVERY, LLC  
Address: 1771 SUMMITRIDGE DRIVE  
City, State Zip: BEVERLY HILLS, CA 90210  
Phone: (561) 578-8600 Fax: (561) 578-8601  
**Record ID:** 190848AP  
Service Type: RES-DETOX  
Resident Capacity: 12  
Total Occupancy: 12  
Target Population: 1.1  
Expiration Date: 5/31/2019 IMS: Yes

**Program Name:** ANGEL WINGS RECOVERY OF SOUTH BAY  
Legal Name: ANGEL WINGS RECOVERY OF SOUTHBAY  
Address: 3841 W 130TH STREET  
City, State Zip: HAWTHORNE, CA 90250-0000  
Phone: (310) 863-7446 Fax: (310) 863-7445  
**Record ID:** 190849BN  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 5/31/2018 IMS: No

**Program Name:** CLIFFSIDE MALIBU 3  
Legal Name: CLIFFSIDE MALIBU 3  
Address: 30010 ANDROMEDA LANE  
City, State Zip: MALIBU, CA 90265  
Phone: (310) 457-3460 Fax: (424) 781-4708  
**Record ID:** 190850AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 2/28/2019 IMS: No

**Program Name:** CALIFORNIA NEW LIFE DETOX AND RECOVERY HOMES, INC.  
Legal Name: CALIFORNIA NEW LIFE DETOX AND RECOVERY HOMES, INC.  
Address: 18134 CHASE STREET  
City, State Zip: NORTHRIDGE, CA 91325  
Phone: (818) 775-9431 Fax: (828) 626-9794  
**Record ID:** 190851AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 7/31/2019 IMS: No

**Program Name:** CALIFORNIA NEW LIFE DETOX AND RECOVERY HOMES, INC.  
Legal Name: CALIFORNIA NEW LIFE DETOX AND RECOVERY HOMES, INC.  
Address: 9529 CORBIN AVENUE  
City, State Zip: NORTHRIDGE, CA 91324  
Phone: (818) 554-5600 Fax: (818) 626-9749  
**Record ID:** 190851BP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 3/31/2018 IMS: No

**Program Name:** ALTA CENTERS, INC.  
Legal Name: ALTA CENTERS, INC.  
Address: 5435 BALBOA BOULEVARD, SUITE 103  
City, State Zip: ENCINO, CA 91316  
Phone: (844) 663-7465 Fax: (818) 301-2046  
**Record ID:** 190852AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 7/31/2019 IMS: No

**Program Name:** ALTA CENTERS INC.  
Legal Name: ALTA CENTERS, INC.  
Address: 6100 RODGERTON DRIVE  
City, State Zip: LOS ANGELES, CA 90068  
Phone: (818) 616-7443  
**Record ID:** 190852CP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 6/30/2019 IMS: No

**Program Name:** REFUGE RECOVERY CENTERS  
Legal Name: REFUGE RECOVERY HOUSE, LLC  
Address: 4302 W. MELROSE AVENUE, SUITE 5C  
City, State Zip: LOS ANGELES, CA 90029-3511  
Phone: (363) 660-0735 Fax: (866) 537-7317  
**Record ID:** 190853AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 5/31/2019 IMS: No

**Program Name:** REFUGE RECOVERY CENTERS  
Legal Name: REFUGE RECOVERY HOUSE, LLC  
Address: 1007 MANZANITA STREET  
City, State Zip: LOS ANGELES, CA 90029-3511  
Phone: (323) 787-7077 Fax: (866) 537-7317  
**Record ID:** 190853BP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 10/31/2017 IMS: No

**Program Name:** LAUNCH  
Legal Name: MD HOME DETOX CONSULTING, INC  
Address: 150 S. BARRINGTON AVENUE, SUITE 8-10  
City, State Zip: BRENTWOOD, CA 90049  
Phone: (310) 779-4476  
**Record ID:** 190855AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 12/31/2017 IMS: No

**Program Name:** SERVICE INDUSTRIES OUTPATIENT SERVICES  
Legal Name: SERVICE INDUSTRIES, INC.  
Address: 2500 OVERLAND AVENUE, #D  
City, State Zip: LOS ANGELES, CA 90064-3333  
Phone: (323) 477-2130 Fax: (310) 253-9801  
**Record ID:** 190856AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 6/30/2019 IMS: No

**Program Name:** ACCESS MALIBU, INC.  
Legal Name: ACCESS MALIBU, INC.  
Address: 5247 HORIZON DRIVE  
City, State Zip: MALIBU, CA 90265-4215  
Phone: (831) 236-1169 Fax: (424) 781-4705  
**Record ID:** 190857AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 4/30/2019 IMS: No

**Program Name:** RESTORE HEALTH AND WELLNESS CENTER, LLC  
Legal Name: RESTORE HEALTH AND WELLNESS CENTER, LLC  
Address: 16530 VENTURA BOULEVARD, SUITE 200  
City, State Zip: ENCINO, CA 91436  
Phone: (818) 806-3194 Fax: (888) 518-1633  
**Record ID:** 190858AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 9/30/2019 IMS: No

**Program Name:** RESTORE HEALTH AND WELLNESS CENTER, LLC  
Legal Name: RESTORE HEALTH AND WELLNESS CENTER, LLC  
Address: 10821 BAILE AVENUE  
City, State Zip: CHATSWORTH, CA 91311-8405  
Phone: (954) 376-3915 Fax: (818) 574-3990  
**Record ID:** 190858BP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 8/1/2018 IMS: No

**Program Name:** RESTORE HEALTH AND WELLNESS CENTER  
Legal Name: RESTORE HEALTH AND WELLNESS CENTER, LLC  
Address: 10342 DE SOTO AVE.  
City, State Zip: CHATSWORTH, CA 91311  
Phone: (626) 497-1480 Fax: (818) 574-3990  
**Record ID:** 190858CP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 8/31/2019 IMS: No

**Program Name:** RESTORE HEALTH AND WELLNESS CENTER  
Legal Name: RESTORE HEALTH AND WELLNESS CENTER, LLC  
Address: 10344 DE SOTO AVE  
City, State Zip: CHATSWORTH, CA 91311  
Phone: (626) 497-1480 Fax: (818) 574-3990  
**Record ID:** 190858DP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 8/31/2019 IMS: No

**Program Name:** LOS ANGELES DETOX LLC  
Legal Name: LOS ANGELES DETOX LLC  
Address: 522 N. LARCHMONT BOULEVARD  
City, State Zip: LOS ANGELES, CA 90004  
Phone: (323) 450-2205  
**Record ID:** 190861AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 10/31/2017 IMS: No

**Program Name:** 1 METHOD CENTER  
Legal Name: 1 METHOD, LLC  
Address: 10254 BANNOCKBURN DRIVE  
City, State Zip: LOS ANGELES, CA 90064  
Phone: (310) 837-7330 Fax: (310) 837-7376  
**Record ID:** 190862AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 8/31/2019 IMS: No

**Program Name:** 1 METHOD CENTER  
Legal Name: 1 METHOD, LLC  
Address: 1964 WESTWOOD BLVD. #400  
City, State Zip: LOS ANGELES, CA 90025  
Phone: (310) 837-7330  
**Record ID:** 190862BP  
Service Type: NON  
Target Population: 1.8  
Expiration Date: 7/31/2019 IMS: No

**Program Name:** CLEAR RECOVERY CENTER  
Legal Name: CLEAR INC.  
Address: 201 HERONDO STREET  
City, State Zip: REDONDO BEACH, CA 90277  
Phone: (310) 346-2676 Fax: (866) 899-1638  
**Record ID:** 190863AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 8/31/2019 IMS: No

**Program Name:** CLEAR RECOVERY CENTER  
Legal Name: CLEAR INC.  
Address: 515 N. SEPULVEDA BOULEVARD,  
SUITE B  
City, State Zip: MANHATTAN BEACH, CA 90266  
Phone: (877) 799-1985 Fax: (866) 899-1638  
**Record ID:** 190863BP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 11/30/2018 IMS: No

**Program Name:** BETTY FORD CENTER - WEST LOS ANGELES  
Legal Name: HAZELDEN BETTY FORD FOUNDATION  
Address: 10700 SANTA MONICA BOULEVARD, SUITE 310  
City, State Zip: LOS ANGELES, CA 90025  
Phone: (866) 301-4929 Fax: (310) 446-1818  
**Record ID:** 190864AN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 9/30/2019 IMS: No

**Program Name:** ALTADENA CENTER  
Legal Name: SHIRLEY BENNETT  
Address: 3025 NORTH LINCOLN AVENUE  
City, State Zip: ALTADENA, CA 91001  
Phone: (626) 765-6905 Fax: (626) 765-6617  
**Record ID:** 190865AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 10/31/2017 IMS: No

**Program Name:** JAHI FAMILY SERVICES, INC.  
Legal Name: JAHI FAMILY SERVICES, INC.  
Address: 9001 S. VERMONT STREET  
City, State Zip: LOS ANGELES, CA 90044  
Phone: (323) 779-5244 Fax: (929) 757-5244  
**Record ID:** 190866AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 9/30/2017 IMS: No

**Program Name:** LAKE HUGHES RECOVERY  
Legal Name: LAKE HUGHES RECOVERY  
Address: 48745 THREE POINTS ROAD  
City, State Zip: LAKE HUGHES, CA 93532  
Phone: (661) 731-3171  
**Record ID:** 190867AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 7  
Target Population: 1.2  
Expiration Date: 10/31/2017 IMS: No

**Program Name:** SHELBY RECOVERY SERVICES INC.  
Legal Name: SHELBY RECOVERY SERVICES INC.  
Address: 279 E. GREENHAVEN STREET  
City, State Zip: COVINA, CA 91722  
Phone: (310) 877-8557  
**Record ID:** 190868AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 10/31/2017 IMS: No



**Program Name:** MALIBU DETOX  
Legal Name: MALIBU DETOX, LLC  
Address: 22766 SADDLE PEAK ROAD  
City, State Zip: TOPANGA, CA 90290  
Phone: (818) 208-5695 Fax: (310) 919-3185  
**Record ID:** 190869AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 10/31/2017 IMS: No

**Program Name:** MALIBU DETOX  
Legal Name: MALIBU DETOX, LLC  
Address: 21965 SADDLE PEAK ROAD  
City, State Zip: TOPANGA, CA 90290  
Phone: (310) 958-4692 Fax: (310) 919-3185  
**Record ID:** 190869BP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 2/28/2019 IMS: No

**Program Name:** THE ARROYOS DAY TREATMENT PROGRAM  
Legal Name: THE ARROYOS, INC.  
Address: 1 WEST CALIFORNIA BOULEVARD, SUITE 122, 221 & 321  
City, State Zip: PASADENA, CA 91105  
Phone: (877) 884-8272 Fax: (626) 628-3177  
**Record ID:** 190870AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 10/31/2017 IMS: No

**Program Name:** THRIVE TREATMENT  
Legal Name: THRIVE TREATMENT, LLC  
Address: 3101 OCEAN PARK BOULEVARD, SUITE 302 & 309  
City, State Zip: SANTA MONICA, CA 90405  
Phone: (888) 975-8474  
**Record ID:** 190871AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 10/31/2017 IMS: No

**Program Name:** VALLEY DETOX AND REHABILITATION, LLC  
Legal Name: VALLEY DETOX AND REHABILITATION  
Address: 14000 VALERIO STREET  
City, State Zip: VAN NUYS, CA 91405  
Phone: (323) 350-4064 Fax: (323) 417-4706  
**Record ID:** 190872AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 12/31/2017 IMS: No

**Program Name:** MIRACLES IN ACTION  
Legal Name: MIRACLES IN ACTION, LLC  
Address: 290 E VERDUGO AVENUE, #105  
City, State Zip: BURBANK, CA 91502  
Phone: (818) 429-9103  
**Record ID:** 190873AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 9/30/2017 IMS: No

**Program Name:** ELEVATIONS  
Legal Name: ELEVATION BEHAVIORAL HEALTH LLC  
Address: 30065 TRIUNFO DRIVE  
City, State Zip: AGOURA HILLS, CA 91301  
Phone: (818) 575-7201 Fax: (818) 575-7201  
**Record ID:** 190874AP  
Service Type: RES-DETOX  
Resident Capacity: 11  
Total Occupancy: 11  
Target Population: 1.1  
Expiration Date: 11/30/2017 IMS: No

**Program Name:** DESTINY RECOVERY CENTER LLC  
Legal Name: DESTINY RECOVERY CENTER, LLC  
Address: 23301 BESSEMER STREET  
City, State Zip: WOODLAND HILLS, CA 91367  
Phone: (310) 738-0008  
**Record ID:** 190875AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 2/28/2018 IMS: No

**Program Name:** CALABASAS RESIDENTIAL  
Legal Name: PARK MIRAMAR 24650 LLC  
Address: 24650 PARK MIRAMAR  
City, State Zip: CALABASAS, CA 91302  
Phone: (818) 223-9009 Fax: (818) 223-8999  
**Record ID:** 190876AP  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 4/30/2018 IMS: No

**Program Name:** CALABASAS OUTPATIENT  
Legal Name: PARK MIRAMAR 24650 LLC  
Address: 23951 CRAFTSMAN ROAD,  
BUILDING B  
City, State Zip: CALABASAS, CA 91302  
Phone: (818) 535-5601  
**Record ID:** 190876BP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 6/30/2018 IMS: No

**Program Name:** HARMONY PLACE  
Legal Name: JMG INVESTMENTS, INC.  
Address: 23041-A HATTERAS STREET  
City, State Zip: WOODLAND HILLS, CA 91367-4236  
Phone: (818) 796-4369 Fax: (818) 914-4440  
**Record ID:** 190879AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 11/30/2017 IMS: Yes

**Program Name:** HARMONY PLACE  
Legal Name: JMG INVESTMENTS, INC.  
Address: 23041 HATTERAS STREET  
City, State Zip: WOODLAND HILLS, CA 91367  
Phone: (818) 796-4369 Fax: (818) 914-4440  
**Record ID:** 190879BP  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 2/28/2019 IMS: Yes

**Program Name:** SEMPRE FAMIGLIA LLC  
Legal Name: SEMPRE FAMIGLIA LLC  
Address: 10447 LARAMIE AVENUE  
City, State Zip: CHATSWORTH, CA 91311  
Phone: (818) 447-2458  
**Record ID:** 190880AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 11/30/2017 IMS: No

**Program Name:** FAITH RECOVERY  
Legal Name: FAITH RECOVERY, INC.  
Address: 2211 PALO VERDE AVENUE, SUITE C  
City, State Zip: LONG BEACH, CA 90815  
Phone: (562) 881-2322 Fax: (562) 430-2250  
**Record ID:** 190881AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 4/30/2018 IMS: No

**Program Name:** SOBER COLLEGE  
Legal Name: SOBER COLLEGE ENVIRONMENTS, LLC  
Address: 6022 VARIEL AVENUE  
City, State Zip: WOODLAND HILLS, CA 91367  
Phone: (818) 274-0304 Fax: (818) 274-0309  
**Record ID:** 190883AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 2/28/2018 IMS: No

**Program Name:** SOBER COLLEGE  
Legal Name: SOBER COLLEGE ENVIRONMENTS, LLC  
Address: 22401 OXNARD STREET  
City, State Zip: WOODLAND HILLS, CA 91367  
Phone: (818) 415-3456 Fax: (818) 301-1935  
**Record ID:** 190883BP  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.2  
Expiration Date: 2/28/2018 IMS: No

**Program Name:** SOBER COLLEGE  
Legal Name: SOBER COLLEGE ENVIRONMENTS, LLC  
Address: 8546 KEOKUK AVENUE  
City, State Zip: WINNETKA, CA 91306  
Phone: (747) 302-3763 Fax: (818) 301-1935  
**Record ID:** 190883CP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.2  
Expiration Date: 2/28/2018 IMS: Yes

**Program Name:** CROSSROAD TRANSITIONAL, INC  
Legal Name: CROSSROAD TRANSITIONAL, INC  
Address: 19646 BALLINGER STREET  
City, State Zip: NORTHRIDGE, CA 91324  
Phone: (818) 482-0175  
**Record ID:** 190884AN  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 5/31/2018 IMS: No

**Program Name:** LA VENTANA TREATMENT PROGRAMS  
Legal Name: RYLIST, INC.  
Address: 1243 7TH STREET, SUITE B AND C  
City, State Zip: SANTA MONICA, CA 90401  
Phone: (424) 231-2420  
**Record ID:** 190886AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 3/31/2019 IMS: No

**Program Name:** WISDOM OUTPATIENT CENTER  
Legal Name: WISDOM TREATMENT, LLC  
Address: 3031 N. SAN FERNANDO BLVD, SUITE 100  
City, State Zip: BURBANK, CA 91505  
Phone: (832) 312-9611 Fax: (818) 861-7527  
**Record ID:** 190887AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 1/31/2018 IMS: No

**Program Name:** ABOUT FACE: DVIP  
Legal Name: ABOUT FACE: DVIP, INC.  
Address: 3407 W 6TH STREET #700  
City, State Zip: LOS ANGELES, CA 90020  
Phone: (213) 384-7084 Fax: (213) 384-7653  
**Record ID:** 190888AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 7/31/2018 IMS: No

**Program Name:** PEGGY ALBRECHT FRIENDLY HOUSE  
Legal Name: FRIENDLY HAND FOUNDATION  
Address: 347 S NORMANDIE AVENUE  
City, State Zip: LOS ANGELES, CA 90020-3167  
Phone: (213) 389-9964 Fax: (213) 389-8812  
**Record ID:** 190890AN  
Service Type: RES  
Resident Capacity: 12  
Total Occupancy: 14  
Target Population: 1.3  
Expiration Date: 6/30/2018 IMS: No

**Program Name:** SANCTUARY TREATMENT CENTER  
Legal Name: SANCTUARY TREATMENT CENTER INC.  
Address: 4815 WOODLEY AVENUE  
City, State Zip: ENCINO, CA 91436  
Phone: (408) 836-3698  
**Record ID:** 190891AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 1/31/2018 IMS: No

**Program Name:** VALLEY DETOX CENTER  
Legal Name: ACTIVE RECOVERY SOLUTIONS, LLC  
Address: 15120 AND 15114 VOSE STREET  
City, State Zip: VAN NUYS, CA 91405  
Phone: (818) 616-1939 Fax: (424) 343-0011  
**Record ID:** 190892AP  
Service Type: RES-DETOX  
Resident Capacity: 12  
Total Occupancy: 12  
Target Population: 1.1  
Expiration Date: 1/31/2018 IMS: No

**Program Name:** EXIS  
Legal Name: EXIS RECOVERY INC.  
Address: 2001 S. BARRINGTON AVENUE, SUITE 219  
City, State Zip: LOS ANGELES , CA 90025  
Phone: (310) 497-6248 Fax: (213) 261-9887  
**Record ID:** 190893AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 5/31/2018 IMS: No

**Program Name:** THE VIEW  
Legal Name: THE VIEW LLC  
Address: 864 TEAKWOOD ROAD  
City, State Zip: LOS ANGELES, CA 90049  
Phone: (760) 409-1287  
**Record ID:** 190894AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 4/30/2018 IMS: No

**Program Name:** LIGHTHOUSE RECOVERY CENTERS  
Legal Name: LIGHTHOUSE RECOVERY CENTERS, LLC  
Address: 5242 DARRO ROAD  
City, State Zip: LOS ANGELES , CA 91308  
Phone: (888) 329-9133 Fax: (818) 279-0550  
**Record ID:** 190896AP  
Service Type: RES-DETOX  
Resident Capacity: 9  
Total Occupancy: 9  
Target Population: 1.1  
Expiration Date: 3/31/2018 IMS: No

**Program Name:** ABACUS GUIDANCE CENTER, INC.  
Legal Name: ABACUS GUIDANCE CENTER, INC.  
Address: 312 NORTH ALLEN AVE.  
City, State Zip: PASADENA, CA 91106-1604  
Phone: (626) 241-9280  
**Record ID:** 190897AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 3/31/2018 IMS: No

**Program Name:** STEPS TO RECOVERY  
Legal Name: STEPS TO RECOVERY, CORP.  
Address: 14434 GILMORE STREET  
City, State Zip: VAN NUYS, CA 91401  
Phone: (818) 905-1422  
**Record ID:** 190898AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 4/30/2018 IMS: No

**Program Name:** PROFOUND TREATMENT  
Legal Name: PROFOUND TREATMENT, LLC  
Address: 1990 WESTWOOD BOULEVARD  
SUITE 210  
City, State Zip: WEST LOS ANGELES, CA 90025  
Phone: (310) 614-4660  
**Record ID:** 190899AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 2/28/2018 IMS: No

**Program Name:** INNERACTIONS  
Legal Name: INNER+ACTIONS, LLC  
Address: 21333 OXNARD STREET, 2ND FLOOR  
City, State Zip: WOODLAND HILLS, CA 91367  
Phone: (818) 963-4357 Fax: (818) 399-7436  
**Record ID:** 190900AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 3/31/2018 IMS: No

**Program Name:** HARMONY PLACE WOODLAND HILLS  
Legal Name: VALLEY RESTORATION CENTER, LLC  
Address: 22900 VENTURA BOULEVARD, # 300 & #340  
City, State Zip: WOODLAND HILLS, CA 91364  
Phone: (818) 519-0670  
**Record ID:** 190901AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 4/30/2018 IMS: No

**Program Name:** HAVEN OUTPATIENT CENTER  
Legal Name: RECOVERY GRADS, LLC  
Address: 817 WEST 34TH STREET,  
4TH FLOOR  
City, State Zip: LOS ANGELES, CA 90089  
Phone: (310) 822-1234 Fax: (310) 822-1234  
**Record ID:** 190902AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 2/28/2018 IMS: No

**Program Name:** VENTURA RECOVERY CENTER-NORTHRIDGE  
Legal Name: SIESTA HOUSE, LLC  
Address: 17433 NORDHOFF STREET  
City, State Zip: NORTHRIDGE, CA 91325  
Phone: (213) 494-4341  
**Record ID:** 190903AP  
Service Type: RES-DETOX  
Resident Capacity: 9  
Total Occupancy: 9  
Target Population: 1.1  
Expiration Date: 5/31/2018 IMS: No

**Program Name:** REMEDY DETOX CENTERS  
Legal Name: REMEDY DETOX CENTERS, LLC  
Address: 4340 MAURY AVENUE  
City, State Zip: LONG BEACH, CA 90807  
Phone: (888) 889-8883 Fax: (562) 446-4345  
**Record ID:** 190904AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.2  
Expiration Date: 4/30/2018 IMS: No

**Program Name:** REMEDY DETOX CENTERS  
Legal Name: REMEDY DETOX CENTERS, LLC  
Address: 1821 E MARSHALL PLACE  
City, State Zip: LONG BEACH, CA 90807  
Phone: (562) 270-6344 Fax: (562) 446-4340  
**Record ID:** 190904BP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.3  
Expiration Date: 10/31/2018 IMS: No

**Program Name:** 310 RECOVERY  
Legal Name: 310 RECOVERY, INC.  
Address: 10533 WASHINGTON BLVD.  
City, State Zip: CULVER CITY, CA 90232  
Phone: (310) 210-6931  
**Record ID:** 190905AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 5/31/2018 IMS: No

**Program Name:** LIFE UNCOMMON  
Legal Name: LIFE UNCOMMON, LLC  
Address: 8616 LA TIJERA BOULEVARD,  
#404  
City, State Zip: LOS ANGELES , CA 90045  
Phone: (310) 463-5521 Fax: (310) 982-2564  
**Record ID:** 190906AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 7/31/2018 IMS: No

**Program Name:** MELROSE RECOVERY  
Legal Name: MELROSE RECOVERY LLC  
Address: 501 N. MARIPOSA AVENUE  
City, State Zip: LOS ANGELES, CA 90004  
Phone: (702) 901-9079  
**Record ID:** 190907AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 10/31/2018 IMS: No

**Program Name:** BEL AIR VALLEY DETOX  
Legal Name: BEL AIR OUTPATIENT CENTER, LLC  
Address: 4938 RUBIO AVENUE  
City, State Zip: ENCINO, CA 91436  
Phone: (310) 869-6211  
**Record ID:** 190908AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 9/30/2018 IMS: No

**Program Name:** THE VILLA OUTPATIENT SERVICES, LLC  
Legal Name: THE VILLA OUTPATIENT SERVICES, LLC  
Address: 4463 VAN NUYS BOULEVARD  
City, State Zip: SHERMAN OAKS, CA 91403  
Phone: (818) 205-9069 Fax: (818) 205-9525  
**Record ID:** 190909AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 4/30/2018 IMS: No

**Program Name:** AWAKENINGS PM  
Legal Name: CW PSYCHOLOGICAL CORPORATION  
Address: 28720 ROADSIDE DRIVE,  
SUITE 229  
City, State Zip: AGOURA HILLS, CA 91301-6317  
Phone: (805) 574-0936  
**Record ID:** 190910AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 5/31/2018 IMS: No

**Program Name:** COMMON BOND REHAB CENTER  
Legal Name: COMMON BOND REHAB CENTER, LLC  
Address: 24456 LYONS AVENUE  
City, State Zip: NEWHALL, CA 91321  
Phone: (661) 733-1520  
**Record ID:** 190912AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 6/30/2018 IMS: No

**Program Name:** DEDICATO TREATMENT CENTER  
Legal Name: DEDICATO TREATMENT CENTER INC.  
Address: 22 W. CARTER AVENUE  
City, State Zip: SIERRA MADRE, CA 91024  
Phone: (626) 644-8857 Fax: (626) 921-0214  
**Record ID:** 190913AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 6/30/2018 IMS: No

**Program Name:** LUMINANCE HEALTH GROUP, INC.  
Legal Name: LUMINANCE HEALTH GROUP, INC.  
Address: 3556 SERRA ROAD  
City, State Zip: MALIBU, CA 90265  
Phone: (310) 303-8325 Fax: (949) 612-2001  
**Record ID:** 190914AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 6/30/2018 IMS: No

**Program Name:** THE VALLEY PREVENTION & TREATMENT CENTER  
Legal Name: VIDA FAMILY CENTER, INC.  
Address: 4419 VAN NUYS BOULEVARD,  
#307  
City, State Zip: SHERMAN OAKS, CA 91403  
Phone: (818) 365-7776  
**Record ID:** 190915AP  
Service Type: NON  
Target Population: 1.8  
Expiration Date: 7/31/2018 IMS: No

**Program Name:** THE CAMDEN CENTER, INC.  
Legal Name: THE CAMDEN CENTER, INC.  
Address: 10780 SANTA MONICA BOULEVARD,  
SUITES 105, 120, 310  
City, State Zip: LOS ANGELES , CA 90025  
Phone: (844) 422-6336 Fax: (888) 887-2955  
**Record ID:** 190916AP  
Service Type: NON-DETOX  
Target Population: 1.10  
Expiration Date: 9/30/2018 IMS: No

**Program Name:** INTEGRITY TREATMENT PROGRAM  
Legal Name: INTEGRITY TREATMENT PROGRAM, LLC  
Address: 12301 WILSHIRE BOULEVARD,  
206  
City, State Zip: LOS ANGELES , CA 90025  
Phone: (310) 621-1536  
**Record ID:** 190917AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 7/31/2018 IMS: No



**Program Name:** BARBARA CARE HEALTH SOLUTIONS, INC.  
Legal Name: BARBARA CARE HEALTH SOLUTIONS, INC.  
Address: 323 N. PRAIRIE AVENUE,  
401-A  
City, State Zip: INGLEWOOD, CA 90301  
Phone: (323) 829-0234  
**Record ID:** 190918AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 7/31/2018 IMS: No

**Program Name:** PASSAGES BEVERLYWOOD  
Legal Name: PASSAGES BEVERLYWOOD, LLC  
Address: 2370 SOUTH ROBERTSON BOULEVARD  
City, State Zip: LOS ANGELES, CA 90034-2029  
Phone: (323) 694-9680 Fax: (424) 298-8034  
**Record ID:** 190919AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 7/31/2018 IMS: No

**Program Name:** LIFESYNC RECOVERY AND DETOXIFICATION CENTER  
Legal Name: LIFESYNC RECOVERY AND DETOXIFICATION, LLC  
Address: 6025 MURPHY WAY  
City, State Zip: MALIBU, CA 90265  
Phone: (818) 991-5433 Fax: (818) 991-5423  
**Record ID:** 190920AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 7/31/2018 IMS: No

**Program Name:** SILICON BEACH OUTPATIENT CENTER, LLC  
Legal Name: SILICON BEACH OUTPATIENT CENTER, LLC  
Address: 8939 S. SEPULVEDA BOULEVARD,  
414  
City, State Zip: LOS ANGELES, CA 90045-2334  
Phone: (310) 795-0542  
**Record ID:** 190921AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 6/30/2018 IMS: No

**Program Name:** SEWELL TREATMENT CENTER  
Legal Name: FRED JEFFERSON MEMORIAL HOMES FOR BOYS  
Address: 152 WEST WALNUT STREET,  
#150  
City, State Zip: CARSON, CA 90248  
Phone: (310) 763-1660 Fax: (310) 886-3258  
**Record ID:** 190922AN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 12/31/2018 IMS: No

**Program Name:** AXIS RESIDENTIAL TREATMENT - WEST  
Legal Name: AXIS RESIDENTIAL TREATMENT - WEST, LLC  
Address: 4022-4024 HURON AVENUE  
City, State Zip: CULVER CITY, CA 90232  
Phone: (310) 838-3640 Fax: (310) 838-3642  
**Record ID:** 190923AP  
Service Type: RES-DETOX  
Resident Capacity: 12  
Total Occupancy: 12  
Target Population: 1.1  
Expiration Date: 9/30/2018 IMS: No

**Program Name:** FOUNDATIONS LOS ANGELES  
Legal Name: CANYON WEST LOS ANGELES, LLC.  
Address: 17167 W. VENTURA BOULEVARD  
City, State Zip: ENCINO, CA 91316  
Phone: (818) 464-1700  
**Record ID:** 190924AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 8/31/2018 IMS: No

**Program Name:** SOBERGUARD RECOVERY CENTER  
Legal Name: SG DETOX 5156 LLC  
Address: 5156 BASCULE AVENUE  
City, State Zip: WOODLAND HILLS, CA 91364  
Phone: (818) 456-4658  
**Record ID:** 190925AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 10/31/2018 IMS: No

**Program Name:** MPBH RECOVERY CENTER  
Legal Name: MOTION PICTURE BEHAVIORAL HEALTH, INC.  
Address: 5210 VISTA MIGUEL DRIVE  
City, State Zip: LA CANADA, CA 91101  
Phone: (951) 427-4807  
**Record ID:** 190926AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 8/31/2018 IMS: No

**Program Name:** PACIFIC VIEW RECOVERY CENTER  
Legal Name: PACIFIC VIEW RECOVERY CENTER, LLC  
Address: 643 PACIFIC STREET,  
UNITS 1, 2, 3, & 4  
City, State Zip: SANTA MONICA, CA 90405  
Phone: (310) 392-2320 Fax: (310) 392-2331  
**Record ID:** 190927AP  
Service Type: RES-DETOX  
Resident Capacity: 16  
Total Occupancy: 16  
Target Population: 1.1  
Expiration Date: 9/30/2018 IMS: No

**Program Name:** AXIS LLC  
Legal Name: AXIS LLC  
Address: 3215 CHEVIOT VISTA PLACE  
City, State Zip: LOS ANGELES, CA 90034  
Phone: (310) 202-1593 Fax: (310) 202-7604  
**Record ID:** 190928AP  
Service Type: RES-DETOX  
Resident Capacity: 12  
Total Occupancy: 12  
Target Population: 1.1  
Expiration Date: 9/30/2018 IMS: No

**Program Name:** THINK AND BE TREATMENT CENTER  
Legal Name: THINK AND BE TREATMENT CENTER  
Address: 4955 VAN NUYS BOULEVARD,  
SUITE 200  
City, State Zip: SHERMAN OAKS, CA 91403  
Phone: (310) 926-5935 Fax: (818) 981-1510  
**Record ID:** 190929AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 10/31/2018 IMS: No

**Program Name:** MANIFEST RECOVERY  
Legal Name: DOLOROSA OPERATIONS, LLC  
Address: 22209 DOLOROSA STREET  
City, State Zip: WOODLAND HILLS, CA 91367  
Phone: (949) 929-4802  
**Record ID:** 190930AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 8/31/2018 IMS: No

**Program Name:** PSYCHOLOGICAL CARE AND HEALING CENTER  
Legal Name: PCH TREATMENT, INC.  
Address: 11965 VENICE BOULEVARD,  
SUITES 200, 201, 202, 203, 204, 205, 207, 209, 210, 307, 308, 310, 311  
City, State Zip: LOS ANGELES, CA 90066  
Phone: (310) 566-7625 Fax: (310) 566-7629  
**Record ID:** 190931AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 8/31/2018 IMS: No

**Program Name:** PEACE BY PIECE TREATMENT CENTER, INC.  
Legal Name: PEACE BY PIECE TREATMENT CENTER, INC.  
Address: 5343 SHIRLEY AVENUE  
City, State Zip: TARZANA, CA 91356  
Phone: (800) 971-6553 Fax: (800) 971-6553  
**Record ID:** 190932AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 9/30/2018 IMS: No

**Program Name:** TRIUMPH RECOVERY  
Legal Name: TRIUMPH RECOVERY  
Address: 13252 MAGNOLIA BOULEVARD  
City, State Zip: SHERMAN OAKS, CA 91423  
Phone: (818) 736-9891 Fax: (818) 736-9893  
**Record ID:** 190933AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 9/30/2018 IMS: No

**Program Name:** DESIGN FOR LIVING  
Legal Name: DESIGN FOR LIVING  
Address: 3239 WEST AVENUE K-1  
City, State Zip: LANCASTER, CA 93536  
Phone: (818) 219-1912 Fax: (661) 793-7231  
**Record ID:** 190934AN  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.2  
Expiration Date: 10/31/2018 IMS: No

**Program Name:** APPLIED LA, LLC  
Legal Name: APPLIED LA, LLC  
Address: 11340 W OLYMPIC BOULEVARD,  
SUITE 305  
City, State Zip: LOS ANGELES, CA 90064  
Phone: (888) 583-0002 Fax: (760) 406-4254  
**Record ID:** 190935AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 10/31/2018 IMS: No

**Program Name:** CAST CENTERS IOP  
Legal Name: CAST CENTERS LLC  
Address: 630 N. DOHENY DRIVE  
City, State Zip: WEST HOLLYWOOD, CA 90069  
Phone: (626) 437-2374 Fax: (310) 564-1883  
**Record ID:** 190936AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 12/31/2018 IMS: No

**Program Name:** CASA BELLA  
Legal Name: CASA BELLA SOBERLIVING-WEST  
Address: 1937 FEDERAL AVENUE  
City, State Zip: LOS ANGELES, CA 90025  
Phone: (818) 923-3929  
**Record ID:** 190937AP  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.3  
Expiration Date: 12/31/2018 IMS: No

**Program Name:** VICTORY DETOX CENTER  
Legal Name: PROGRESSIVE RECOVERY SOLUTIONS, LLC  
Address: 8150 MORSE AVENUE  
City, State Zip: NORTH HOLLYWOOD, CA 91605  
Phone: (818) 922-2458 Fax: (818) 922-2457  
**Record ID:** 190938AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 12/31/2018 IMS: No

**Program Name:** HATHAWAY RECOVERY  
Legal Name: DESTINY RECOVERY, INC.  
Address: 784 EAST POMELLO DRIVE  
City, State Zip: CLAREMONT, CA 91711  
Phone: (909) 971-3333  
**Record ID:** 190939AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 8/31/2018 IMS: No

**Program Name:** OAKS OF HOPE  
Legal Name: OAKS OF HOPE LLC  
Address: 26525 JOSEL DRIVE  
City, State Zip: CANYON COUNTRY, CA 91387  
Phone: (661) 298-6191  
**Record ID:** 190940AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 7  
Target Population: 1.1  
Expiration Date: 10/31/2018 IMS: No

**Program Name:** RECOVERY GUILD  
Legal Name: AMERICAN INSTITUTE OF ADDICTION MEDICINE, LLC.  
Address: 12400 W. MAGNOLIA BOULEVARD  
City, State Zip: VALLEY VILLAGE, CA 91607  
Phone: (818) 495-4300 Fax: (818) 452-3700  
**Record ID:** 190942AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 8/31/2018 IMS: No

**Program Name:** IRIS HEALING RETREAT  
Legal Name: IRIS HEALING RETREAT LLC  
Address: 23033 OSTRONIC DRIVE,  
City, State Zip: LOS ANGELES, CA 91367  
Phone: (323) 449-0016  
**Record ID:** 190943AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 1/31/2019 IMS: No

**Program Name:** WESTWIND OUTPATIENT SERVICES  
Legal Name: JAZ CAPITAL INVESTMENTS, LLC  
Address: 640 S. SAN VICENTE BOULEVARD, SUITE 410 & 482  
City, State Zip: LOS ANGELES, CA 90048  
Phone: (323) 302-9721  
**Record ID:** 190945AP  
Service Type: NON-DETOX  
Target Population: 1.1  
Expiration Date: 1/31/2019 IMS: No

**Program Name:** STAN PRICE REENTRY CENTER  
Legal Name: CENTER FOR HEALTH JUSTICE, INC.  
Address: 900 AVILA STREET, SUITES 102 & 301  
City, State Zip: LOS ANGELES, CA 90012  
Phone: (213) 229-0985 Fax: (213) 229-0986  
**Record ID:** 190946AN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 12/31/2018 IMS: No

**Program Name:** OPEN HEART RECOVERY  
Legal Name: OPEN HEART RECOVERY  
Address: 4026 6TH AVENUE  
City, State Zip: LOS ANGELES, CA 90008  
Phone: (323) 389-8894 Fax: (310) 671-2306  
**Record ID:** 190947AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 10/31/2018 IMS: No

**Program Name:** LANDMARK RECOVERY CENTER  
Legal Name: LANDMARK RECOVERY LLC.  
Address: 2172 ARGYLE AVE.  
City, State Zip: LOS ANGELES, CA 90068  
Phone: (818) 486-2755  
**Record ID:** 190949AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 12/31/2018 IMS: No

**Program Name:** OVERLAND IOP  
Legal Name: HK MANAGEMENT COMPANY LLC  
Address: 3415 OVERLAND AVE  
City, State Zip: LOS ANGELES, CA 90034  
Phone: (310) 876-0407 Fax: (310) 876-0313  
**Record ID:** 190950AP  
Service Type: NON  
Target Population: 1.8  
Expiration Date: 12/31/2018 IMS: No

**Program Name:** CHANDLER TREATMENT LLC  
Legal Name: CHANDLER TREATMENT, LLC  
Address: 5503 CAHUENGA BLVD, SUITE 201  
City, State Zip: NORTH HOLLYWOOD, CA 91601  
Phone: (818) 538-1527  
**Record ID:** 190952AP  
Service Type: NON  
Target Population: 1.8  
Expiration Date: 12/31/2018 IMS: No

**Program Name:** MALIBU SUNLIFE  
Legal Name: SUNLIFE RECOVERY CENTERS, LLC  
Address: 31508 ANACAPA VIEW DRIVE  
City, State Zip: MALIBU, CA 90265  
Phone: (310) 457-0808 Fax: (310) 457-0808  
**Record ID:** 190954AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.8  
Expiration Date: 2/28/2019 IMS: No

**Program Name:** VICTORIA'S HOUSE RESIDENTIAL  
Legal Name: VICTORIA'S HOUSE, LLC  
Address: 1813 12TH STREET, UNIT E  
City, State Zip: SANTA MONICA, CA 90404  
Phone: (310) 581-5746 Fax: (310) 581-5748  
**Record ID:** 190955AP  
Service Type: RES-DETOX  
Resident Capacity: 5  
Total Occupancy: 5  
Target Population: 1.1  
Expiration Date: 2/28/2019 IMS: No

**Program Name:** VICTORIA'S HOUSE RESIDENTIAL  
Legal Name: VICTORIA'S HOUSE, LLC  
Address: 1813 12TH STREET, UNIT F  
City, State Zip: SANTA MONICA, CA 90404  
Phone: (310) 581-5746 Fax: (310) 581-5748  
**Record ID:** 190955BP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 2/28/2019 IMS: No

**Program Name:** HEALTHY LIVING RESIDENTIAL PROGRAM  
Legal Name: HEALTHY LIVING AND LIFESTYLE, INC.  
Address: 22512 GARZOTA DRIVE  
City, State Zip: SANTA CLARITA, CA 91350  
Phone: (661) 523-7676 Fax: (661) 523-7676  
**Record ID:** 190956AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 4/30/2019 IMS: No

**Program Name:** MALIBU OUTPATIENT  
Legal Name: MALIBU OUTPATIENT, INC.  
Address: 28955 PACIFIC COAST HIGHWAY, SUITE 210  
City, State Zip: MALIBU, CA 90265  
Phone: (310) 975-5344  
**Record ID:** 190958AP  
Service Type: NON  
Target Population: 1.7  
Expiration Date: 12/31/2018 IMS: No

**Program Name:** HELPING HANDS REHABILITATION CLINIC, INC.  
Legal Name: HELPING HANDS REHABILITATION CLINIC, INC.  
Address: 8714 N. SEPULVEDA BLVD.  
City, State Zip: NORTH HILLS, CA 91343  
Phone: (818) 833-0999  
**Record ID:** 190959AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 3/31/2019 IMS: No

**Program Name:** SERENITY TRAUMA HEALING CENTER  
Legal Name: SERENITY FAMILY AND PSYCHOLOGICAL COUNSELING CENTER, P.C.  
Address: 881 ALMA REAL DRIVE, SUITE 310  
City, State Zip: PACIFIC PALISADES, CA 90272  
Phone: (310) 310-9249 Fax: (310) 454-7240  
**Record ID:** 190960AP  
Service Type: NON  
Target Population: 1.7  
Expiration Date: 4/30/2019 IMS: No

**Program Name:** CONCLUSIONS TREATMENT  
Legal Name: CONCLUSIONS TREATMENT, LLC.  
Address: 10200 SEPULVEDA BLVD, SUITE 370  
City, State Zip: MISSION HILLS, CA 91345  
Phone: (818) 221-3076 Fax: (818) 221-3077  
**Record ID:** 190961AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 1/31/2019 IMS: No

**Program Name:** INSIGHT HEALTH AND WELLNESS, LLC  
Legal Name: INSIGHT HEALTH AND WELLNESS, LLC  
Address: 8920 WILSHIRE BLVD, SUITE 310  
City, State Zip: LOS ANGELES, CA 90211  
Phone: (310) 456-8451 Fax: (888) 891-2295  
**Record ID:** 190962AP  
Service Type: NON-DETOX  
Target Population: 1.7  
Expiration Date: 5/31/2019 IMS: No

**Program Name:** 5 RES DETOX  
Legal Name: 5 RES DETOX, LLC  
Address: 10902 RIVERSIDE DRIVE, #B  
City, State Zip: NORTH HOLLYWOOD, CA 91602  
Phone: (323) 608-2280  
**Record ID:** 190964AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 4/30/2019 IMS: No

**Program Name:** HONEY CENTER, INC.  
Legal Name: HONEY CENTER, INC.  
Address: 1436 S. LA CIENEGA BLVD, SUITE 208A  
City, State Zip: LOS ANGELES, CA 90035  
Phone: (866) 818-0321  
**Record ID:** 190965AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 6/30/2019 IMS: No

**Program Name:** INFINITY MALIBU  
Legal Name: INFINITY MALIBU, LLC  
Address: 27475 WINDING WAY  
City, State Zip: MALIBU, CA 90265  
Phone: (818) 855-8587 Fax: (818) 616-3271  
**Record ID:** 190966AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 5/31/2019 IMS: No

**Program Name:** INFINITY MALIBU IOP  
Legal Name: INFINITY MALIBU IOP, LLC  
Address: 28035 DOROTHY DRIVE, SUITE 110  
City, State Zip: AGOURA HILLS, CA 91301  
Phone: (818) 855-8587 Fax: (818) 616-3271  
**Record ID:** 190967AP  
Service Type: NON  
Target Population: 1.7  
Expiration Date: 10/31/2017 IMS: No

**Program Name:** WEST PALMS DETOX  
Legal Name: PACIFIC RECOVERY SOLUTIONS LLC  
Address: 3229 HILLOCK DRIVE  
City, State Zip: LOS ANGELES, CA 90068  
Phone: (918) 804-7684  
**Record ID:** 190969AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 2/28/2019 IMS: Yes

**Program Name:** PULSE TREATMENT CENTER  
Legal Name: PULSE TREATMENT CENTER, INC.  
Address: 5530 CORBIN AVENUE, SUITE 145  
City, State Zip: TARZANA, CA 91356  
Phone: (949) 293-2278 Fax: (818) 286-1582  
**Record ID:** 190970AP  
Service Type: NON  
Target Population: 1.7  
Expiration Date: 3/31/2019 IMS: No

**Program Name:** HILLSIDE MALIBU CORP.  
Legal Name: HILLSIDE MALIBU CORP.  
Address: 4505 LAS VIRGENES, SUITE 211  
City, State Zip: CALABASAS, CA 91302  
Phone: (818) 706-9000 Fax: (818) 706-9009  
**Record ID:** 190971AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 6/30/2019 IMS: No

**Program Name:** PRECIOUS TREATMENT  
Legal Name: PRECIOUS TREATMENT  
Address: 4381 VANALDEN AVE.  
City, State Zip: TARZANA, CA 91356  
Phone: (213) 216-1545 Fax: (818) 280-8063  
**Record ID:** 190975AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 5/31/2019 IMS: No

**Program Name:** RENEWAL SOBRIETY LLC  
Legal Name: RENEWAL SOBRIETY LLC  
Address: 6442 COLDWATER CANYON AVE #200  
City, State Zip: NORTH HOLLYWOOD, CA 91606  
Phone: (917) 374-4215  
**Record ID:** 190976AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 7/31/2019 IMS: No



**Program Name:** THE WAY OUT SO CAL, INC.  
Legal Name: THE WAY OUT SO CAL, INC.  
Address: 28118 BOUQUET CANYON ROAD  
City, State Zip: SANTA CLARITA, CA 91350  
Phone: (661) 296-4444 Fax: (661) 296-6666  
**Record ID:** 190979AP  
Service Type: NON  
Target Population: 1.7  
Expiration Date: 5/31/2019 IMS: No

**Program Name:** NEW U BEGINNINGS  
Legal Name: NEW U BEGINNINGS INC  
Address: 5205 AGNES AVE.  
City, State Zip: VALLEY VILLAGE, CA 91607  
Phone: (818) 962-1031 Fax: (818) 962-1032  
**Record ID:** 190980AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 7/31/2019 IMS: No

**Program Name:** FORWARD RECOVERY SOLUTIONS  
Legal Name: FORWARD RECOVERY SOLUTIONS, LLC  
Address: 9740 WEST PICO BLVD.  
City, State Zip: LOS ANGELES, CA 90035  
Phone: (310) 945-0344  
**Record ID:** 190981AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 5/31/2019 IMS: No

**Program Name:** NOVO DETOX  
Legal Name: NOVO MEDICAL DETOXIFICATION CENTERS OF LOS ANGELES, INC.  
Address: 11346 THURSTON PLACE  
City, State Zip: LOS ANGELES, CA 90049  
Phone: (310) 308-2038  
**Record ID:** 190982AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 6/30/2019 IMS: Yes

**Program Name:** REBOS DETOX  
Legal Name: LOST SHEEP, L.L.C.  
Address: 4198 SUNSWEPT DRIVE  
City, State Zip: STUDIO CITY, CA 91604  
Phone: (310) 699-1005 Fax: (310) 694-3278  
**Record ID:** 190984AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 6/30/2019 IMS: No

**Program Name:** MANIFEST RECOVERY CENTERS  
Legal Name: MANIFEST VALLEY WELLNESS, LLC  
Address: 18663 VENTURA BLVD, SUITE 300  
City, State Zip: TARZANA, CA 91356  
Phone: (818) 963-9319 Fax: (818) 657-7285  
**Record ID:** 190987AP  
Service Type: NON  
Expiration Date: 7/31/2019 IMS: No

State of California, Department of Health Care Services  
Licensed Residential Facilities and/or  
Certified Alcohol and Drug Programs

As of 9/1/2017

Madera County

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**Program Name:** VALLEY TEEN RANCH RESIDENTIAL TREATMENT GROUP HOME  
**Legal Name:** VALLEY TEEN RANCH  
**Address:** 10535 ROAD 35  
**City, State Zip:** MADERA, CA 93638  
**Phone:** (559) 635-1110      **Fax:** (559) 538-5004  
**Record ID:** 200001AN  
**Service Type:** NON  
**Target Population:** 1.11  
**Expiration Date:** 10/31/2017      **IMS:** No

State of California, Department of Health Care Services  
Licensed Residential Facilities and/or  
Certified Alcohol and Drug Programs

As of 9/1/2017

Marin County

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**Program Name:** CENTER POINT - THE MANOR  
Legal Name: CENTER POINT, INC.  
Address: 603 D STREET  
City, State Zip: SAN RAFAEL, CA 94901  
Phone: (415) 454-9444 Fax: (415) 492-8844  
**Record ID:** 210002BN  
Service Type: RES  
Resident Capacity: 40  
Total Occupancy: 40  
Target Population: 1.1  
Expiration Date: 8/31/2019 IMS: No

**Program Name:** THE VILLAGE  
Legal Name: CENTER POINT, INC.  
Address: 1477-1483 LINCOLN AVENUE  
City, State Zip: SAN RAFAEL, CA 94901  
Phone: (415) 454-9444  
**Record ID:** 210002FN  
Service Type: RES  
Resident Capacity: 44  
Total Occupancy: 44  
Target Population: 1.4  
Expiration Date: 8/31/2019 IMS: No

**Program Name:** CENTER POINT OUTPATIENT SERVICES  
Legal Name: CENTER POINT, INC.  
Address: 1601 SECOND STREET, SUITE 104 AND 108  
City, State Zip: SAN RAFAEL, CA 94901  
Phone: (415) 456-6655 Fax: (415) 492-8844  
**Record ID:** 210002GN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 8/31/2019 IMS: No

**Program Name:** BAY AREA COMMUNITY RESOURCES  
Legal Name: BAY AREA COMMUNITY RESOURCES, INC.  
Address: 171 CARLOS DRIVE  
City, State Zip: SAN RAFAEL, CA 94903  
Phone: (415) 444-5580 Fax: (415) 444-5598  
**Record ID:** 210005BN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 10/31/2018 IMS: No

**Program Name:** BAY AREA COMMUNITY RESOURCES--IN CUSTODY PROGRAM  
Legal Name: BAY AREA COMMUNITY RESOURCES, INC.  
Address: 13 PETER BEHR DRIVE  
City, State Zip: SAN RAFAEL, CA 94903  
Phone: (415) 755-2328 Fax: (415) 755-2228  
**Record ID:** 210005CN  
Service Type: NON  
Target Population: 1.2  
Expiration Date: 5/31/2019 IMS: No

**Program Name:** SERENITY KNOLLS  
Legal Name: SERENITY KNOLLS  
Address: 145 TAMAL ROAD  
City, State Zip: FOREST KNOLLS, CA 94933  
Phone: (415) 488-0400 Fax: (415) 488-1955  
**Record ID:** 210011AP  
Service Type: RES-DETOX  
Resident Capacity: 30  
Total Occupancy: 32  
Target Population: 1.1  
Expiration Date: 4/30/2018 IMS: No

**Program Name:** THE HELEN VINE RECOVERY CENTER  
Legal Name: BUCKELEW PROGRAMS  
Address: 301 SMITH RANCH ROAD  
City, State Zip: SAN RAFAEL, CA 94903  
Phone: (415) 492-0818  
**Record ID:** 210017DN  
Service Type: RES-DETOX  
Resident Capacity: 26  
Total Occupancy: 26  
Target Population: 1.1  
Expiration Date: 3/31/2019 IMS: No

**Program Name:** BAYSIDE MARIN II  
Legal Name: BAYSIDE MARIN, INC.  
Address: 189 BAYVIEW DRIVE  
City, State Zip: SAN RAFAEL, CA 94901  
Phone: (415) 721-2000  
**Record ID:** 210030AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 7/31/2019 IMS: No

**Program Name:** BAYSIDE MARIN I  
Legal Name: BAYSIDE MARIN, INC.  
Address: 191 BAYVIEW DRIVE  
City, State Zip: SAN RAFAEL, CA 94901  
Phone: (415) 721-2000  
**Record ID:** 210030BP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 7/31/2019 IMS: No

**Program Name:** BAYSIDE MARIN OUTPATIENT PROGRAM  
Legal Name: BAYSIDE MARIN, INC.  
Address: 718 4TH STREET  
City, State Zip: SAN RAFAEL, CA 94901  
Phone: (415) 721-2000  
**Record ID:** 210030CP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 7/31/2019 IMS: No

**Program Name:** BAYSIDE MARIN III  
Legal Name: BAYSIDE MARIN, INC.  
Address: 47 TWEED TERRACE  
City, State Zip: SAN RAFAEL, CA 94901  
Phone: (415) 721-2000 Fax: (415) 454-3535  
**Record ID:** 210030DP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 7/31/2019 IMS: No

**Program Name:** BAYSIDE MARIN  
Legal Name: BAYSIDE MARIN, INC.  
Address: 168 BAYVIEW DRIVE  
City, State Zip: SAN RAFAEL, CA 94901  
Phone: (415) 721-2000 Fax: (415) 454-3535  
**Record ID:** 210030EP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 9/30/2018 IMS: No

**Program Name:** BAYSIDE MARIN IV  
Legal Name: BAYSIDE MARIN, INC.  
Address: 180 BAYVIEW DRIVE  
City, State Zip: SAN RAFAEL, CA 94901  
Phone: (415) 721-2000 Fax: (415) 454-3535  
**Record ID:** 210030FP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 5/31/2019 IMS: No

**Program Name:** MARIN OUTPATIENT AND RECOVERY SERVICES  
Legal Name: MARIN SERVICES FOR MEN  
Address: 710 C STREET, SUITE 7A & 8  
City, State Zip: SAN RAFAEL, CA 94901  
Phone: (415) 485-6736 Fax: (415) 236-1830  
**Record ID:** 210033AN  
Service Type: NON  
Target Population: 1.2  
Expiration Date: 1/31/2018 IMS: No

**Program Name:** NORTH BAY RECOVERY CENTER  
Legal Name: NORTH BAY RECOVERY CENTER, LLC.  
Address: 55 SHAVER STREET,  
SUITES 200 AND 300  
City, State Zip: SAN RAFAEL, CA 94901  
Phone: (415) 454-4357 Fax: (415) 454-4329  
**Record ID:** 210037AP  
Service Type: NON  
Target Population: 1.2  
Expiration Date: 10/31/2017 IMS: No

**Program Name:** REFLECTIONS  
Legal Name: LIVING AT REFLECTIONS, LLC  
Address: 1191 SIMMONS LANE  
City, State Zip: NOVATO, CA 94945  
Phone: (415) 895-6146  
**Record ID:** 210038AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 1/31/2018 IMS: No

**Program Name:** REFLECTIONS  
Legal Name: LIVING AT REFLECTIONS, LLC  
Address: 10 LOCKTON LANE  
City, State Zip: NOVATO, CA 94945  
Phone: (415) 891-8000  
**Record ID:** 210038BP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 3/31/2018 IMS: No

**Program Name:** HUCKLEBERRY YOUTH PROGRAMS  
Legal Name: HUCKLEBERRY YOUTH PROGRAMS, INC.  
Address: 361 THIRD STREET, SUITE G  
City, State Zip: SAN RAFAEL, CA 94901  
Phone: (415) 258-4944  
**Record ID:** 210039AN  
Service Type: NON  
Target Population: 1.5  
Expiration Date: 10/31/2018 IMS: No

**Program Name:** ALTA MIRA RECOVERY PROGRAMS  
Legal Name: ALTA MIRA RECOVERY CENTERS, LLC  
Address: 125 BULKLEY AVENUE  
City, State Zip: SAUSALITO, CA 94965  
Phone: (415) 332-1350 Fax: (415) 275-7201  
**Record ID:** 210040AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 2/28/2019 IMS: No

**Program Name:** ALTA MIRA RECOVERY PROGRAMS  
Legal Name: ALTA MIRA RECOVERY CENTERS, LLC  
Address: 135 BULKLEY AVENUE  
City, State Zip: SAUSALITO, CA 94965  
Phone: (415) 332-1350 Fax: (415) 275-7201  
**Record ID:** 210040BP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 2/28/2019 IMS: No

**Program Name:** ALTA MIRA RECOVERY PROGRAMS  
Legal Name: ALTA MIRA RECOVERY CENTERS, LLC  
Address: 25 SANTA ROSA  
City, State Zip: SAUSALITO, CA 94965  
Phone: (415) 332-1350 Fax: (415) 339-6084  
**Record ID:** 210040CP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 2/28/2019 IMS: No

**Program Name:** ALTA MIRA RECOVERY PROGRAMS  
Legal Name: ALTA MIRA RECOVERY CENTERS, LLC  
Address: 110 HARRISON AVENUE  
City, State Zip: SAUSALITO, CA 94965  
Phone: (415) 332-1350 Fax: (415) 275-7201  
**Record ID:** 210040DP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 2/28/2019 IMS: No

**Program Name:** ALTA MIRA RECOVERY PROGRAMS  
Legal Name: ALTA MIRA RECOVERY CENTERS, LLC  
Address: 126 HARRISON AVENUE  
City, State Zip: SAUSALTO, CA 94965  
Phone: (415) 332-1350 Fax: (415) 275-7201  
**Record ID:** 210040EP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 2/28/2019 IMS: No

**Program Name:** ALTA MIRA OUTPATIENT SERVICES  
Legal Name: ALTA MIRA RECOVERY CENTERS, LLC  
Address: 591 REDWOOD HIGHWAY, SUITE 5220  
City, State Zip: MILL VALLEY, CA 94941  
Phone: (415) 339-6084 Fax: (415) 520-2404  
**Record ID:** 210040FP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 6/30/2019 IMS: No

**Program Name:** MARIN TREATMENT CENTER  
Legal Name: MARIN TREATMENT CENTER  
Address: 1466 LINCOLN AVENUE  
City, State Zip: SAN RAFAEL, CA 94901  
Phone: (415) 457-3755 Fax: (415) 457-9516  
**Record ID:** 210042AN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 6/30/2018 IMS: No

**Program Name:** MUIR WOOD ADOLESCENT & FAMILY SERVICES  
Legal Name: MUIR WOOD, LLC  
Address: 938 B STREET  
City, State Zip: SAN RAFAEL, CA 94901  
Phone: (310) 903-1155 Fax: (707) 559-5401  
**Record ID:** 210044AP  
Service Type: NON  
Target Population: 1.5  
Expiration Date: 10/31/2017 IMS: No

**Program Name:** SAFE PASSAGE RECOVERY  
Legal Name: SAFE PASSAGE RECOVERY LLC  
Address: 863 FRANCISCO BLVD EAST  
SUITE A  
City, State Zip: SAN RAFAEL, CA 94903  
Phone: (415) 578-2069 Fax: (415) 578-2823  
**Record ID:** 210046AP  
Service Type: NON-DETOX  
Target Population: 1.1  
Expiration Date: 6/30/2018 IMS: No

**Program Name:** FULL CIRCLE RECOVERY CENTER  
Legal Name: FULL CIRCLE ADDICTION AND RECOVERY SERVICES LLC  
Address: 1104 LINCOLN AVENUE  
City, State Zip: SAN RAFAEL, CA 94901  
Phone: (415) 202-6255  
**Record ID:** 210048AP  
Service Type: NON  
Target Population: 1.8  
Expiration Date: 3/31/2019 IMS: No

**Program Name:** AVERY LANE, LLC  
Legal Name: AVERY LANE, LLC  
Address: 505A SAN MARIN DRIVE, SUITE 300  
City, State Zip: NOVATO, CA 94945  
Phone: (415) 686-6127  
**Record ID:** 210049AP  
Service Type: NON-DETOX  
Target Population: 1.3  
Expiration Date: 1/31/2019 IMS: No

**Program Name:** SUNNY HILLS SERVICES  
Legal Name: Sunny Hills Services  
Address: 300 SUNNY HILLS DRIVE, BLDG. 3  
City, State Zip: SAN ANSELMO, CA 94960  
Phone: (415) 457-3200 Fax: (415) 456-4679  
**Record ID:** 210050AN  
Service Type: DSS  
Target Population: 1.5  
Expiration Date: 6/30/2019 IMS: No



State of California, Department of Health Care Services  
Licensed Residential Facilities and/or  
Certified Alcohol and Drug Programs

As of 9/1/2017

Mariposa County

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**Program Name:** MARIPOSA COUNTY BEHAVIORAL HEALTH AND RECOVERY SERVICES  
**Legal Name:** MARIPOSA COUNTY BEHAVIORAL HEALTH AND RECOVERY SERVICES  
**Address:** 5362 LEMEE LANE  
**City, State Zip:** MARIPOSA, CA 95338  
**Phone:** (209) 966-2000      **Fax:** (209) 742-0996  
**Record ID:** 220002AN  
**Service Type:** NON  
**Target Population:** 1.1  
**Expiration Date:** 7/31/2019      **IMS:** No

State of California, Department of Health Care Services  
Licensed Residential Facilities and/or  
Certified Alcohol and Drug Programs

As of 9/1/2017

Mendocino County

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**Program Name:** UKIAH RECOVERY CENTER  
Legal Name: FORD STREET PROJECT  
Address: 201 BRUSH STREET, BUILDINGS 201A, 201B, AND 201C  
City, State Zip: UKIAH, CA 95482  
Phone: (707) 462-1934  
**Record ID:** 230004AN  
Service Type: RES-DETOX  
Resident Capacity: 40  
Total Occupancy: 40  
Target Population: 1.1  
Expiration Date: 6/30/2019 IMS: No

**Program Name:** FORD STREET PROJECT  
Legal Name: FORD STREET PROJECT  
Address: 139 FORD STREET  
City, State Zip: UKIAH, CA 95482  
Phone: (707) 462-1934 Fax: (707) 468-9860  
**Record ID:** 230004BN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 1/31/2019 IMS: No

**Program Name:** MENDOCINO COUNTY HEALTH AND HUMAN SERVICES AGENCY,  
ALCOHOL AND OTHER DRUG PROGRA  
Legal Name: MENDOCINO COUNTY HEALTH AND HUMAN SERVICES AGENCY  
Address: 790 SOUTH FRANKLIN STREET, SUITE B  
City, State Zip: FORT BRAGG, CA 95437  
Phone: (707) 472-2605 Fax: (707) 472-2605  
**Record ID:** 230006GN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 5/31/2019 IMS: No

**Program Name:** MENDOCINO COUNTY HEALTH AND HUMAN SERVICES AGENCY  
BEHAVIORIAL HEALTH & RECOVERY  
Legal Name: MENDOCINO COUNTY HEALTH AND HUMAN SERVICES AGENCY  
Address: 1120 SOUTH DORA STREET  
City, State Zip: UKIAH, CA 95482  
Phone: (707) 472-2637 Fax: (707) 472-2768  
**Record ID:** 230006HN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 10/31/2017 IMS: No

**Program Name:** MENDOCINO COUNTY HHS - CHILDREN'S AND FAMILY SERVICES  
Legal Name: MENDOCINO COUNTY HEALTH AND HUMAN SERVICES AGENCY  
Address: 727 S. STATE STREET  
City, State Zip: UKIAH, CA 95482  
Phone: (707) 472-2605 Fax: (707) 472-2657  
**Record ID:** 230006KN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 7/31/2018 IMS: No

**Program Name:** WILLITS INTEGRATED SERVICES CENTER (WISC)  
Legal Name: MENDOCINO COUNTY HEALTH AND HUMAN SERVICES AGENCY  
Address: 474 E. VALLEY STREET  
City, State Zip: WILLITS, CA 95490  
Phone: (707) 472-2605 Fax: (707) 472-2657  
**Record ID:** 230006LN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 7/31/2018 IMS: No

State of California, Department of Health Care Services  
Licensed Residential Facilities and/or  
Certified Alcohol and Drug Programs

As of 9/1/2017

Merced County

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**Program Name:** DAVE RIORDAN'S 'HOBIE HOUSE'  
**Legal Name:** COMMUNITY/SOCIAL MODEL ADVOCATES, INC.  
**Address:** 1299 AND 1301 YOSEMITE PARKWAY, 1931 AND 1941 HIGHLAND AVENUE  
**City, State Zip:** MERCED, CA 95340  
**Phone:** (209) 722-6335  
**Record ID:** 240001BN  
**Service Type:** RES  
**Resident Capacity:** 25  
**Total Occupancy:** 26  
**Target Population:** 1.2  
**Expiration Date:** 8/31/2018 IMS: No

**Program Name:** THE ROSE JULIA RIORDAN TRANQUILITY VILLAGE  
**Legal Name:** COMMUNITY/SOCIAL MODEL ADVOCATES, INC.  
**Address:** 509/519, 527/537, 559, 569, 579 AND 589 MENDOCINO COURT  
**City, State Zip:** ATWATER, CA 95301  
**Phone:** (209) 357-5261 Fax: (209) 357-5279  
**Record ID:** 240001EN  
**Service Type:** RES  
**Resident Capacity:** 42  
**Total Occupancy:** 60  
**Target Population:** 1.4  
**Expiration Date:** 11/30/2018 IMS: No

**Program Name:** RECOVERY ASSISTANCE FOR TEENS (R.A.F.T.)  
**Legal Name:** MERCED COUNTY DEPARTMENT OF MENTAL HEALTH - ALCOHOL AND DRUG SERVICES  
**Address:** 3313 NORTH G STREET, SUITE B  
**City, State Zip:** MERCED, CA 95340  
**Phone:** (209) 381-6808 Fax: (209) 725-3810  
**Record ID:** 240003AN  
**Service Type:** NON  
**Target Population:** 1.5  
**Expiration Date:** 7/31/2019 IMS: No

**Program Name:** THE CENTER  
**Legal Name:** MERCED COUNTY DEPARTMENT OF MENTAL HEALTH - ALCOHOL AND DRUG SERVICES  
**Address:** 3305 G STREET  
**City, State Zip:** MERCED, CA 95340  
**Phone:** (209) 381-6880 Fax: (209) 723-6220  
**Record ID:** 240003BN  
**Service Type:** NON  
**Target Population:** 1.1  
**Expiration Date:** 2/28/2018 IMS: No

**Program Name:** MERCED COUNTY SACPA DRUG TREATMENT PROGRAM  
**Legal Name:** MERCED COUNTY DEPARTMENT OF MENTAL HEALTH-ALCOHOL AND DRUG SERVICES  
**Address:** 676 LOUHBOROUGH DRIVE  
**City, State Zip:** MERCED, CA 95348-2601  
**Phone:** (209) 381-6852 Fax: (209) 385-3174  
**Record ID:** 240003CN  
**Service Type:** NON  
**Target Population:** 1.1  
**Expiration Date:** 4/30/2018 IMS: No

**State of California, Department of Health Care Services  
Licensed Residential Facilities and/or  
Certified Alcohol and Drug Programs**

**As of 9/1/2017**

**Modoc County**

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No licensed or certified facilities at this time.

Please check with a neighboring county for services.

**State of California, Department of Health Care Services  
Licensed Residential Facilities and/or  
Certified Alcohol and Drug Programs**

**As of 9/1/2017**

**Mono County**

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No licensed or certified facilities at this time.

Please check with a neighboring county for services.

State of California, Department of Health Care Services  
Licensed Residential Facilities and/or  
Certified Alcohol and Drug Programs

As of 9/1/2017

Monterey County

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**Program Name:** BEACON HOUSE  
Legal Name: BEACON HOUSE  
Address: 468 PINE AVENUE  
City, State Zip: PACIFIC GROVE, CA 93950  
Phone: (831) 372-2334  
**Record ID:** 270001AN  
Service Type: RES-DETOX  
Resident Capacity: 22  
Total Occupancy: 22  
Target Population: 1.1  
Expiration Date: 3/31/2018 IMS: No

**Program Name:** DOOR TO HOPE  
Legal Name: DOOR TO HOPE  
Address: 165 CLAY STREET  
City, State Zip: SALINAS, CA 93901  
Phone: (831) 422-6226 Fax: (831) 758-5127  
**Record ID:** 270002AN  
Service Type: RES  
Resident Capacity: 14  
Total Occupancy: 14  
Target Population: 1.3  
Expiration Date: 3/31/2018 IMS: No

**Program Name:** NUEVA ESPERANZA  
Legal Name: DOOR TO HOPE  
Address: 325 CALIFORNIA STREET  
City, State Zip: SALINAS, CA 93901  
Phone: (831) 422-2636 Fax: (831) 758-5127  
**Record ID:** 270002BN  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 16  
Target Population: 1.3  
Expiration Date: 3/31/2018 IMS: No

**Program Name:** DOOR TO HOPE  
Legal Name: DOOR TO HOPE  
Address: 130 WEST GABILAN STREET  
City, State Zip: SALINAS, CA 93901  
Phone: (831) 758-0181 Fax: (831) 758-5127  
**Record ID:** 270002CN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 7/31/2019 IMS: No

**Program Name:** SUN STREET CENTERS, MEN'S RESIDENTIAL  
Legal Name: SUN STREET CENTERS  
Address: 8 SUN STREET  
City, State Zip: SALINAS, CA 93901  
Phone: (831) 753-5145  
**Record ID:** 270003AN  
Service Type: RES  
Resident Capacity: 54  
Total Occupancy: 54  
Target Population: 1.2  
Expiration Date: 11/30/2017 IMS: No

**Program Name:** SUN STREET CENTERS OUTPATIENT PROGRAM  
Legal Name: SUN STREET CENTERS  
Address: 12 SUN STREET  
City, State Zip: SALINAS, CA 93901  
Phone: (831) 753-6001 Fax: (831) 753-5169  
**Record ID:** 270003BN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 5/31/2019 IMS: No

**Program Name:** GENESIS RESIDENTIAL CENTER  
Legal Name: COMMUNITY HUMAN SERVICES  
Address: 1140, 1146, AND 1152 SONOMA AVENUE  
City, State Zip: SEASIDE, CA 93955  
Phone: (831) 899-2436 Fax: (831) 658-3815  
**Record ID:** 270004AN  
Service Type: RES  
Resident Capacity: 36  
Total Occupancy: 42  
Target Population: 1.1  
Expiration Date: 11/30/2017 IMS: No

**Program Name:** VALLEY HEALTH ASSOCIATES  
Legal Name: VALLEY HEALTH ASSOCIATES  
Address: 338 MONTEREY STREET  
City, State Zip: SALINAS, CA 93901  
Phone: (831) 424-6655 Fax: (831) 424-9717  
**Record ID:** 270011AN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 10/31/2018 IMS: No

**Program Name:** MONTEREY INSTITUTE OF MENTAL HEALTH  
Legal Name: MONTEREY INSTITUTE LICENSED CLINICAL SOCIAL WORKER, INC.  
Address: 398 FOAM STREET, SUITE 200  
City, State Zip: MONTEREY, CA 93940  
Phone: (831) 747-1727  
**Record ID:** 270012AP  
Service Type: NON-DETOX  
Target Population: 1.1  
Expiration Date: 11/30/2018 IMS: No

State of California, Department of Health Care Services  
Licensed Residential Facilities and/or  
Certified Alcohol and Drug Programs

As of 9/1/2017

Napa County

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**Program Name:** NAPA COUNTY ALCOHOL AND DRUG PROGRAMS  
**Legal Name:** NAPA COUNTY HEALTH AND HUMAN SERVICES  
**Address:** 2751 NAPA VALLEY CORPORATE DRIVE  
BUILDINGS A & B  
**City, State Zip:** NAPA, CA 94558  
**Phone:** (707) 253-4721  
**Record ID:** 280003BN  
**Service Type:** NON  
**Target Population:** 1.1  
**Expiration Date:** 7/31/2018                      **IMS:**      No

**Program Name:** ALTERNATIVES FOR BETTER LIVING  
**Legal Name:** ALTERNATIVES FOR BETTER LIVING  
**Address:** 701 SCHOOL STREET  
**City, State Zip:** NAPA, CA 94559-2829  
**Phone:** (707) 226-1248                      **Fax:**      (707) 226-8011  
**Record ID:** 280010AN  
**Service Type:** NON  
**Target Population:** 1.1  
**Expiration Date:** 1/31/2019                      **IMS:**      No

**Program Name:** ALDEA BEHAVIORAL HEALTH SERVICES  
**Legal Name:** ALDEA, INC.  
**Address:** 2310 1ST STREET  
**City, State Zip:** NAPA, CA 94559  
**Phone:** (707) 255-1855                      **Fax:**      (707) 255-5621  
**Record ID:** 280013BN  
**Service Type:** NON  
**Target Population:** 1.5  
**Expiration Date:** 4/30/2019                      **IMS:**      No

**Program Name:** COLD SPRINGS  
**Legal Name:** PACIFICA PAIN MANAGEMENT SERVICES, INC.  
**Address:** 415 COLD SPRINGS ROAD  
**City, State Zip:** ANGWIN, CA 94508-9657  
**Phone:** (707) 963-1493                      **Fax:**      (707) 963-1463  
**Record ID:** 280015AP  
**Service Type:** RES-DETOX  
**Resident Capacity:** 6  
**Total Occupancy:** 7  
**Target Population:** 1.1  
**Expiration Date:** 1/31/2018                      **IMS:**      No

**Program Name:** MCALISTER INSTITUTE RESIDENTIAL PROGRAM  
**Legal Name:** MCALISTER INSTITUTE FOR TREATMENT & EDUCATION, INC.  
**Address:** 2100 NAPA VALLEJO HIGHWAY, BLDG. 253 (M-1)  
**City, State Zip:** NAPA, CA 94558-6293  
**Phone:** (707) 257-1460                      **Fax:**      (619) 442-1101  
**Record ID:** 280017AN  
**Service Type:** RES-DETOX  
**Resident Capacity:** 55  
**Total Occupancy:** 61  
**Target Population:** 1.1  
**Expiration Date:** 11/30/2017                      **IMS:**      No



**Program Name:** DUFFY'S MYRTLEDALE  
Legal Name: DUFFY'S NAPA VALLEY REHAB, LLC  
Address: 3058, 3076 & 3088 MYRTLEDALE ROAD  
City, State Zip: CALISTOGA, CA 94515  
Phone: (888) 717-9724 Fax: (707) 942-4819  
**Record ID:** 280019AP  
Service Type: RES-DETOX  
Resident Capacity: 61  
Total Occupancy: 61  
Target Population: 1.1  
Expiration Date: 10/31/2017 IMS: No

**Program Name:** DUFFY'S NAPA VALLEY  
Legal Name: DUFFY'S NAPA VALLEY REHAB, LLC  
Address: 2436 FOOTHILL BOULEVARD, SUITE E  
City, State Zip: CALISTOGA, CA 94515  
Phone: (707) 942-6888 Fax: (707) 942-4819  
**Record ID:** 280019BP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 10/31/2017 IMS: No

State of California, Department of Health Care Services  
Licensed Residential Facilities and/or  
Certified Alcohol and Drug Programs

As of 9/1/2017

Nevada County

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**Program Name:** GRASS VALLEY SERVICE CENTER  
**Legal Name:** COMMUNITY RECOVERY RESOURCES  
**Address:** 180 SIERRA COLLEGE DRIVE  
**City, State Zip:** GRASS VALLEY, CA 95945-5768  
**Phone:** (530) 273-9541 Fax: (530) 273-7740  
**Record ID:** 290002AN  
**Service Type:** NON  
**Target Population:** 1.1  
**Expiration Date:** 6/30/2018 IMS: No

**Program Name:** HOPE HOUSE/SERENITY HOUSE  
**Legal Name:** COMMUNITY RECOVERY RESOURCES  
**Address:** 159 BRENTWOOD DRIVE  
**City, State Zip:** GRASS VALLEY, CA 95945-5768  
**Phone:** (530) 271-1141 Fax: (530) 271-7036  
**Record ID:** 290002BN  
**Service Type:** RES-DETOX  
**Resident Capacity:** 40  
**Total Occupancy:** 52  
**Target Population:** 1.9  
**Expiration Date:** 1/31/2019 IMS: No

**Program Name:** TRUCKEE SERVICE CENTER  
**Legal Name:** COMMUNITY RECOVERY RESOURCES  
**Address:** 10015 PALISADES DRIVE, SUITE 1  
**City, State Zip:** TRUCKEE, CA 96161-1941  
**Phone:** (530) 587-8194 Fax: (530) 587-5617  
**Record ID:** 290002DN  
**Service Type:** NON  
**Target Population:** 1.10  
**Expiration Date:** 6/30/2018 IMS: No

State of California, Department of Health Care Services  
Licensed Residential Facilities and/or  
Certified Alcohol and Drug Programs

As of 9/1/2017

Orange County

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**Program Name:** MARIPOSA WOMEN AND FAMILY CENTER  
**Legal Name:** MARIPOSA WOMEN AND FAMILY CENTER  
**Address:** 812 W. TOWN AND COUNTRY ROAD  
**City, State Zip:** ORANGE, CA 92868  
**Phone:** (714) 547-6494  
**Record ID:** 300005AN  
**Service Type:** NON  
**Target Population:** 1.1  
**Expiration Date:** 12/31/2017                      **IMS:** No

**Program Name:** MARIPOSA WOMEN AND FAMILY CENTER  
**Legal Name:** MARIPOSA WOMEN AND FAMILY CENTER  
**Address:** 29222 RANCHO VIEJO ROAD, #122  
**City, State Zip:** SAN JUAN CAPISTRANO, CA 92675  
**Phone:** (714) 547-6494                      **Fax:** (714) 547-6464  
**Record ID:** 300005BN  
**Service Type:** NON  
**Target Population:** 1.1  
**Expiration Date:** 2/28/2019                      **IMS:** No

**Program Name:** ADULT AND OLDER ADULT BEHAVIORAL HEALTH- SANTA ANA SUBSTANCE USE DISORDERS  
**Legal Name:** COUNTY OF ORANGE HEALTH CARE AGENCY  
**Address:** 1200 NORTH MAIN STREET, SUITES 100B AND 301  
**City, State Zip:** SANTA ANA, CA 92701  
**Phone:** (714) 834-2860                      **Fax:** (714) 568-4933  
**Record ID:** 300006BN  
**Service Type:** NON  
**Target Population:** 1.1  
**Expiration Date:** 4/30/2018                      **IMS:** No

**Program Name:** ADULT AND OLDER ADULT BEHAVIORAL HEALTH- WESTMINSTER SUBSTANCE USE DISORDERS  
**Legal Name:** COUNTY OF ORANGE HEALTH CARE AGENCY  
**Address:** 14140 BEACH BOULEVARD, ROOM 120 AND 200  
**City, State Zip:** WESTMINSTER, CA 92683  
**Phone:** (714) 834-2160  
**Record ID:** 300006DN  
**Service Type:** NON  
**Target Population:** 1.1  
**Expiration Date:** 4/30/2018                      **IMS:** No

**Program Name:** ADULT AND OLDER ADULT BEHAVIORAL HEALTH - ALISO VIEJO SUBSTANCE USE DISORDERS  
**Legal Name:** COUNTY OF ORANGE HEALTH CARE AGENCY  
**Address:** 5 MAREBLU, SUITES 100 AND 200  
**City, State Zip:** ALISO VIEJO, CA 92656  
**Phone:** (714) 834-2160  
**Record ID:** 300006GN  
**Service Type:** NON  
**Target Population:** 1.1  
**Expiration Date:** 4/30/2018                      **IMS:** No

**Program Name:** ADULT AND OLDER ADULT BEHAVIORAL HEALTH - COSTA MESA SUBSTANCE USE DISORDERS  
**Legal Name:** COUNTY OF ORANGE HEALTH CARE AGENCY  
**Address:** 3115 REDHILL AVENUE  
**City, State Zip:** COSTA MESA, CA 92626  
**Phone:** (714) 834-2160  
**Record ID:** 300006IN  
**Service Type:** NON  
**Target Population:** 1.1  
**Expiration Date:** 4/30/2018                      **IMS:** No

**Program Name:** ADULT AND OLDER ADULT BEHAVIORAL HEALTH - ANAHEIM SUBSTANCE USE DISORDERS  
**Legal Name:** COUNTY OF ORANGE HEALTH CARE AGENCY  
**Address:** 2035 BALL ROAD, SUITES 100A AND 100P  
**City, State Zip:** ANAHEIM, CA 92805  
**Phone:** (714) 517-6140 **Fax:** (714) 517-6169  
**Record ID:** 300006LN  
**Service Type:** NON  
**Target Population:** 1.1  
**Expiration Date:** 12/31/2018 **IMS:** No

**Program Name:** NEW DIRECTIONS FOR WOMEN/PROGRAM FOR WOMEN WITH CHILDREN  
**Legal Name:** NEW DIRECTIONS FOR WOMEN, INC.  
**Address:** 334 UNIVERSITY AVENUE  
**City, State Zip:** COSTA MESA, CA 92627  
**Phone:** (949) 313-1192  
**Record ID:** 300007FN  
**Service Type:** RES  
**Resident Capacity:** 6  
**Total Occupancy:** 12  
**Target Population:** 1.4  
**Expiration Date:** 10/31/2017 **IMS:** No

**Program Name:** NEW DIRECTIONS FOR WOMEN, INC.  
**Legal Name:** NEW DIRECTIONS FOR WOMEN, INC.  
**Address:** 2601 AND 2607 WILLO LANE  
**City, State Zip:** COSTA MESA, CA 92627  
**Phone:** (949) 313-1192  
**Record ID:** 300007GN  
**Service Type:** RES  
**Resident Capacity:** 24  
**Total Occupancy:** 24  
**Target Population:** 1.3  
**Expiration Date:** 11/30/2017 **IMS:** No

**Program Name:** NEW DIRECTIONS FOR WOMEN OUTPATIENT PROGRAM  
**Legal Name:** NEW DIRECTIONS FOR WOMEN, INC.  
**Address:** 3001 REDHILL AVENUE, BUILDING 4, SUITES 108 AND 109  
**City, State Zip:** COSTA MESA, CA 92626  
**Phone:** (949) 313-1192  
**Record ID:** 300007JN  
**Service Type:** NON  
**Target Population:** 1.3  
**Expiration Date:** 2/28/2018 **IMS:** No

**Program Name:** NEW DIRECTIONS FOR WOMEN  
**Legal Name:** NEW DIRECTIONS FOR WOMEN, INC.  
**Address:** 2614 WILLO LANE  
**City, State Zip:** COSTA MESA, CA 92627  
**Phone:** (949) 313-1192 **Fax:** (949) 269-9233  
**Record ID:** 300007KN  
**Service Type:** RES  
**Resident Capacity:** 6  
**Total Occupancy:** 6  
**Target Population:** 1.3  
**Expiration Date:** 7/31/2018 **IMS:** No

**Program Name:** NEW DIRECTIONS FOR WOMEN  
**Legal Name:** NEW DIRECTIONS FOR WOMEN, INC.  
**Address:** 2603 WILLO LANE  
**City, State Zip:** COSTA MESA, CA 92627  
**Phone:** (949) 313-1192  
**Record ID:** 300007LN  
**Service Type:** RES-DETOX  
**Resident Capacity:** 6  
**Total Occupancy:** 6  
**Target Population:** 1.3  
**Expiration Date:** 3/31/2019 **IMS:** No

**Program Name:** CASA ELENA RECOVERY HOME  
Legal Name: CALIFORNIA HISPANIC COMMISSION ON ALCOHOL AND DRUG ABUSE, INC.  
Address: 832 SOUTH ANAHEIM BOULEVARD  
City, State Zip: ANAHEIM, CA 92801  
Phone: (714) 772-5580  
**Record ID:** 300010BN  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.3  
Expiration Date: 7/31/2018 IMS: No

**Program Name:** LA FAMILIA ALCOHOL AND DRUG SERVICES  
Legal Name: CALIFORNIA HISPANIC COMMISSION ON ALCOHOL AND DRUG ABUSE, INC.  
Address: 1905 NORTH COLLEGE AVENUE, SUITE M  
City, State Zip: SANTA ANA, CA 92701  
Phone: (714) 479-0120 Fax: (714) 479-0153  
**Record ID:** 300010DN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 7/31/2018 IMS: No

**Program Name:** SOUTH COAST COUNSELING, INC.  
Legal Name: SOUTH COAST COUNSELING, INC.  
Address: 693 PLUMER STREET  
City, State Zip: COSTA MESA, CA 92627-2720  
Phone: (949) 642-0180  
**Record ID:** 300012BN  
Service Type: RES  
Resident Capacity: 15  
Total Occupancy: 15  
Target Population: 1.1  
Expiration Date: 4/30/2018 IMS: No

**Program Name:** ROQUE CENTER  
Legal Name: ROQUE CENTER, INC.  
Address: 10936 DALE AVENUE  
City, State Zip: STANTON, CA 90680  
Phone: (714) 952-4032  
**Record ID:** 300015AN  
Service Type: RES-DETOX  
Resident Capacity: 24  
Total Occupancy: 24  
Target Population: 1.1  
Expiration Date: 7/31/2018 IMS: No

**Program Name:** THE VILLA  
Legal Name: THE VILLA CENTER, INC.  
Address: 910 NORTH FRENCH STREET  
City, State Zip: SANTA ANA, CA 92701  
Phone: (714) 547-3301 Fax: (714) 547-1249  
**Record ID:** 300016AN  
Service Type: RES  
Resident Capacity: 15  
Total Occupancy: 16  
Target Population: 1.3  
Expiration Date: 1/31/2018 IMS: No

**Program Name:** THE VILLA ANNEX  
Legal Name: THE VILLA CENTER, INC.  
Address: 311 EAST WASHINGTON STREET  
City, State Zip: SANTA ANA, CA 92701  
Phone: (714) 547-2732 Fax: (714) 547-1249  
**Record ID:** 300016CN  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 8  
Target Population: 1.3  
Expiration Date: 1/31/2018 IMS: No

**Program Name:** THE VILLA ANNEX II  
Legal Name: THE VILLA CENTER, INC.  
Address: 519 EAST WASHINGTON AVENUE  
City, State Zip: SANTA ANA, CA 92701  
Phone: (714) 547-3301 Fax: (714) 547-1249  
**Record ID:** 300016DN  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.3  
Expiration Date: 5/31/2018 IMS: No

**Program Name:** CORNERSTONE 1  
Legal Name: RECOVERY HOMES OF AMERICA, INC.  
Address: 13682 YORBA STREET  
City, State Zip: TUSTIN, CA 92780-1831  
Phone: (714) 730-5399  
**Record ID:** 300017AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 8  
Target Population: 1.1  
Expiration Date: 5/31/2018 IMS: No

**Program Name:** CORNERSTONE OF SOUTHERN CALIFORNIA 3  
Legal Name: RECOVERY HOMES OF AMERICA, INC.  
Address: 427 SOUTH YORBA STREET  
City, State Zip: ORANGE, CA 92869  
Phone: (714) 730-5399  
**Record ID:** 300017BP  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 7  
Target Population: 1.1  
Expiration Date: 5/31/2018 IMS: No

**Program Name:** CORNERSTONE OF SOUTHERN CALIFORNIA 7  
Legal Name: RECOVERY HOMES OF AMERICA, INC.  
Address: 13681 ROSALIND STREET  
City, State Zip: TUSTIN, CA 92780  
Phone: (714) 730-5399 Fax: (714) 710-7100  
**Record ID:** 300017CP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 7  
Target Population: 1.3  
Expiration Date: 5/31/2018 IMS: No

**Program Name:** CORNERSTONE OF SOUTHERN CALIFORNIA 4  
Legal Name: RECOVERY HOMES OF AMERICA, INC.  
Address: 13671 ROSALIND STREET  
City, State Zip: TUSTIN, CA 92780-1831  
Phone: (714) 730-5399 Fax: (714) 710-7100  
**Record ID:** 300017DP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 8  
Target Population: 1.1  
Expiration Date: 5/31/2018 IMS: No

**Program Name:** CORNERSTONE OF SOUTHERN CALIFORNIA OUTPATIENT SERVICES  
Legal Name: RECOVERY HOMES OF AMERICA, INC.  
Address: 1950 EAST 17TH STREET, SUITE 150  
City, State Zip: SANTA ANA, CA 92705  
Phone: (714) 547-4300  
**Record ID:** 300017FP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 5/31/2018 IMS: No

**Program Name:** CORNERSTONE #2  
Legal Name: RECOVERY HOMES OF AMERICA, INC.  
Address: 13022 YORBA STREET  
City, State Zip: SANTA ANA, CA 92705  
Phone: (714) 730-5399 Fax: (714) 730-3505  
**Record ID:** 300017GP  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 7  
Target Population: 1.1  
Expiration Date: 7/31/2019 IMS: No

**Program Name:** CORNERSTONE RECOVERY HOME #5  
Legal Name: RECOVERY HOMES OF AMERICA, INC.  
Address: 2641 OLD GRAND  
City, State Zip: SANTA ANA, CA 92701  
Phone: (714) 730-5399 Fax: (714) 730-3505  
**Record ID:** 300017HP  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 8  
Target Population: 1.1  
Expiration Date: 7/31/2019 IMS: No

**Program Name:** CORNERSTONE RECOVERY HOME #6  
Legal Name: RECOVERY HOMES OF AMERICA, INC.  
Address: 13861 ESPLANADE AVENUE  
City, State Zip: SANTA ANA, CA 92705  
Phone: (714) 547-4300  
**Record ID:** 300017IP  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 7  
Target Population: 1.1  
Expiration Date: 7/31/2019 IMS: No

**Program Name:** CORNERSTONE RECOVERY HOME #9  
Legal Name: RECOVERY HOMES OF AMERICA, INC.  
Address: 2217 NORTH WRIGHT STREET  
City, State Zip: SANTA ANA, CA 92780  
Phone: (714) 730-5399 Fax: (714) 730-3505  
**Record ID:** 300017JP  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 8  
Target Population: 1.1  
Expiration Date: 7/31/2019 IMS: No

**Program Name:** CORNERSTONE RECOVERY HOME Y-11  
Legal Name: RECOVERY HOMES OF AMERICA, INC.  
Address: 880 S. YORBA STREET  
City, State Zip: ORANGE, CA 92869-5052  
Phone: (714) 730-5399 Fax: (714) 730-3505  
**Record ID:** 300017KP  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 10  
Target Population: 1.1  
Expiration Date: 3/31/2018 IMS: No

**Program Name:** CORNERSTONE RECOVERY HOME M-10  
Legal Name: RECOVERY HOMES OF AMERICA, INC.  
Address: 3310 E. MAPLE AVENUE  
City, State Zip: ORANGE, CA 92869  
Phone: (714) 730-5399  
**Record ID:** 300017LP  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 9  
Target Population: 1.1  
Expiration Date: 3/31/2018 IMS: No

**Program Name:** CORNERSTONE RECOVERY HOME - HOUSE 12  
Legal Name: RECOVERY HOMES OF AMERICA, INC.  
Address: 581 SOUTH PROSPECT STREET  
City, State Zip: ORANGE, CA 92869  
Phone: (714) 730-5399  
**Record ID:** 300017NP  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 7  
Target Population: 1.2  
Expiration Date: 3/31/2018 IMS: No

**Program Name:** CORNERSTONE OF SOUTHERN CALIFORNIA 8  
Legal Name: RECOVERY HOMES OF AMERICA, INC.  
Address: 13672 YORBA STREET  
City, State Zip: TUSTIN, CA 92780  
Phone: (714) 730-5399  
**Record ID:** 300017OP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 8  
Target Population: 1.1  
Expiration Date: 5/31/2018 IMS: No

**Program Name:** CORNERSTONE RECOVERY HOME #14  
Legal Name: RECOVERY HOMES OF AMERICA, INC.  
Address: 1612 EAST FRUIT STREET  
City, State Zip: SANTA ANA, CA 92701  
Phone: (714) 730-5399 Fax: (714) 730-3505  
**Record ID:** 300017PP  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 10  
Target Population: 1.1  
Expiration Date: 6/30/2019 IMS: No

**Program Name:** CORNERSTONE RECOVERY HOME 15  
Legal Name: RECOVERY HOMES OF AMERICA, INC.  
Address: 700 SOUTH YORBA STREET  
City, State Zip: ORANGE, CA 92869  
Phone: (714) 730-5399 Fax: (714) 730-3505  
**Record ID:** 300017SP  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 8  
Target Population: 1.1  
Expiration Date: 4/30/2018 IMS: No

**Program Name:** CORNERSTONE RECOVERY HOME 16  
Legal Name: RECOVERY HOMES OF AMERICA, INC.  
Address: 235 SOUTH PROSPECT  
City, State Zip: ORANGE, CA 92869  
Phone: (714) 730-5399 Fax: (714) 730-5399  
**Record ID:** 300017TP  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 8  
Target Population: 1.3  
Expiration Date: 8/31/2018 IMS: No

**Program Name:** CORNERSTONE RECOVERY HOME 17  
Legal Name: RECOVERY HOMES OF AMERICA, INC.  
Address: 225 SOUTH PROSPECT  
City, State Zip: ORANGE, CA 92869  
Phone: (714) 730-5399 Fax: (714) 730-3505  
**Record ID:** 300017UP  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 8  
Target Population: 1.1  
Expiration Date: 8/31/2018 IMS: No



**Program Name:** CORNERSTONE RECOVERY HOME #18  
Legal Name: RECOVERY HOMES OF AMERICA, INC.  
Address: 757 SOUTH YORBA STREET  
City, State Zip: ORANGE, CA 92869  
Phone: (714) 730-5399 Fax: (714) 730-3505  
**Record ID:** 300017VP  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 9  
Target Population: 1.1  
Expiration Date: 8/31/2019 IMS: No

**Program Name:** CORNERSTONE RECOVERY HOME #19  
Legal Name: RECOVERY HOMES OF AMERICA, INC.  
Address: 3735 EAST SPRING STREET  
City, State Zip: ORANGE, CA 92869  
Phone: (714) 730-5399 Fax: (714) 730-3505  
**Record ID:** 300017WP  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 8  
Target Population: 1.3  
Expiration Date: 9/30/2018 IMS: No

**Program Name:** CORNERSTONE RECOVERY HOME #20  
Legal Name: RECOVERY HOMES OF AMERICA, INC.  
Address: 249 SOUTH PROSPECT STREET  
City, State Zip: ORANGE, CA 92869  
Phone: (714) 730-5399  
**Record ID:** 300017XP  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 7  
Target Population: 1.1  
Expiration Date: 12/31/2017 IMS: No

**Program Name:** CORNERSTONE RECOVERY HOME #21  
Legal Name: RECOVERY HOMES OF AMERICA, INC.  
Address: 591 SOUTH PROSPECT STREET  
City, State Zip: ORANGE, CA 92869  
Phone: (714) 730-5399  
**Record ID:** 300017YP  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 7  
Target Population: 1.1  
Expiration Date: 12/31/2017 IMS: No

**Program Name:** ONE NORTH RECOVERY, LLC  
Legal Name: ONE NORTH RECOVERY, LLC  
Address: 34456 CALLE PORTOLA  
City, State Zip: CAPISTRANO BEACH, CA 92624-1054  
Phone: (949) 481-7014  
**Record ID:** 300018AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 6/30/2019 IMS: No

**Program Name:** COOPER FELLOWSHIP  
Legal Name: COOPER FELLOWSHIP, INC.  
Address: 401, 405, 409, 413, 417, AND 421 NORTH COOPER STREET  
City, State Zip: SANTA ANA, CA 92703  
Phone: (714) 554-1152 Fax: (714) 265-4870  
**Record ID:** 300029AN  
Service Type: RES  
Resident Capacity: 60  
Total Occupancy: 60  
Target Population: 1.1  
Expiration Date: 11/30/2017 IMS: No

**Program Name:** PHOENIX HOUSE ORANGE COUNTY, INC.  
Legal Name: PHOENIX HOUSE ORANGE COUNTY, INC.  
Address: 1207 EAST FRUIT STREET, BUILDINGS A, B2, B3, C, D, E & F  
City, State Zip: SANTA ANA, CA 92701  
Phone: (714) 953-9373  
**Record ID:** 300033AN  
Service Type: RES  
Resident Capacity: 130  
Total Occupancy: 130  
Target Population: 1.1  
Expiration Date: 8/31/2018 IMS: No

**Program Name:** PHOENIX HOUSE ORANGE COUNTY  
Legal Name: PHOENIX HOUSE ORANGE COUNTY, INC.  
Address: 1207 EAST FRUIT STREET, BUILDING B1  
City, State Zip: SANTA ANA, CA 92701  
Phone: (714) 953-9373  
**Record ID:** 300033CN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 9/30/2017 IMS: No

**Program Name:** HOPE HOUSE  
Legal Name: HOPE HOUSE CORPORATION  
Address: 710 AND 714 N ANAHEIM BOULEVARD  
City, State Zip: ANAHEIM, CA 92805  
Phone: (714) 776-7490 Fax: (714) 776-8650  
**Record ID:** 300034AN  
Service Type: RES  
Resident Capacity: 56  
Total Occupancy: 56  
Target Population: 1.1  
Expiration Date: 11/30/2017 IMS: No

**Program Name:** GERRY HOUSE  
Legal Name: STRAIGHT TALK CLINIC, INCORPORATED  
Address: 1225 AND 1227 WEST 6TH STREET  
City, State Zip: SANTA ANA, CA 92703  
Phone: (714) 972-1402  
**Record ID:** 300040AN  
Service Type: RES  
Resident Capacity: 12  
Total Occupancy: 12  
Target Population: 1.1  
Expiration Date: 9/30/2017 IMS: No

**Program Name:** WOODGLEN RECOVERY JUNCTION  
Legal Name: WOODGLEN RECOVERY JUNCTION INCORPORATED  
Address: 771 WEST ORANGETHORPE AVENUE  
City, State Zip: FULLERTON, CA 92832  
Phone: (714) 879-6916  
**Record ID:** 300042AN  
Service Type: RES  
Resident Capacity: 24  
Total Occupancy: 24  
Target Population: 1.1  
Expiration Date: 10/31/2017 IMS: No

**Program Name:** WOODGLEN RECOVERY JUNCTION  
Legal Name: WOODGLEN RECOVERY JUNCTION INCORPORATED  
Address: 751 WEST ORANGETHORPE AVENUE  
City, State Zip: FULLERTON, CA 92832  
Phone: (714) 879-2741 Fax: (714) 578-2960  
**Record ID:** 300042BN  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 2/28/2018 IMS: No

**Program Name:** DAYLIGHT AGAIN  
Legal Name: WOODGLEN RECOVERY JUNCTION INCORPORATED  
Address: 329 EAST COMMONWEALTH AVENUE  
City, State Zip: FULLERTON, CA 92832  
Phone: (714) 879-6916 Fax: (714) 578-2960  
**Record ID:** 300042CN  
Service Type: RES  
Resident Capacity: 16  
Total Occupancy: 16  
Target Population: 1.1  
Expiration Date: 1/31/2018 IMS: No

**Program Name:** WOODGLEN WEST DETOX  
Legal Name: WOODGLEN RECOVERY JUNCTION INCORPORATED  
Address: 1401 WEST ORANGETHORPE AVE.  
City, State Zip: FULLERTON, CA 92832  
Phone: (714) 612-6956 Fax: (714) 578-2960  
**Record ID:** 300042DN  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 6/30/2018 IMS: No

**Program Name:** SOBER LIVING BY THE SEA  
Legal Name: SOBER LIVING BY THE SEA, INC.  
Address: 4138 PATRICE ROAD  
City, State Zip: NEWPORT BEACH, CA 92663  
Phone: (949) 673-6696 Fax: (949) 723-2829  
**Record ID:** 300044ACP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 7  
Target Population: 1.1  
Expiration Date: 7/31/2018 IMS: No

**Program Name:** THE ROSE OF NEWPORT BEACH  
Legal Name: SOBER LIVING BY THE SEA, INC.  
Address: 6110 WEST OCEAN FRONT  
City, State Zip: NEWPORT BEACH, CA 92663  
Phone: (949) 673-6696 Fax: (949) 723-2829  
**Record ID:** 300044AFP  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 7  
Target Population: 1.3  
Expiration Date: 9/30/2017 IMS: No

**Program Name:** THE LANDING AT NEWPORT BEACH  
Legal Name: SOBER LIVING BY THE SEA, INC.  
Address: 4711 SEASHORE DRIVE  
City, State Zip: NEWPORT BEACH, CA 92663  
Phone: (949) 673-6696 Fax: (949) 723-2829  
**Record ID:** 300044AGP  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 7  
Target Population: 1.2  
Expiration Date: 9/30/2017 IMS: No

**Program Name:** THE ROSE OF NEWPORT BEACH  
Legal Name: SOBER LIVING BY THE SEA, INC.  
Address: 6111 SEASHORE DRIVE  
City, State Zip: NEWPORT BEACH, CA 92663  
Phone: (949) 673-6696 Fax: (949) 723-2829  
**Record ID:** 300044SP  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 7  
Target Population: 1.3  
Expiration Date: 7/31/2018 IMS: No

**Program Name:** HERITAGE HOUSE  
Legal Name: SOUTHERN CALIFORNIA ALCOHOL AND DRUG PROGRAMS, INC.  
Address: 2212 A-D & 2218 A-D PLACENTIA AVENUE  
City, State Zip: COSTA MESA, CA 92627  
Phone: (949) 646-2271  
**Record ID:** 300054AN  
Service Type: RES-DETOX  
Resident Capacity: 16  
Total Occupancy: 31  
Target Population: 1.4  
Expiration Date: 6/30/2018 IMS: No

**Program Name:** HERITAGE HOUSE NORTH  
Legal Name: SOUTHERN CALIFORNIA ALCOHOL AND DRUG PROGRAMS, INC.  
Address: 315, 319, AND 321 NORTH STATE COLLEGE BOULEVARD  
City, State Zip: ANAHEIM, CA 92806-2925  
Phone: (714) 687-0077 Fax: (714) 687-0691  
**Record ID:** 300054IN  
Service Type: RES  
Resident Capacity: 21  
Total Occupancy: 44  
Target Population: 1.4  
Expiration Date: 12/31/2018 IMS: No

**Program Name:** BREAKAWAY PROGRAM  
Legal Name: BREAKAWAY HEALTH CORPORATION  
Address: 3151 AIRWAY AVENUE, SUITE D-1  
City, State Zip: COSTA MESA, CA 92626  
Phone: (714) 847-7585 Fax: (714) 848-5410  
**Record ID:** 300065AP  
Service Type: NON  
Target Population: 1.5  
Expiration Date: 1/31/2018 IMS: No

**Program Name:** THE RECOVERY CENTER  
Legal Name: NANCY CLARK AND ASSOCIATES, INC.  
Address: 1110 VICTORIA STREET  
City, State Zip: COSTA MESA, CA 92627  
Phone: (949) 646-2340 Fax: (949) 631-4589  
**Record ID:** 300067AP  
Service Type: RES  
Resident Capacity: 38  
Total Occupancy: 41  
Target Population: 1.1  
Expiration Date: 2/28/2019 IMS: No

**Program Name:** RELAPSE PREVENTION OUTPATIENT PROGRAM  
Legal Name: NANCY CLARK AND ASSOCIATES, INC.  
Address: 471 OLD NEWPORT ROAD, SUITE 101  
City, State Zip: NEWPORT BEACH, CA 92663  
Phone: (949) 631-0550 Fax: (949) 631-4589  
**Record ID:** 300067BP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 1/31/2019 IMS: No

**Program Name:** TOUCHSTONES  
Legal Name: SOCIAL MODEL RECOVERY SYSTEMS, INC.  
Address: 525 NORTH PARKER  
City, State Zip: ORANGE, CA 92868  
Phone: (714) 639-5546  
**Record ID:** 300070AN  
Service Type: DSS  
Target Population: 1.1  
Expiration Date: 5/31/2018 IMS: No

**Program Name:** COVENANT HILLS TREATMENT CENTERS  
Legal Name: PACIFIC HILLS TREATMENT CENTERS, INC.  
Address: 217 AND 219 AVENIDA MONTEREY  
City, State Zip: SAN CLEMENTE, CA 92672  
Phone: (949) 248-5335 Fax: (949) 248-4275  
**Record ID:** 300074BP  
Service Type: RES  
Resident Capacity: 24  
Total Occupancy: 24  
Target Population: 1.1  
Expiration Date: 8/31/2019 IMS: No

**Program Name:** COVENANT HILLS TREATMENT CENTERS, INC.  
Legal Name: PACIFIC HILLS TREATMENT CENTERS, INC.  
Address: 34248 VIA SANTA ROSA, APARTMENTS A, B, AND C  
City, State Zip: CAPISTRANO BEACH, CA 92624  
Phone: (949) 489-8121 Fax: (949) 369-7261  
**Record ID:** 300074CP  
Service Type: RES  
Resident Capacity: 14  
Total Occupancy: 14  
Target Population: 1.3  
Expiration Date: 11/30/2018 IMS: No

**Program Name:** COVENANT HILLS TREATMENT CENTERS.  
Legal Name: PACIFIC HILLS TREATMENT CENTERS, INC.  
Address: 27442 CALLE ARROYO, SUITE B  
City, State Zip: SAN JUAN CAPISTRANO, CA 92675  
Phone: (949) 248-5335  
**Record ID:** 300074DP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 10/31/2017 IMS: No

**Program Name:** SPENCER RECOVERY CENTER  
Legal Name: SPENCER RECOVERY CENTERS, INC.  
Address: 1316 SOUTH COAST HIGHWAY  
City, State Zip: LAGUNA BEACH, CA 92651  
Phone: (949) 376-3705  
**Record ID:** 300088AP  
Service Type: RES  
Resident Capacity: 28  
Total Occupancy: 28  
Target Population: 1.1  
Expiration Date: 11/30/2017 IMS: No

**Program Name:** SPENCER RECOVERY CENTERS, INC.  
Legal Name: SPENCER RECOVERY CENTERS, INC.  
Address: 1337 GAVIOTA, UNIT B AND C  
City, State Zip: LAGUNA BEACH, CA 92651  
Phone: (949) 376-3705 Fax: (949) 376-6862  
**Record ID:** 300088JP  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 11/30/2018 IMS: No

**Program Name:** SPENCER RECOVERY CENTERS, INC.  
Legal Name: SPENCER RECOVERY CENTERS, INC.  
Address: 665 CAMINO DE LOS MARES, SUITE 104C  
City, State Zip: SAN CLEMENTE, CA 92673  
Phone: (949) 313-5224 Fax: (949) 313-5240  
**Record ID:** 300088LP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 4/30/2018 IMS: No

**Program Name:** CHAPMAN HOUSE  
Legal Name: CHAPMAN HOUSE, INC.  
Address: 1412 EAST CHAPMAN AVENUE  
City, State Zip: ORANGE, CA 92866  
Phone: (714) 288-9779 Fax: (714) 538-9779  
**Record ID:** 300105BP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 12/31/2017 IMS: No

**Program Name:** CHAPMAN HOUSE, INC.  
Legal Name: CHAPMAN HOUSE, INC.  
Address: 14511 - 14512 CARFAX DRIVE  
City, State Zip: TUSTIN, CA 92780  
Phone: (714) 288-9779 Fax: (714) 288-6130  
**Record ID:** 300105IP  
Service Type: RES-DETOX  
Resident Capacity: 44  
Total Occupancy: 44  
Target Population: 1.1  
Expiration Date: 10/31/2017 IMS: No

**Program Name:** COLLEGE COMMUNITY SERVICES/CALWORKS (CCS/CW)  
Legal Name: COLLEGE COMMUNITY SERVICES  
Address: 501 NORTH BROOKHURST STREET, SUITES 300B AND 320  
City, State Zip: ANAHEIM, CA 92801  
Phone: (714) 490-7711 Fax: (714) 490-7717  
**Record ID:** 300106BP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 1/31/2019 IMS: No

**Program Name:** COLLEGE COMMUNITY SERVICES/CALWORKS/CAMINO NUEVO  
Legal Name: COLLEGE COMMUNITY SERVICES  
Address: 1200 NORTH MAIN STREET, SUITE 630  
City, State Zip: SANTA ANA, CA 92701  
Phone: (714) 824-8150 Fax: (714) 824-8151  
**Record ID:** 300106CP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 5/31/2019 IMS: No

**Program Name:** KC SERVICES  
Legal Name: KOREAN COMMUNITY SERVICES, INC.  
Address: 14795 JEFFREY ROAD, SUITE 207  
City, State Zip: IRVINE, CA 92618  
Phone: (949) 654-9163  
**Record ID:** 300107CN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 8/31/2018 IMS: No

**Program Name:** KC SERVICES  
Legal Name: KOREAN COMMUNITY SERVICES, INC.  
Address: 1060 SOUTH BROOKHURST ROAD  
City, State Zip: FULLERTON, CA 92833  
Phone: (714) 449-1339 Fax: (714) 449-1289  
**Record ID:** 300107DN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 4/30/2019 IMS: No

**Program Name:** KC SERVICES  
Legal Name: KOREAN COMMUNITY SERVICES, INC.  
Address: 7281 GARDEN GROVE BOULEVARD, SUITE H  
City, State Zip: GARDEN GROVE, CA 92844  
Phone: (714) 539-4544  
**Record ID:** 300107EN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 8/31/2018 IMS: No

**Program Name:** ABLE TO CHANGE RECOVERY, INC.  
Legal Name: ABLE TO CHANGE RECOVERY, INC.  
Address: 28522 AVENIDA PLACIDA  
City, State Zip: SAN JUAN CAPISTRANO, CA 92675  
Phone: (949) 493-6800 Fax: (949) 493-6832  
**Record ID:** 300118AP  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 8  
Target Population: 1.1  
Expiration Date: 2/28/2019 IMS: No

**Program Name:** ABLE TO CHANGE RECOVERY, INC.  
Legal Name: ABLE TO CHANGE RECOVERY, INC.  
Address: 31501 RANCHO VIEJO ROAD, SUITE 101 & 103  
City, State Zip: SAN JUAN CAPISTRANO, CA 92675  
Phone: (949) 493-6800 Fax: (949) 493-6832  
**Record ID:** 300118BP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 1/31/2019 IMS: No

**Program Name:** ABLE TO CHANGE RECOVERY, INC.  
Legal Name: ABLE TO CHANGE RECOVERY, INC.  
Address: 23492 WHITE DOVE AVENUE  
City, State Zip: LAKE FOREST, CA 92630  
Phone: (949) 493-6800 Fax: (949) 493-6832  
**Record ID:** 300118CP  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 8  
Target Population: 1.1  
Expiration Date: 1/31/2018 IMS: No

**Program Name:** ABLE TO CHANGE RECOVERY, INC.  
Legal Name: ABLE TO CHANGE RECOVERY, INC.  
Address: 32732 CAMARON  
City, State Zip: DANA POINT, CA 92629  
Phone: (949) 493-6800 Fax: (949) 493-6832  
**Record ID:** 300118DP  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 8  
Target Population: 1.1  
Expiration Date: 1/31/2019 IMS: No

**Program Name:** ABLE TO CHANGE RECOVERY, INC.  
Legal Name: ABLE TO CHANGE RECOVERY, INC.  
Address: 30032 IMPERIAL DRIVE  
City, State Zip: SAN JUAN CAPISTRANO, CA 92675  
Phone: (949) 493-6800 Fax: (949) 493-6832  
**Record ID:** 300118EP  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 8  
Target Population: 1.1  
Expiration Date: 2/28/2019 IMS: No

**Program Name:** CENTER FOR THE TREATMENT OF ADDICTION, INC.  
Legal Name: THE CENTER FOR THE TREATMENT OF ADDICTION, INC.  
Address: 2701 EAST CHAPMAN AVENUE, SUITE 111  
City, State Zip: FULLERTON, CA 92831  
Phone: (760) 722-0672 Fax: (760) 722-3418  
**Record ID:** 300119HP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 3/31/2018 IMS: No

**Program Name:** NEW BEGINNING FELLOWSHIP CENTER  
Legal Name: THE NEW BEGINNING FELLOWSHIP CENTER  
Address: 16581 BROOKHURST  
City, State Zip: FOUNTAIN VALLEY, CA 92706  
Phone: (714) 839-2515 Fax: (714) 839-5501  
**Record ID:** 300120BN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 3/31/2019 IMS: No

**Program Name:** YELLOWSTONE, WROC  
Legal Name: YELLOWSTONE WOMEN'S FIRST STEP HOUSE, INC.  
Address: 3132 BOSTON WAY  
City, State Zip: COSTA MESA, CA 92626  
Phone: (888) 941-9048 Fax: (714) 646-5296  
**Record ID:** 300121AN  
Service Type: RES  
Resident Capacity: 15  
Total Occupancy: 15  
Target Population: 1.2  
Expiration Date: 3/31/2019 IMS: No

**Program Name:** YELLOWSTONE (WOMEN'S RECOVERY OF CALIFORNIA)  
Legal Name: YELLOWSTONE WOMEN'S FIRST STEP HOUSE, INC.  
Address: 154 & 160 EAST BAY STREET  
City, State Zip: COSTA MESA, CA 92627-2147  
Phone: (949) 646-5296 Fax: (888) 941-9048  
**Record ID:** 300121BN  
Service Type: RES-DETOX  
Resident Capacity: 12  
Total Occupancy: 14  
Target Population: 1.1  
Expiration Date: 5/31/2019 IMS: No

**Program Name:** THE YELLOWSTONE BRIDGE  
Legal Name: YELLOWSTONE WOMEN'S FIRST STEP HOUSE, INC.  
Address: 2028 FULLERTON AVENUE,  
UNITS A, B, AND C  
City, State Zip: COSTA MESA, CA 92627  
Phone: (949) 574-3008 Fax: (949) 646-5296  
**Record ID:** 300121FN  
Service Type: RES-DETOX  
Resident Capacity: 16  
Total Occupancy: 20  
Target Population: 1.2  
Expiration Date: 8/31/2017 IMS: No

**Program Name:** TWIN TOWN TREATMENT CENTERS - LOS ALAMITOS  
Legal Name: TWIN TOWN CORPORATION  
Address: 4388 EAST KATELLA AVENUE  
City, State Zip: LOS ALAMITOS, CA 90720  
Phone: (562) 594-8844 Fax: (562) 493-1280  
**Record ID:** 300128AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 2/28/2019 IMS: No

**Program Name:** TWIN TOWN TREATMENT CENTERS, ORANGE  
Legal Name: TWIN TOWN CORPORATION  
Address: 705 WEST LA VETA AVENUE, SUITE 208  
City, State Zip: ORANGE, CA 92868  
Phone: (714) 532-9295 Fax: (562) 493-1280  
**Record ID:** 300128CP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 6/30/2019 IMS: No



**Program Name:** TWIN TOWN TREATMENT CENTERS, MISSION VIEJO  
Legal Name: TWIN TOWN CORPORATION  
Address: 27281 LAS RAMBLAS STREET, SUITE 140  
City, State Zip: MISSION VIEJO, CA 92691  
Phone: (949) 540-0170 Fax: (562) 493-1280  
**Record ID:** 300128DP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 6/30/2019 IMS: No

**Program Name:** BODY MIND SPIRIT IOP  
Legal Name: WILLIAM W. MARTIN, PH.D, LICENSED CLINICAL PSYCHOLOGIST,  
A PROFESSIONAL COROPORATION  
Address: 665 CAMINO DE LOS MARES, SUITE 104  
City, State Zip: SAN CLEMENTE, CA 92673  
Phone: (949) 248-7377 Fax: (866) 805-2796  
**Record ID:** 300135AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 5/31/2018 IMS: No

**Program Name:** PAT MOORE FOUNDATION  
Legal Name: THE PAT MOORE FOUNDATION  
Address: 1918 WEST HALL AVENUE  
City, State Zip: SANTA ANA, CA 92704  
Phone: (714) 546-2200 Fax: (949) 209-1980  
**Record ID:** 300136MN  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.2  
Expiration Date: 10/31/2017 IMS: No

**Program Name:** PAT MOORE FOUNDATION  
Legal Name: THE PAT MOORE FOUNDATION  
Address: 2614 WEST COLOMBINE STREET,  
UNIT A  
City, State Zip: SANTA ANA, CA 92704  
Phone: (714) 546-2200 Fax: (949) 209-1980  
**Record ID:** 300136NN  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 11/30/2018 IMS: No

**Program Name:** PAT MOORE FOUNDATION  
Legal Name: THE PAT MOORE FOUNDATION  
Address: 2614 WEST COLOMBINE STREET,  
UNIT B  
City, State Zip: SANTA ANA, CA 92704  
Phone: (714) 546-2200 Fax: (949) 209-1980  
**Record ID:** 300136ON  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 11/30/2018 IMS: No

**Program Name:** PAT MOORE FOUNDATION  
Legal Name: THE PAT MOORE FOUNDATION  
Address: 2105 W. ADAMS STREET  
City, State Zip: SANTA ANA, CA 92704  
Phone: (714) 546-2200 Fax: (949) 209-1980  
**Record ID:** 300136RN  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 12/31/2018 IMS: No

**Program Name:** SOLUTIONS FOR RECOVERY  
Legal Name: SOLUTIONS FOR RECOVERY, INC.  
Address: 31931 PASEO TERRAZA  
City, State Zip: SAN JUAN CAPISTRANO, CA 92675  
Phone: (949) 874-1332 Fax: (949) 661-1264  
**Record ID:** 300143BP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 8  
Target Population: 1.1  
Expiration Date: 2/28/2018 IMS: No

**Program Name:** SOLUTIONS BY THE SEA  
Legal Name: OCEAN RECOVERY LLC  
Address: 1601 WEST BALBOA BOULEVARD  
City, State Zip: NEWPORT BEACH, CA 92663  
Phone: (949) 723-2388  
**Record ID:** 300144AP  
Service Type: RES  
Resident Capacity: 16  
Total Occupancy: 16  
Target Population: 1.3  
Expiration Date: 12/31/2018 IMS: No

**Program Name:** OCEAN RECOVERY 1115  
Legal Name: OCEAN RECOVERY, L.L.C.  
Address: 1115 WEST BALBOA BOULEVARD  
City, State Zip: NEWPORT BEACH, CA 92661  
Phone: (949) 675-3764 Fax: (949) 723-1288  
**Record ID:** 300144BP  
Service Type: RES  
Resident Capacity: 22  
Total Occupancy: 22  
Target Population: 1.2  
Expiration Date: 12/31/2018 IMS: No

**Program Name:** HOPE BY THE SEA, INC.  
Legal Name: HOPE BY THE SEA, INC.  
Address: 28371 VIA ANZAR  
City, State Zip: SAN JUAN CAPISTRANO, CA 92675  
Phone: (949) 218-2690 Fax: (949) 218-1957  
**Record ID:** 300149AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 8  
Target Population: 1.1  
Expiration Date: 8/31/2019 IMS: No

**Program Name:** HOPE BY THE SEA, INC.  
Legal Name: HOPE BY THE SEA, INC.  
Address: 33171 PASEO CERVEZA  
City, State Zip: SAN JUAN CAPISTRANO, CA 92675  
Phone: (949) 218-2690 Fax: (949) 218-1597  
**Record ID:** 300149BP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 5/31/2019 IMS: No

**Program Name:** HOPE BY THE SEA  
Legal Name: HOPE BY THE SEA, INC.  
Address: 31907 (B) DEL OBISPO  
City, State Zip: SAN JUAN CAPISTRANO, CA 92675  
Phone: (949) 276-2691  
**Record ID:** 300149CP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 2/28/2018 IMS: No

**Program Name:** HOPE BY THE SEA  
Legal Name: HOPE BY THE SEA, INC.  
Address: 31907 (A) DEL OBISPO  
City, State Zip: SAN JUAN CAPISTRANO, CA 92675  
Phone: (949) 276-7518  
**Record ID:** 300149DP  
Service Type: RES-DETOX  
Resident Capacity: 5  
Total Occupancy: 5  
Target Population: 1.1  
Expiration Date: 2/28/2018 IMS: No

**Program Name:** SEACLIFF RECOVERY CENTER  
Legal Name: RIGHT NOW RECOVERY, LLC  
Address: 18682 BEACH BOULEVARD, SUITE 255  
City, State Zip: HUNTINGTON BEACH, CA 92648  
Phone: (714) 960-0078  
**Record ID:** 300152BP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 3/31/2019 IMS: No

**Program Name:** SAFE HARBOR TREATMENT CENTER FOR WOMEN, INC.  
Legal Name: SAFE HARBOR RECOVERY CENTERS INC.  
Address: 240 KNOX STREET  
City, State Zip: COSTA MESA, CA 92627  
Phone: (949) 645-1026 Fax: (949) 645-1026  
**Record ID:** 300154AP  
Service Type: RES  
Resident Capacity: 8  
Total Occupancy: 8  
Target Population: 1.1  
Expiration Date: 11/30/2017 IMS: No

**Program Name:** SAFE HARBOR TREATMENT CENTER FOR WOMEN, INC.  
Legal Name: SAFE HARBOR RECOVERY CENTERS INC.  
Address: 236 KNOX STREET  
City, State Zip: COSTA MESA, CA 92627  
Phone: (949) 645-1026 Fax: (949) 645-1026  
**Record ID:** 300154BP  
Service Type: RES  
Resident Capacity: 8  
Total Occupancy: 8  
Target Population: 1.3  
Expiration Date: 2/28/2018 IMS: No

**Program Name:** SAFE HARBOR TREATMENT CENTER FOR WOMEN, INC., 3  
Legal Name: SAFE HARBOR RECOVERY CENTERS INC.  
Address: 930 MAGELLAN STREET  
City, State Zip: COSTA MESA, CA 92626  
Phone: (949) 645-1026 Fax: (714) 242-6775  
**Record ID:** 300154CP  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.3  
Expiration Date: 10/31/2018 IMS: No

**Program Name:** SAFE HARBOR TREATMENT CENTER FOR WOMEN, INC.  
Legal Name: SAFE HARBOR RECOVERY CENTERS INC.  
Address: 934 MAGELLAN STREET  
City, State Zip: COSTA MESA, CA 92626  
Phone: (949) 645-1026 Fax: (714) 242-6775  
**Record ID:** 300154DP  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.3  
Expiration Date: 8/31/2017 IMS: No

**Program Name:** SAFE HARBOR'S CHERISH DETOX  
Legal Name: SAFE HARBOR RECOVERY CENTERS INC.  
Address: 22372 HARWICH LANE  
City, State Zip: HUNTINGTON BEACH, CA 92646  
Phone: (714) 785-2079  
**Record ID:** 300154FP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.3  
Expiration Date: 10/31/2018 IMS: No

**Program Name:** SAFE HARBOR CONNECTIONS  
Legal Name: SAFE HARBOR RECOVERY CENTERS INC.  
Address: 679 GOVERNOR STREET  
City, State Zip: COSTA MESA, CA 92627  
Phone: (714) 785-2079 Fax: (714) 242-6775  
**Record ID:** 300154GP  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.3  
Expiration Date: 7/31/2019 IMS: No

**Program Name:** SAFE HARBOR CONNECTIONS  
Legal Name: SAFE HARBOR RECOVERY CENTERS INC.  
Address: 687 GOVERNOR STREET  
City, State Zip: COSTA MESA, CA 92627  
Phone: (714) 785-2079 Fax: (714) 242-6775  
**Record ID:** 300154HP  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.3  
Expiration Date: 7/31/2019 IMS: No

**Program Name:** SAFE HARBOR CONNECTIONS  
Legal Name: SAFE HARBOR RECOVERY CENTERS INC.  
Address: 671 GOVERNOR STREET  
City, State Zip: COSTA MESA, CA 92627  
Phone: (714) 785-2079 Fax: (714) 242-6775  
**Record ID:** 300154IP  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.3  
Expiration Date: 7/31/2019 IMS: No

**Program Name:** SAFE HARBOR CONNECTIONS  
Legal Name: SAFE HARBOR RECOVERY CENTERS INC.  
Address: 675 GOVERNOR STREET  
City, State Zip: COSTA MESA, CA 92627  
Phone: (714) 785-2079 Fax: (714) 242-6775  
**Record ID:** 300154JP  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.3  
Expiration Date: 7/31/2019 IMS: No

**Program Name:** WEL-MOR PSYCHOLOGY GROUP, INC.  
Legal Name: WEL-MOR PSYCHOLOGY GROUP, INC.  
Address: 2900 BRISTOL STREET, SUITE E 103  
City, State Zip: COSTA MESA, CA 92626  
Phone: (714) 540-9070 Fax: (714) 549-4525  
**Record ID:** 300162AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 10/31/2018 IMS: No

**Program Name:** WEL-MOR PSYCHOLOGY GROUP, INC.  
Legal Name: WEL-MOR PSYCHOLOGY GROUP, INC.  
Address: 5130 EAST LA PALMA, SUITE 212  
City, State Zip: ANAHEIM, CA 92807  
Phone: (714) 540-9070 Fax: (714) 549-4525  
**Record ID:** 300162BP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 10/31/2018 IMS: No

**Program Name:** WEL-MOR PSYCHOLOGY GROUP, INC.  
Legal Name: WEL-MOR PSYCHOLOGY GROUP, INC.  
Address: 25401 CABOT ROAD, SUITE 114  
City, State Zip: LAGUNA HILLS, CA 92653  
Phone: (714) 540-9070 Fax: (714) 549-4525  
**Record ID:** 300162CP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 10/31/2018 IMS: No

**Program Name:** WEL-MOR PSYCHOLOGY GROUP, INC.  
Legal Name: WEL-MOR PSYCHOLOGY GROUP, INC.  
Address: 1440 NORTH HARBOR BOULEVARD, SUITE 725  
City, State Zip: FULLERTON, CA 92835  
Phone: (714) 540-9070 Fax: (714) 549-4525  
**Record ID:** 300162DP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 4/30/2018 IMS: No

**Program Name:** ORANGE COUNTY BAR FOUNDATION STOP SHORT OF ADDICTION  
Legal Name: ORANGE COUNTY BAR FOUNDATION, INC.  
Address: 313 NORTH BIRCH, 2ND FLOOR  
City, State Zip: SANTA ANA, CA 92701  
Phone: (714) 480-1925 Fax: (714) 480-1933  
**Record ID:** 300164AN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 2/28/2019 IMS: No

**Program Name:** BALBOA HORIZONS RECOVERY SERVICES  
Legal Name: BALBOA HORIZONS RECOVERY SERVICES  
Address: 1132 WEST BALBOA BOULEVARD  
City, State Zip: NEWPORT BEACH, CA 92661  
Phone: (949) 675-3406 Fax: (949) 722-8125  
**Record ID:** 300165AP  
Service Type: RES  
Resident Capacity: 11  
Total Occupancy: 11  
Target Population: 1.3  
Expiration Date: 5/31/2019 IMS: No

**Program Name:** BALBOA HORIZONS RECOVERY SERVICES  
Legal Name: BALBOA HORIZONS RECOVERY SERVICES  
Address: 2384 NEWPORT BOULEVARD  
City, State Zip: COSTA MESA, CA 92627  
Phone: (949) 675-3406 Fax: (949) 675-3916  
**Record ID:** 300165BP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 3/31/2018 IMS: No

**Program Name:** BALBOA HORIZONS RECOVERY SERVICES  
Legal Name: BALBOA HORIZONS RECOVERY SERVICES  
Address: 129 CABRILLO STREET  
City, State Zip: COSTA MESA, CA 92627-3053  
Phone: (949) 515-4140 Fax: (949) 515-4150  
**Record ID:** 300165EP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 4/30/2019 IMS: No

**Program Name:** BALBOA HORIZONS RECOVERY SERVICES  
Legal Name: BALBOA HORIZONS RECOVERY SERVICES  
Address: 198 TULIP LANE,  
UNITS C & D  
City, State Zip: COSTA MESA, CA 92627  
Phone: (949) 791-2423  
**Record ID:** 300165GP  
Service Type: RES  
Resident Capacity: 4  
Total Occupancy: 4  
Target Population: 1.1  
Expiration Date: 7/31/2018 IMS: No

**Program Name:** BALBOA HORIZONS RECOVERY SERVICES  
Legal Name: BALBOA HORIZONS RECOVERY SERVICES  
Address: 192 TULIP LANE,  
UNIT C  
City, State Zip: COSTA MESA, CA 92627  
Phone: (949) 764-9145  
**Record ID:** 300165HP  
Service Type: RES  
Resident Capacity: 4  
Total Occupancy: 4  
Target Population: 1.1  
Expiration Date: 7/31/2018 IMS: No

**Program Name:** BALBOA HORIZONS RECOVERY SERVICES  
Legal Name: BALBOA HORIZONS RECOVERY SERVICES  
Address: 192 TULIP LANE,  
UNIT D  
City, State Zip: COSTA MESA, CA 92627  
Phone: (949) 764-9153  
**Record ID:** 300165IP  
Service Type: RES  
Resident Capacity: 4  
Total Occupancy: 4  
Target Population: 1.1  
Expiration Date: 7/31/2018 IMS: No

**Program Name:** BALBOA HORIZONS RECOVERY SERVICES  
Legal Name: BALBOA HORIZONS RECOVERY SERVICES  
Address: 2868 ROYAL PALM DRIVE,  
UNITS A & B  
City, State Zip: COSTA MESA, CA 92626  
Phone: (714) 258-7865  
**Record ID:** 300165JP  
Service Type: RES-DETOX  
Resident Capacity: 4  
Total Occupancy: 4  
Target Population: 1.1  
Expiration Date: 9/30/2019 IMS: No

**Program Name:** BALBOA HORIZONS RECOVERY SERVICES  
Legal Name: BALBOA HORIZONS RECOVERY SERVICES  
Address: 2868 ROYAL PALM DRIVE,  
UNIT C  
City, State Zip: COSTA MESA, CA 92626  
Phone: (714) 556-1529  
**Record ID:** 300165KP  
Service Type: RES-DETOX  
Resident Capacity: 4  
Total Occupancy: 4  
Target Population: 1.1  
Expiration Date: 9/30/2019 IMS: No

**Program Name:** BALBOA HORIZONS RECOVERY SERVICES  
Legal Name: BALBOA HORIZONS RECOVERY SERVICES  
Address: 192 TULIP LANE,  
UNIT B  
City, State Zip: COSTA MESA, CA 92627  
Phone: (949) 764-9152  
**Record ID:** 300165LP  
Service Type: RES  
Resident Capacity: 4  
Total Occupancy: 4  
Target Population: 1.1  
Expiration Date: 7/31/2018 IMS: No

**Program Name:** BALBOA HORIZONS RECOVERY SERVICES  
Legal Name: BALBOA HORIZONS RECOVERY SERVICES  
Address: 192 TULIP LANE  
UNIT A  
City, State Zip: COSTA MESA , CA 92627  
Phone: (949) 764-9140  
**Record ID:** 300165MP  
Service Type: RES  
Resident Capacity: 4  
Total Occupancy: 4  
Target Population: 1.1  
Expiration Date: 7/31/2018 IMS: No

**Program Name:** BALBOA HORIZONS RECOVERY SERVICES  
Legal Name: BALBOA HORIZONS RECOVERY SERVICES  
Address: 198 TULIP LANE  
A-B  
City, State Zip: COSTA MESA, CA 92627  
Phone: (949) 764-9163  
**Record ID:** 300165NP  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 7/31/2018 IMS: No

**Program Name:** BALBOA HORIZONS RECOVERY SERVICES  
Legal Name: BALBOA HORIZONS RECOVERY SERVICES  
Address: 2864 ROYAL PALM DRIVE,  
UNIT C  
City, State Zip: COSTA MESA, CA 92626  
Phone: (714) 556-1502  
**Record ID:** 300165OP  
Service Type: RES-DETOX  
Resident Capacity: 4  
Total Occupancy: 4  
Target Population: 1.1  
Expiration Date: 9/30/2019 IMS: No

**Program Name:** BALBOA HORIZONS RECOVERY SERVICES  
Legal Name: BALBOA HORIZONS RECOVERY SERVICES  
Address: 2864 ROYAL PALM DRIVE,  
UNIT B  
City, State Zip: COSTA MESA , CA 92626  
Phone: (714) 546-4796  
**Record ID:** 300165PP  
Service Type: RES-DETOX  
Resident Capacity: 4  
Total Occupancy: 4  
Target Population: 1.1  
Expiration Date: 9/30/2019 IMS: No

**Program Name:** BALBOA HORIZONS RECOVERY SERVICES  
Legal Name: BALBOA HORIZONS RECOVERY SERVICES  
Address: 2864 ROYAL PALM DRIVE,  
UNIT A  
City, State Zip: COSTA MESA, CA 92626  
Phone: (949) 437-1737  
**Record ID:** 300165QP  
Service Type: RES-DETOX  
Resident Capacity: 4  
Total Occupancy: 4  
Target Population: 1.1  
Expiration Date: 9/30/2019 IMS: No

**Program Name:** BALBOA HORIZONS RECOVERY SERVICES  
Legal Name: BALBOA HORIZONS RECOVERY SERVICES  
Address: 2868 ROYAL PALM DRIVE,  
UNIT D  
City, State Zip: COSTA MESA, CA 92626  
Phone: (714) 556-1530  
**Record ID:** 300165RP  
Service Type: RES-DETOX  
Resident Capacity: 4  
Total Occupancy: 4  
Target Population: 1.1  
Expiration Date: 9/30/2019 IMS: No

**Program Name:** BALBOA HORIZONS RECOVERY SERVICES  
Legal Name: BALBOA HORIZONS RECOVERY SERVICES  
Address: 2864 ROYAL PALM DRIVE,  
UNIT D  
City, State Zip: COSTA MESA, CA 92626  
Phone: (714) 556-1519  
**Record ID:** 300165SP  
Service Type: RES-DETOX  
Resident Capacity: 4  
Total Occupancy: 4  
Target Population: 1.1  
Expiration Date: 9/30/2019 IMS: No

**Program Name:** BALBOA HORIZONS RECOVERY SERVICES  
Legal Name: BALBOA HORIZONS RECOVERY SERVICES  
Address: 2379 ORANGE AVENUE,  
UNITS B & C  
City, State Zip: COSTA MESA , CA 92627  
Phone: (949) 791-8436  
**Record ID:** 300165TP  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 9/30/2018 IMS: No

**Program Name:** BALBOA HORIZONS RECOVERY SERVICES  
Legal Name: BALBOA HORIZONS RECOVERY SERVICES  
Address: 2379 ORANGE AVENUE,  
UNIT A  
City, State Zip: COSTA MESA, CA 92627  
Phone: (949) 764-9139  
**Record ID:** 300165UP  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 9/30/2018 IMS: No



**Program Name:** BALBOA HORIZONS RECOVERY SERVICES  
Legal Name: BALBOA HORIZONS RECOVERY SERVICES  
Address: 18943 SAN FELIPE STREET  
City, State Zip: FOUNTAIN VALLEY, CA 92708  
Phone: (714) 458-8334  
**Record ID:** 300165VP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 6/30/2018 IMS: Yes

**Program Name:** MORNINGSIDE RECOVERY  
Legal Name: MORNINGSIDE RECOVERY, LLC  
Address: 1400 REYNOLDS AVENUE, SUITES 100,125,150, &175  
City, State Zip: IRVINE, CA 92614  
Phone: (949) 675-0006 Fax: (949) 675-0007  
**Record ID:** 300168IP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 3/31/2018 IMS: No

**Program Name:** MORNINGSIDE RECOVERY, LLC  
Legal Name: MORNINGSIDE RECOVERY, LLC  
Address: 9842 13TH STREET  
City, State Zip: GARDEN GROVE, CA 92844  
Phone: (949) 675-0006 Fax: (949) 675-0007  
**Record ID:** 300168JP  
Service Type: RES-DETOX  
Resident Capacity: 87  
Total Occupancy: 87  
Target Population: 1.1  
Expiration Date: 6/30/2019 IMS: Yes

**Program Name:** CAPO BY THE SEA  
Legal Name: CAPO BY THE SEA, INC.  
Address: 26682 AVENIDA LAS PALMAS  
City, State Zip: CAPISTRANO BEACH, CA 92624  
Phone: (949) 874-1332 Fax: (949) 276-0045  
**Record ID:** 300173AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 7  
Target Population: 1.1  
Expiration Date: 10/31/2019 IMS: No

**Program Name:** CAPO BY THE SEA  
Legal Name: CAPO BY THE SEA, INC.  
Address: 27130 B-PASEO ESPADA, SUITE 521 & 522  
City, State Zip: SAN JUAN CAPISTRANO, CA 92675  
Phone: (949) 874-1332  
**Record ID:** 300173CP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 2/28/2019 IMS: No

**Program Name:** MIRAMAR RECOVERY  
Legal Name: MIRAMAR HEALTH, INC.  
Address: 339 JASMINE STREET  
City, State Zip: LAGUNA BEACH, CA 92651  
Phone: (949) 370-0771 Fax: (949) 554-1285  
**Record ID:** 300182AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 1/31/2018 IMS: No

**Program Name:** DAHLIA HOUSE  
Legal Name: MIRAMAR HEALTH, INC.  
Address: 435 DAHLIA AVENUE  
City, State Zip: NEWPORT BEACH, CA 92625  
Phone: (949) 497-9189 Fax: (949) 554-1285  
**Record ID:** 300182BP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 5/31/2018 IMS: No

**Program Name:** CARNATION HOUSE  
Legal Name: MIRAMAR HEALTH, INC.  
Address: 435-1/2 DAHLIA AVENUE  
City, State Zip: NEWPORT BEACH, CA 92625  
Phone: (949) 370-0771 Fax: (949) 554-1285  
**Record ID:** 300182CP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 5/31/2018 IMS: No

**Program Name:** MIRAMAR HEALTH OUTPATIENT SERVICES  
Legal Name: MIRAMAR HEALTH, INC.  
Address: 2165 HARBOR BLVD.  
City, State Zip: COSTA MESA, CA 92627  
Phone: (949) 370-0771  
**Record ID:** 300182DP  
Service Type: NON  
Target Population: 1.7  
Expiration Date: 11/30/2018 IMS: No

**Program Name:** ALTERNATIVE OPTIONS  
Legal Name: ALTERNATIVE OPTIONS COUNSELING CENTER, INC.  
Address: 101 SOUTH KRAEMER BOULEVARD, SUITE 110  
City, State Zip: PLACENTIA, CA 92870  
Phone: (877) 538-4133 Fax: (562) 921-5703  
**Record ID:** 300186AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 5/31/2018 IMS: No

**Program Name:** HEALTHCARE SERVICES, INC., THE LIGHTHOUSE  
Legal Name: HEALTHCARE SERVICES, INC.  
Address: 1320 WEST PEARL STREET  
UNITS A,B,C & D  
City, State Zip: ANAHEIM, CA 92801  
Phone: (714) 384-3970 Fax: (714) 384-3876  
**Record ID:** 300188AP  
Service Type: RES-DETOX  
Resident Capacity: 16  
Total Occupancy: 16  
Target Population: 1.1  
Expiration Date: 5/31/2018 IMS: No

**Program Name:** HEALTHCARE SERVICES  
Legal Name: HEALTHCARE SERVICES, INC.  
Address: 1340 PEARL STREET  
City, State Zip: ANAHEIM, CA 92801  
Phone: (714) 871-9841 Fax: (714) 384-3876  
**Record ID:** 300188CP  
Service Type: RES-DETOX  
Resident Capacity: 21  
Total Occupancy: 21  
Target Population: 1.1  
Expiration Date: 5/31/2018 IMS: No

**Program Name:** ANAHEIM LIGHTHOUSE  
Legal Name: HEALTHCARE SERVICES, INC.  
Address: 1330 WEST PEARL, UNIT A, B, C, D  
City, State Zip: ANAHEIM, CA 92801  
Phone: (714) 780-1174 Fax: (714) 784-1124  
**Record ID:** 300188EP  
Service Type: RES-DETOX  
Resident Capacity: 20  
Total Occupancy: 20  
Target Population: 1.1  
Expiration Date: 5/31/2019 IMS: No

**Program Name:** NEW LIFE SPIRIT RECOVERY INC.  
Legal Name: NEW LIFE SPIRIT RECOVERY INC.  
Address: 18652 FLORIDA STREET, SUITE 200  
City, State Zip: HUNTINGTON BEACH, CA 92648  
Phone: (714) 841-1906 Fax: (714) 908-3308  
**Record ID:** 300190AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 9/30/2018 IMS: No

**Program Name:** DOMUS RETREAT  
Legal Name: DOMUS RETREAT LLC  
Address: 270 SOUTH ORANGE ACRES DRIVE  
City, State Zip: ANAHEIM HILLS, CA 92807  
Phone: (310) 205-0808  
**Record ID:** 300203AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 2/28/2018 IMS: No

**Program Name:** ADELANTE RECOVERY CENTER, INC.  
Legal Name: ADELANTE RECOVERY CENTER, INC.  
Address: 49 MONTECITO DRIVE  
City, State Zip: CORONA DEL MAR, CA 92625  
Phone: (949) 887-4448 Fax: (949) 706-9769  
**Record ID:** 300206AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 2/28/2018 IMS: No

**Program Name:** NORTHBOUND TREATMENT SERVICES  
Legal Name: NATIONAL THERAPEUTIC SERVICES, INC.  
Address: 209 AND 211 EAST 18TH STREET  
City, State Zip: COSTA MESA, CA 92627  
Phone: (714) 650-4334  
**Record ID:** 300207AP  
Service Type: RES-DETOX  
Resident Capacity: 12  
Total Occupancy: 12  
Target Population: 1.1  
Expiration Date: 10/31/2018 IMS: No

**Program Name:** NORTHBOUND TREATMENT SERVICES  
Legal Name: NATIONAL THERAPEUTIC SERVICES, INC.  
Address: 1040 WEST 17TH STREET  
City, State Zip: COSTA MESA, CA 92627  
Phone: (714) 650-4334  
**Record ID:** 300207BP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 10/31/2018 IMS: No

**Program Name:** NORTHBOUND TREATMENT SERVICES  
Legal Name: NATIONAL THERAPEUTIC SERVICES, INC.  
Address: 354 BROADWAY  
City, State Zip: COSTA MESA, CA 92627  
Phone: (949) 650-4334 Fax: (949) 650-5171  
**Record ID:** 300207CP  
Service Type: RES  
Resident Capacity: 4  
Total Occupancy: 4  
Target Population: 1.2  
Expiration Date: 5/31/2019 IMS: No

**Program Name:** NORTHBOUND TREATMENT SERVICES  
Legal Name: NATIONAL THERAPEUTIC SERVICES, INC.  
Address: 2417 ORANGE AVENUE, UNITS 101A, 101B, 101C, 102A, 201B & 201C  
City, State Zip: COSTA MESA, CA 92627  
Phone: (949) 650-4334 Fax: (949) 269-9239  
**Record ID:** 300207FP  
Service Type: RES  
Resident Capacity: 21  
Total Occupancy: 22  
Target Population: 1.1  
Expiration Date: 6/30/2018 IMS: No

**Program Name:** NORTHBOUND TREATMENT SERVICES  
Legal Name: NATIONAL THERAPEUTIC SERVICES, INC.  
Address: 235 EAST 18TH STREET, UNITS A, B, C AND 241 EAST 18TH STREET, UNITS A, B, C  
City, State Zip: COSTA MESA, CA 92627  
Phone: (949) 650-4334 Fax: (949) 650-5171  
**Record ID:** 300207GP  
Service Type: RES  
Resident Capacity: 23  
Total Occupancy: 24  
Target Population: 1.1  
Expiration Date: 10/31/2018 IMS: No

**Program Name:** NORTHBOUND TREATMENT SERVICES  
Legal Name: NATIONAL THERAPEUTIC SERVICES, INC.  
Address: 175 VIRGINIA PLACE  
City, State Zip: COSTA MESA, CA 92627  
Phone: (949) 650-4334 Fax: (949) 650-5171  
**Record ID:** 300207HP  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 2/28/2018 IMS: No

**Program Name:** NORTHBOUND TREATMENT SERVICES  
Legal Name: NATIONAL THERAPEUTIC SERVICES, INC.  
Address: 171 ROCHESTER, UNITS A & B  
175 ROCHESTER, UNITS A & B  
City, State Zip: COSTA MESA, CA 92627  
Phone: (949) 650-4334 Fax: (949) 650-5171  
**Record ID:** 300207IP  
Service Type: RES  
Resident Capacity: 20  
Total Occupancy: 20  
Target Population: 1.1  
Expiration Date: 2/28/2018 IMS: No

**Program Name:** NORTHBOUND TREATMENT SERVICES  
Legal Name: NATIONAL THERAPEUTIC SERVICES, INC.  
Address: 125 & 131 E. WILSON STREET, UNITS 1, 2, 3  
City, State Zip: COSTA MESA, CA 92627  
Phone: (949) 650-4334  
**Record ID:** 300207KP  
Service Type: RES  
Resident Capacity: 26  
Total Occupancy: 26  
Target Population: 1.1  
Expiration Date: 3/31/2019 IMS: No

**Program Name:** NORTHBOUND TREATMENT SERVICES  
Legal Name: NATIONAL THERAPEUTIC SERVICES, INC.  
Address: 1545 NEWPORT BOULEVARD  
City, State Zip: COSTA MESA, CA 92627  
Phone: (949) 650-4334 Fax: (949) 548-4718  
**Record ID:** 300207LP  
Service Type: NON  
Target Population: 1.8  
Expiration Date: 3/31/2019 IMS: No

**Program Name:** OCEAN HILLS RECOVERY, INC.  
Legal Name: OCEAN HILLS RECOVERY, INC.  
Address: 33242 CHRISTINA DRIVE  
City, State Zip: DANA POINT, CA 92629  
Phone: (949) 496-3794 Fax: (949) 388-8407  
**Record ID:** 300208AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 3/31/2019 IMS: No

**Program Name:** OCEAN HILLS RECOVERY, INC.  
Legal Name: OCEAN HILLS RECOVERY, INC.  
Address: 33402 PALO ALTO STREET  
City, State Zip: DANA POINT, CA 92629  
Phone: (949) 542-8840 Fax: (949) 388-4625  
**Record ID:** 300208BP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 8/31/2019 IMS: No

**Program Name:** OCEAN HILLS RECOVERY, INC.  
Legal Name: OCEAN HILLS RECOVERY, INC.  
Address: 34062 AMBER LANTERN  
City, State Zip: DANA POINT, CA 92629  
Phone: (949) 524-8840 Fax: (949) 218-6157  
**Record ID:** 300208CP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 7/31/2018 IMS: No

**Program Name:** OCEAN HILLS RECOVERY, INC.  
Legal Name: OCEAN HILLS RECOVERY, INC.  
Address: 33701 BIG SUR  
City, State Zip: DANA POINT, CA 92629  
Phone: (949) 429-6076  
**Record ID:** 300208DP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 8/31/2018 IMS: No

**Program Name:** 21ST CENTURY WELLNESS, INC.  
Legal Name: 21ST CENTURY WELLNESS, INC.  
Address: 23792 ROCKFIELD BOULEVARD, SUITE 100  
City, State Zip: LAKE FOREST, CA 92630  
Phone: (949) 900-8260 Fax: (949) 900-8268  
**Record ID:** 300211AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 3/31/2019 IMS: No

**Program Name:** ASSOCIATES IN COUSELING & MEDIATION  
Legal Name: ASSOCIATES IN COUNSELING & MEDIATION  
Address: 265 SOUTH ANITA DRIVE, SUITE 117  
City, State Zip: ORANGE, CA 92868  
Phone: (714) 547-1404 Fax: (714) 550-4677  
**Record ID:** 300213AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 4/30/2019 IMS: No

**Program Name:** ASSOCIATES IN COUNSELING & MEDIATION  
Legal Name: ASSOCIATES IN COUNSELING & MEDIATION  
Address: 25201 PASEO DE ALICIA, SUITE 100  
City, State Zip: LAGUNA HILLS, CA 92653  
Phone: (714) 554-1404 Fax: (714) 550-4677  
**Record ID:** 300213BP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 4/30/2019 IMS: No

**Program Name:** ASSOCIATES IN COUNSELING & MEDIATION  
Legal Name: ASSOCIATES IN COUNSELING & MEDIATION  
Address: 960 WEST 17TH STREET, SUITE B/C  
City, State Zip: SANTA ANA, CA 92706  
Phone: (714) 547-1404 Fax: (714) 550-4677  
**Record ID:** 300213CP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 4/30/2019 IMS: No

**Program Name:** SOVEREIGN HEALTH OF CALIFORNIA  
Legal Name: DUAL DIAGNOSIS TREATMENT CENTER, INC.  
Address: 1211 PUERTA DEL SOL, SUITE 120  
City, State Zip: SAN CLEMENTE, CA 92673  
Phone: (949) 276-5553 Fax: (949) 498-2619  
**Record ID:** 300217AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 4/30/2018 IMS: No

**Program Name:** SOVEREIGN BY THE SEA II  
Legal Name: DUAL DIAGNOSIS TREATMENT CENTER, INC.  
Address: 29371 LAS CRUCES  
City, State Zip: LAGUNA NIGUEL, CA 92677  
Phone: (949) 481-1136  
**Record ID:** 300217CP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 7/31/2017 IMS: No

**Program Name:** SOVEREIGN HEALTH ACASO  
Legal Name: DUAL DIAGNOSIS TREATMENT CENTER, INC.  
Address: 29372 VIA ACASO DRIVE  
City, State Zip: LAGUNA NIGUEL, CA 92677  
Phone: (948) 481-1086  
**Record ID:** 300217DP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 7/31/2017 IMS: No

**Program Name:** SAFE HARBOR'S CAPELLA I  
Legal Name: SAFE HARBOR'S CAPELLA, INC.  
Address: 546 BERNARD STREET  
City, State Zip: COSTA MESA, CA 92627  
Phone: (714) 323-8294 Fax: (714) 242-6775  
**Record ID:** 300221AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.3  
Expiration Date: 10/31/2018 IMS: No

**Program Name:** SAFE HARBOR'S CAPELLA  
Legal Name: SAFE HARBOR'S CAPELLA, INC.  
Address: 550A BERNARD STREET  
City, State Zip: COSTA MESA, CA 92627  
Phone: (714) 323-8294 Fax: (714) 242-6775  
**Record ID:** 300221BP  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.3  
Expiration Date: 10/31/2018 IMS: No

**Program Name:** SAFE HARBOR'S CAPELLA III  
Legal Name: SAFE HARBOR'S CAPELLA, INC.  
Address: 550B BERNARD STREET  
City, State Zip: COSTA MESA, CA 92627  
Phone: (714) 323-8294 Fax: (714) 242-6775  
**Record ID:** 300221CP  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.3  
Expiration Date: 10/31/2018 IMS: No

**Program Name:** SAFE HARBOR'S CAPELLA II  
Legal Name: SAFE HARBOR'S CAPELLA, INC.  
Address: 548 BERNARD STREET  
City, State Zip: COSTA MESA, CA 92627  
Phone: (714) 323-8294 Fax: (714) 242-6775  
**Record ID:** 300221DP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.3  
Expiration Date: 10/31/2018 IMS: No

**Program Name:** CASA BELLA RECOVERY  
Legal Name: CASA BELLA RECOVERY INTERNATIONAL INC.  
Address: 31365 MONTEREY STREET  
City, State Zip: LAGUNA BEACH, CA 92651  
Phone: (949) 715-0467 Fax: (949) 715-0467  
**Record ID:** 300222AP  
Service Type: RES-DETOX  
Resident Capacity: 10  
Total Occupancy: 10  
Target Population: 1.1  
Expiration Date: 4/30/2018 IMS: No

**Program Name:** CASA BELLA RECOVERY COUNSELING & THERAPY  
Legal Name: CASA BELLA RECOVERY INTERNATIONAL INC.  
Address: 3284 PACIFIC COAST HIGHWAY, SUITE N  
City, State Zip: DANA POINT, CA 92629  
Phone: (949) 275-7581 Fax: (949) 715-0467  
**Record ID:** 300222BP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 5/31/2019 IMS: No

**Program Name:** DEE'S HOUSE  
Legal Name: DEE'S HOUSE, LLC  
Address: 18886 SANTA MARTA STREET  
City, State Zip: FOUNTAIN VALLEY, CA 92708  
Phone: (714) 374-6873 Fax: (714) 374-6873  
**Record ID:** 300223AP  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.3  
Expiration Date: 5/31/2018 IMS: No

**Program Name:** NEW METHOD WELLNESS, INC.  
Legal Name: NEW METHOD WELLNESS, INC.  
Address: 31473 RANCHO VIEJO ROAD, SUITES 101, 102, 103, AND 104  
31461 RANCHO VIEJO ROAD, SUITE 105  
City, State Zip: SAN JUAN CAPISTRANO, CA 92675  
Phone: (949) 463-0924 Fax: (949) 472-4352  
**Record ID:** 300229AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 1/31/2019 IMS: No

**Program Name:** NEW METHOD WELLNESS  
Legal Name: NEW METHOD WELLNESS, INC.  
Address: 313 CALLE VILLARIO  
City, State Zip: SAN CLEMENTE, CA 92627  
Phone: (949) 951-1824 Fax: (949) 472-4352  
**Record ID:** 300229BP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 9/30/2018 IMS: No

**Program Name:** LUMINANCE RECOVERY CENTER, LLC  
Legal Name: LUMINANCE RECOVERY CENTER, LLC  
Address: 27126 B PASEO ESPADA, SUITE 721, 722, & 723  
City, State Zip: SAN JUAN CAPISTRANO, CA 92675  
Phone: (949) 359-7301  
**Record ID:** 300231AP  
Service Type: NON-DETOX  
Target Population: 1.1  
Expiration Date: 8/31/2019 IMS: No

**Program Name:** NEWPORT ACADEMY  
Legal Name: MONROE OPERATIONS, LLC  
Address: 811 N. RANCH WOOD TRAIL  
City, State Zip: ORANGE, CA 92869  
Phone: (714) 288-0872 Fax: (714) 288-2045  
**Record ID:** 300233AP  
Service Type: DSS  
Target Population: 1.5  
Expiration Date: 11/30/2017 IMS: No

**Program Name:** NEWPORT ACADEMY  
Legal Name: MONROE OPERATIONS, LLC  
Address: 1655 N. HUNTERS WAY  
City, State Zip: ORANGE, CA 92869  
Phone: (714) 288-9052 Fax: (714) 288-2099  
**Record ID:** 300233BP  
Service Type: DSS  
Target Population: 1.5  
Expiration Date: 11/30/2017 IMS: No



**Program Name:** NEWPORT ACADEMY INTENSIVE OUTPATIENT & DAY TREATMENT PROGRAM  
Legal Name: MONROE OPERATIONS, LLC  
Address: 3189 PULLMAN STREET  
City, State Zip: COSTA MESA, CA 92626  
Phone: (949) 721-4091 Fax: (949) 243-0282  
**Record ID:** 300233DP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 3/31/2018 IMS: No

**Program Name:** NEWPORT ACADEMY  
Legal Name: MONROE OPERATIONS, LLC  
Address: 1655 NORTH HUNTERS WAY, BUILDING 3  
City, State Zip: ORANGE, CA 92869  
Phone: (714) 271-3043 Fax: (714) 288-2099  
**Record ID:** 300233EP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 7/31/2018 IMS: No

**Program Name:** NEWPORT ACADEMY  
Legal Name: MONROE OPERATIONS, LLC  
Address: 811 NORTH RANCH WOOD TRAIL, BUILDING 3  
City, State Zip: ORANGE, CA 92869  
Phone: (714) 288-0872 Fax: (714) 271-3043  
**Record ID:** 300233FP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 7/31/2018 IMS: No

**Program Name:** NEWPORT ACADEMY  
Legal Name: MONROE OPERATIONS, LLC  
Address: 20115 HILLSIDE DRIVE  
City, State Zip: ORANGE, CA 92869  
Phone: (714) 376-5889 Fax: (714) 288-2099  
**Record ID:** 300233GP  
Service Type: DSS  
Target Population: 1.5  
Expiration Date: 11/30/2018 IMS: No

**Program Name:** NEWPORT ACADEMY  
Legal Name: MONROE OPERATIONS, LLC  
Address: 760 N. RODEO CIRCLE  
City, State Zip: ORANGE, CA 92869  
Phone: (714) 376-5889 Fax: (714) 288-2099  
**Record ID:** 300233HP  
Service Type: DSS  
Target Population: 1.5  
Expiration Date: 11/30/2018 IMS: No

**Program Name:** JUST ONE RECOVERY  
Legal Name: JUST ONE RECOVERY  
Address: 262 & 264 N. CLEVELAND STREET  
City, State Zip: ORANGE, CA 92866  
Phone: (714) 538-8085 Fax: (714) 628-9884  
**Record ID:** 300234AN  
Service Type: RES-DETOX  
Resident Capacity: 4  
Total Occupancy: 6  
Target Population: 1.2  
Expiration Date: 1/31/2018 IMS: No

**Program Name:** SURE HAVEN  
Legal Name: SURE HAVEN  
Address: 725 CENTER STREET, UNITS A AND B  
City, State Zip: COSTA MESA, CA 92626  
Phone: (949) 467-9213 Ext:228 Fax: (888) 588-4998  
**Record ID:** 300235DP  
Service Type: RES-DETOX  
Resident Capacity: 12  
Total Occupancy: 12  
Target Population: 1.1  
Expiration Date: 1/31/2019 IMS: No

**Program Name:** SURE HAVEN  
Legal Name: SURE HAVEN  
Address: 3072 & 3073 MADISON AVENUE  
City, State Zip: COSTA MESA, CA 92626  
Phone: (828) 773-4477  
**Record ID:** 300235GP  
Service Type: RES-DETOX  
Resident Capacity: 12  
Total Occupancy: 12  
Target Population: 1.1  
Expiration Date: 9/30/2018 IMS: No

**Program Name:** SURE HAVEN  
Legal Name: SURE HAVEN  
Address: 3125 AND 3129 PIERCE AVENUE  
City, State Zip: COSTA MESA, CA 92626  
Phone: (949) 467-9213 Fax: (888) 588-4998  
**Record ID:** 300235QP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 12/31/2017 IMS: No

**Program Name:** SOVEREIGN BY THE SEA II  
Legal Name: SATYA HEALTH OF CALIFORNIA, INC.  
Address: 105 AVENIDA PALA  
City, State Zip: SAN CLEMENTE, CA 92672  
Phone: (949) 545-6853 Fax: (949) 265-0446  
**Record ID:** 300236AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 1/31/2018 IMS: No

**Program Name:** ORANGE COUNTY RECOVERY SERVICES  
Legal Name: ORANGE COUNTY RECOVERY SERVICES, LLC  
Address: 19322 BEACH BOULEVARD  
City, State Zip: HUNTINGTON BEACH, CA 92648  
Phone: (949) 515-9191 Fax: (949) 515-9193  
**Record ID:** 300237AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 1/31/2018 IMS: No

**Program Name:** PACIFIC SHORES RECOVERY  
Legal Name: PACIFIC SHORES RECOVERY, LLC  
Address: 3309 CLAY STREET  
City, State Zip: NEWPORT BEACH, CA 92663  
Phone: (949) 574-2510 Fax: (949) 722-1135  
**Record ID:** 300238AP  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 7  
Target Population: 1.1  
Expiration Date: 1/31/2018 IMS: No

**Program Name:** CHAPTERS CAPISTRANO  
Legal Name: CHAPTERS CAPISTRANO, LLC  
Address: 1525 BUENA VISTA, UNITS A, B AND C  
City, State Zip: SAN CLEMENTE, CA 92672  
Phone: (949) 481-2766 Fax: (949) 545-6237  
**Record ID:** 300239AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 4/30/2018 IMS: No

**Program Name:** CHAPTERS CAPISTRANO  
Legal Name: CHAPTERS CAPISTRANO, LLC  
Address: 222 AVENIDA LA CUESTA  
City, State Zip: SAN CLEMENTE, CA 92672  
Phone: (949) 698-2249  
**Record ID:** 300239BP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 9/30/2018 IMS: No

**Program Name:** NEWPORT BEACH RECOVERY CENTER  
Legal Name: NEWPORT BEACH RECOVERY CENTER  
Address: 207 28TH STREET  
City, State Zip: NEWPORT BEACH, CA 92663  
Phone: (949) 200-9372 Fax: (949) 612-7968  
**Record ID:** 300240AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.3  
Expiration Date: 2/28/2018 IMS: No

**Program Name:** 449 RECOVERY  
Legal Name: FOUR FORTY-NINE, INC.  
Address: 26010 ACERO STREET  
SUITE 100  
City, State Zip: MISSION VIEJO, CA 92691  
Phone: (855) 435-7449 Fax: (949) 429-0767  
**Record ID:** 300242AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 6/30/2018 IMS: No

**Program Name:** PACE RECOVERY CENTER, LLC  
Legal Name: PACE RECOVERY CENTER, LLC  
Address: 209 22ND STREET  
City, State Zip: HUNTINGTON BEACH, CA 92648  
Phone: (714) 274-9239 Fax: (714) 369-2159  
**Record ID:** 300244AP  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.2  
Expiration Date: 7/31/2018 IMS: No

**Program Name:** PACE RECOVERY CENTER, LLC  
Legal Name: PACE RECOVERY CENTER, LLC  
Address: 528 16TH STREET  
City, State Zip: HUNTINGTON BEACH, CA 92648  
Phone: (714) 369-2137 Fax: (714) 369-2139  
**Record ID:** 300244BP  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.2  
Expiration Date: 2/28/2019 IMS: No

**Program Name:** PACE RECOVERY CENTER, LLC  
Legal Name: PACE RECOVERY CENTER, LLC  
Address: 3197-B AIRPORT LOOP DRIVE  
City, State Zip: COSTA MESA, CA 92626  
Phone: (714) 884-4558 Fax: (714) 274-9517  
**Record ID:** 300244CP  
Service Type: NON  
Target Population: 1.2  
Expiration Date: 2/28/2019 IMS: No

**Program Name:** PACE RECOVERY CENTER  
Legal Name: PACE RECOVERY CENTER, LLC  
Address: 414 11TH STREET  
City, State Zip: HUNTINGTON BEACH, CA 92648-4508  
Phone: (714) 369-6504  
**Record ID:** 300244DP  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.2  
Expiration Date: 9/30/2018 IMS: No

**Program Name:** PACE RECOVERY CENTER  
Legal Name: PACE RECOVERY CENTER, LLC  
Address: 526 16TH STREET  
City, State Zip: HUNTINGTON BEACH, CA 92648  
Phone: (949) 640-0018 Fax: (714) 274-9517  
**Record ID:** 300244EP  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.2  
Expiration Date: 1/31/2018 IMS: No

**Program Name:** SOUTH ORANGE COUNTY DETOX TREATMENT  
Legal Name: ALEXANDRA ROSE CORPORATION  
Address: 4009 CALLE ABRIL  
City, State Zip: SAN CLEMENTE, CA 92673  
Phone: (714) 785-2512 Fax: (949) 481-4949  
**Record ID:** 300245AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 1/31/2019 IMS: No

**Program Name:** WINDWARD WAY RECOVERY  
Legal Name: WINDWARD WAY RECOVERY LLC  
Address: 2787 BRISTOL STREET  
City, State Zip: COSTA MESA, CA 92626  
Phone: (887) 713-2669 Fax: (887) 820-8959  
**Record ID:** 300246AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 1/31/2019 IMS: No

**Program Name:** WINDWARD WAY  
Legal Name: WINDWARD WAY RECOVERY LLC  
Address: 316 HAMILTON STREET  
City, State Zip: COSTA MESA, CA 92627  
Phone: (949) 903-1053 Fax: (877) 820-8959  
**Record ID:** 300246BP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.2  
Expiration Date: 7/31/2019 IMS: No

**Program Name:** WINDWARD WAY  
Legal Name: WINDWARD WAY RECOVERY LLC  
Address: 395 VICTORIA STREET  
City, State Zip: COSTA MESA, CA 92627-1548  
Phone: (949) 525-6871 Fax: (977) 820-8959  
**Record ID:** 300246CP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.2  
Expiration Date: 10/31/2019 IMS: No

**Program Name:** WINDWARD WAY  
Legal Name: WINDWARD WAY RECOVERY LLC  
Address: 165 23RD STREET  
City, State Zip: COSTA MESA, CA 92627  
Phone: (949) 903-1053 Fax: (877) 820-8959  
**Record ID:** 300246EP  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.2  
Expiration Date: 10/31/2018 IMS: No

**Program Name:** SIMPLE RECOVERY, INC.  
Legal Name: SIMPLE RECOVERY INC.  
Address: 9531 NETHERWAY DRIVE  
City, State Zip: HUNTINGTON BEACH, CA 92646  
Phone: (949) 646-3600 Fax: (949) 646-3100  
**Record ID:** 300247AP  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 12/31/2019 IMS: No

**Program Name:** SIMPLE RECOVERY INC.  
Legal Name: SIMPLE RECOVERY INC.  
Address: 1901 NEWPORT BOULEVARD,  
SUITE 156, 165, 200 & 225  
City, State Zip: COSTA MESA, CA 92627  
Phone: (949) 646-3600 Fax: (949) 646-3100  
**Record ID:** 300247BP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 9/30/2018 IMS: No

**Program Name:** SIMPLE RECOVERY INC.  
Legal Name: SIMPLE RECOVERY INC.  
Address: 20112 VIVA CIRCLE  
City, State Zip: HUNTINGTON BEACH, CA 92646  
Phone: (949) 646-3600  
**Record ID:** 300247CP  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 9/30/2018 IMS: No

**Program Name:** SIMPLE RECOVERY INC.  
Legal Name: SIMPLE RECOVERY INC.  
Address: 20621 PAISLEY LANE  
City, State Zip: HUNTINGTON BEACH, CA 92646  
Phone: (714) 406-1911 Fax: (714) 646-3100  
**Record ID:** 300247DP  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 9/30/2017 IMS: No

**Program Name:** ENCOMPASS RECOVERY  
Legal Name: ENCOMPASS TREATMENT SERVICES, LLC  
Address: 27122A PASEO ESPADA, SUITE 924  
City, State Zip: SAN JUAN CAPISTRANO, CA 92675  
Phone: (949) 218-4102 Fax: (509) 463-7115  
**Record ID:** 300248AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 12/31/2018 IMS: No

**Program Name:** NEW START DETOX  
Legal Name: LIBERTY HOUSING SERVICES, INC.  
Address: 906 DORMAN STREET  
City, State Zip: SANTA ANA, CA 92701  
Phone: (714) 486-3691 Fax: (714) 884-3896  
**Record ID:** 300249AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 12/31/2018 IMS: No

**Program Name:** NEW START DETOX  
Legal Name: LIBERTY HOUSING SERVICES, INC.  
Address: 13832 GLENMERE DRIVE  
City, State Zip: SANTA ANA, CA 92705  
Phone: (714) 332-3143 Fax: (714) 486-2127  
**Record ID:** 300249BP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.2  
Expiration Date: 9/30/2018 IMS: No

**Program Name:** HARMONY HEALS, INC.  
Legal Name: HARMONY HEALS, INC.  
Address: 23173 LA CADENA DRIVE  
City, State Zip: LAGUNA HILLS, CA 92653  
Phone: (949) 837-2751 Fax: (888) 762-3708  
**Record ID:** 300250AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 3/31/2019 IMS: No

**Program Name:** STEPHOUSE RECOVERY CENTER  
Legal Name: THE STEPHOUSE RECOVERY, INC.  
Address: 1601 BAKER STREET  
City, State Zip: COSTA MESA, CA 92626  
Phone: (714) 933-6601 Fax: (657) 845-7531  
**Record ID:** 300251BP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 5/31/2019 IMS: No

**Program Name:** STEPHOUSE RECOVERY CENTER  
Legal Name: THE STEPHOUSE RECOVERY, INC.  
Address: 10529 SLATER AVENUE, SUITES 10505, 10507 & 10537  
City, State Zip: FOUNTAIN VALLEY, CA 92708  
Phone: (741) 933-6601 Fax: (657) 845-7531  
**Record ID:** 300251CP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 8/31/2019 IMS: No

**Program Name:** STEPHOUSE RECOVERY CENTER  
Legal Name: THE STEPHOUSE RECOVERY, INC.  
Address: 17981 LOS TIEMPOS  
City, State Zip: FOUNTAIN VALLEY, CA 92708  
Phone: (714) 933-6559  
**Record ID:** 300251DP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 11/30/2017 IMS: No

**Program Name:** GET REAL RECOVERY, INC.  
Legal Name: GET REAL RECOVERY, INC.  
Address: 30290 RANCHO VIEJO ROAD, SUITE 204  
City, State Zip: SAN JUAN CAPISTRANO, CA 92675  
Phone: (949) 449-2429 Fax: (888) 835-3339  
**Record ID:** 300252AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 1/31/2019 IMS: No

**Program Name:** GET REAL RECOVERY, INC.  
Legal Name: GET REAL RECOVERY, INC.  
Address: 28334 PASEO MICHELLE  
City, State Zip: SAN JUAN CAPISTRANO, CA 92675  
Phone: (949) 933-2505 Fax: (888) 835-3339  
**Record ID:** 300252BP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 2/28/2018 IMS: No

**Program Name:** GET REAL RECOVERY, INC.  
Legal Name: GET REAL RECOVERY, INC.  
Address: 29521 ANA MARIA LANE  
City, State Zip: LAGUNA NIGUEL, CA 92677  
Phone: (949) 933-2505 Fax: (888) 835-3339  
**Record ID:** 300252CP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.8  
Expiration Date: 11/30/2018 IMS: No

**Program Name:** TREE HOUSE RECOVERY (THR)  
Legal Name: ARROWOOD CAPITAL, INC.  
Address: 1956 POMONA AVENUE  
City, State Zip: COSTA MESA, CA 92627  
Phone: (855) 447-8733 Fax: (714) 968-2752  
**Record ID:** 300253AP  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.2  
Expiration Date: 1/31/2019 IMS: No

**Program Name:** SOBERTEC LLC  
Legal Name: SOBERTEC LLC  
Address: 125 COLUMBIA, SUITE B  
City, State Zip: ALISO VIEJO, CA 92656  
Phone: (949) 344-2742 Fax: (949) 366-5964  
**Record ID:** 300254AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 2/28/2019 IMS: No

**Program Name:** SOBERTEC LLC  
Legal Name: SOBERTEC LLC  
Address: 610 AVENIDA ACAPULCO  
City, State Zip: SAN CLEMENTE, CA 92672  
Phone: (949) 481-2681  
**Record ID:** 300254BP  
Service Type: RES-DETOX  
Resident Capacity: 8  
Total Occupancy: 8  
Target Population: 1.1  
Expiration Date: 9/30/2018 IMS: No

**Program Name:** SOBERTEC LLC  
Legal Name: SOBERTEC LLC  
Address: 31472 ISLE VISTA  
City, State Zip: LAGUNA NIGUEL, CA 92677  
Phone: (949) 340-3885  
**Record ID:** 300254DP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 6/30/2018 IMS: No

**Program Name:** SOBERTEC LLC  
Legal Name: SOBERTEC LLC  
Address: 402 PASADENA COURT, UNITS 1, 2, AND 3  
City, State Zip: SAN CLEMENTE, CA 92672  
Phone: (949) 429-5456  
**Record ID:** 300254EP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 6/30/2018 IMS: No

**Program Name:** SOBERTEC LLC  
Legal Name: SOBERTEC LLC  
Address: 33801 VIA CASCADA  
City, State Zip: SAN JUAN CAPISTRANO, CA 92675  
Phone: (339) 293-9066  
**Record ID:** 300254HP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 1/31/2019 IMS: No

**Program Name:** SOBERTEC LLC  
Legal Name: SOBERTEC LLC  
Address: 4425 MAR ESCARPA  
City, State Zip: SAN CLEMENTE, CA 92673  
Phone: (949) 340-1108  
**Record ID:** 300254IP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 1/31/2019 IMS: No

**Program Name:** ZEN RECOVERY, LLC  
Legal Name: ZEN RECOVERY, LLC  
Address: 126 E. 16TH STREET  
City, State Zip: COSTA MESA, CA 92627  
Phone: (949) 940-5445 Fax: (714) 242-1975  
**Record ID:** 300260AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 12/31/2017 IMS: No

**Program Name:** SOUTH COAST BEHAVIORIAL HEALTH  
Legal Name: SOUTH COAST BEHAVIORIAL HEALTH GUESTHOUSE, INC  
Address: 3151 AIRWAY AVENUE, N1-N2  
City, State Zip: COSTA MESA, CA 92626  
Phone: (866) 811-5249  
**Record ID:** 300261AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 9/30/2017 IMS: No



**Program Name:** APOLLO RECOVERY  
Legal Name: ARTEMIS HILL RECOVERY INC.  
Address: 17429 SANTA LUCIA STREET  
City, State Zip: FOUNTAIN VALLEY, CA 92708  
Phone: (714) 274-9766 Fax: (562) 431-0840  
**Record ID:** 300262AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.2  
Expiration Date: 10/31/2017 IMS: Yes

**Program Name:** SOUTHERN CALIFORNIA RECOVERY CENTERS  
Legal Name: TML RECOVERY, LLC  
Address: 24470 DEL PRADO AVENUE, SUITE B  
City, State Zip: DANA POINT, CA 92629  
Phone: (800) 410-6552  
**Record ID:** 300265AP  
Service Type: NON  
Target Population: 1.2  
Expiration Date: 2/28/2018 IMS: No

**Program Name:** LIGHTHOUSE TREATMENT CENTER  
Legal Name: WINDSTONE ADDICTION CENTERS, INC.  
Address: 1310 W. PEARL STREET  
City, State Zip: ANAHEIM, CA 92801  
Phone: (714) 780-1174 Fax: (714) 780-1124  
**Record ID:** 300266AP  
Service Type: RES-DETOX  
Resident Capacity: 22  
Total Occupancy: 22  
Target Population: 1.1  
Expiration Date: 5/31/2018 IMS: No

**Program Name:** LIGHTHOUSE TREATMENT CENTER  
Legal Name: WINDSTONE ADDICTION CENTERS, INC.  
Address: 1243 W. PEARL ST.  
City, State Zip: ANHEIM, CA 92801  
Phone: (714) 833-5604 Fax: (714) 833-5038  
**Record ID:** 300266BP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.3  
Expiration Date: 11/30/2017 IMS: No

**Program Name:** LIGHTHOUSE TREATMENT CENTER  
Legal Name: WINDSTONE ADDICTION CENTERS, INC.  
Address: 1243 1/2 W. PEARL STREET  
City, State Zip: ANAHEIM, CA 92801  
Phone: (714) 833-5604 Fax: (714) 833-5038  
**Record ID:** 300266CP  
Service Type: RES-DETOX  
Resident Capacity: 4  
Total Occupancy: 4  
Target Population: 1.3  
Expiration Date: 7/31/2018 IMS: No

**Program Name:** LIGHTHOUSE TREATMENT CENTER  
Legal Name: WINDSTONE ADDICTION CENTERS, INC.  
Address: 1253 W. PEARL ST.  
City, State Zip: ANAHEIM, CA 92801  
Phone: (714) 833-5604 Fax: (714) 833-5038  
**Record ID:** 300266DP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 10/31/2018 IMS: No

**Program Name:** LIGHTHOUSE TREATMENT CENTER  
Legal Name: WINDSTONE ADDICTION CENTERS, INC.  
Address: 1300 W. PEARL STREET  
City, State Zip: ANAHEIM, CA 92801  
Phone: (714) 833-5604 Fax: (714) 833-5038  
**Record ID:** 300266EP  
Service Type: RES-DETOX  
Resident Capacity: 17  
Total Occupancy: 17  
Target Population: 1.1  
Expiration Date: 1/31/2019 IMS: No

**Program Name:** SURF CITY RECOVERY  
Legal Name: SURF CITY RECOVERY  
Address: 18090 BEACH BOULEVARD, SUITE 5  
City, State Zip: HUNTINGTON BEACH, CA 92648  
Phone: (949) 209-7765  
**Record ID:** 300267AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 12/31/2017 IMS: No

**Program Name:** SURF CITY RECOVERY  
Legal Name: SURF CITY RECOVERY  
Address: 9872 BIG SUR DRIVE  
City, State Zip: HUNTINGTON BEACH, CA 92648  
Phone: (714) 841-3863  
**Record ID:** 300267BP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 9/30/2018 IMS: No

**Program Name:** CASA RECOVERY  
Legal Name: CASA RECOVERY, INC.  
Address: 31877 DEL OBISPO STREET, SUITE 104  
City, State Zip: SAN JUAN CAPISTRANO, CA 92675  
Phone: (888) 928-2272 Fax: (949) 284-0574  
**Record ID:** 300268BP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 5/31/2019 IMS: No

**Program Name:** HOTEL CALIFORNIA BY THE SEA, LLC  
Legal Name: HOTEL CALIFORNIA BY THE SEA, LLC  
Address: 4504 SEASHORE DRIVE  
City, State Zip: NEWPORT BEACH, CA 92663  
Phone: (800) 762-6717 Fax: (949) 629-3883  
**Record ID:** 300270AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 1/31/2018 IMS: No

**Program Name:** HOTEL CALIFORNIA BY THE SEA  
Legal Name: HOTEL CALIFORNIA BY THE SEA, LLC  
Address: 230 EAST 17TH STREET SUITE 201  
City, State Zip: COSTA MESA, CA 92627  
Phone: (800) 762-6717 Fax: (949) 629-3883  
**Record ID:** 300270BP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 4/30/2018 IMS: No

**Program Name:** HOTEL CALIFORNIA BY THE SEA, LLC  
Legal Name: HOTEL CALIFORNIA BY THE SEA, LLC  
Address: 1509 ORANGE AVENUE, A AND B  
City, State Zip: COSTA MESA, CA 92627  
Phone: (951) 212-0439 Fax: (310) 400-5846  
**Record ID:** 300270CP  
Service Type: RES-DETOX  
Resident Capacity: 12  
Total Occupancy: 12  
Target Population: 1.1  
Expiration Date: 7/31/2018 IMS: No

**Program Name:** HOTEL CALIFORNIA BY THE SEA  
Legal Name: HOTEL CALIFORNIA BY THE SEA, LLC  
Address: 317 ROCHESTER AVENUE  
City, State Zip: COSTA MESA, CA 92627  
Phone: (951) 212-0439 Fax: (310) 400-5846  
**Record ID:** 300270DP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 10/31/2019 IMS: No

**Program Name:** HOTEL CALIFORNIA BY THE SEA  
Legal Name: HOTEL CALIFORNIA BY THE SEA, LLC  
Address: 400 WESTMINSTER AVENUE, SUITE 1  
City, State Zip: NEWPORT BEACH, CA 92663  
Phone: (947) 220-0049 Fax: (310) 400-5846  
**Record ID:** 300270EP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 1/31/2019 IMS: No

**Program Name:** HOTEL CALIFORNIA BY THE SEA  
Legal Name: HOTEL CALIFORNIA BY THE SEA, LLC  
Address: 204 E. 17TH STREET, SUITE 203  
City, State Zip: COSTA MESA, CA 92627  
Phone: (949) 220-0052  
**Record ID:** 300270FP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 1/31/2019 IMS: No

**Program Name:** HOTEL CALIFORNIA BY THE SEA  
Legal Name: HOTEL CALIFORNIA BY THE SEA, LLC  
Address: 19240 BEACH BLVD.  
City, State Zip: HUNTINGTON BEACH, CA 92627  
Phone: (951) 212-0439 Fax: (310) 400-5864  
**Record ID:** 300270HP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 6/30/2019 IMS: No

**Program Name:** HOTEL CALIFORNIA BY THE SEA  
Legal Name: HOTEL CALIFORNIA BY THE SEA, LLC  
Address: 18801 FLAGSTAFF LANE  
City, State Zip: HUNTINGTON BEACH, CA 92646  
Phone: (951) 212-0439 Fax: (310) 400-5864  
**Record ID:** 300270JP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 8/31/2019 IMS: No

**Program Name:** A MISSION FOR MICHAEL, INC.  
Legal Name: A MISSION FOR MICHAEL, INC.  
Address: 647 CAMINO DE LOS MARES, SUITE 201  
City, State Zip: SAN CLEMENTE, CA 92673  
Phone: (949) 489-0950 Fax: (949) 489-0959  
**Record ID:** 300272AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 4/30/2018 IMS: No

**Program Name:** PACIFIC PALMS RECOVERY  
Legal Name: PACIFIC PALMS RECOVERY, LLC  
Address: 3551 CAMINO MIRA COSTA, SUITES F AND T  
City, State Zip: SAN CLEMENTE, CA 92672  
Phone: (949) 943-5188 Fax: (949) 542-8565  
**Record ID:** 300273AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 2/28/2018 IMS: No

**Program Name:** HARMONY HEALS DETOX  
Legal Name: COMPLETE RESURGENCY, LLC  
Address: 31957 AND 31959 VIRGINIA WAY  
City, State Zip: LAGUNA BEACH, CA 92651  
Phone: (949) 837-2751 Fax: (949) 600-7113  
**Record ID:** 300277AP  
Service Type: RES-DETOX  
Resident Capacity: 12  
Total Occupancy: 12  
Target Population: 1.1  
Expiration Date: 4/30/2018 IMS: No

**Program Name:** EMBRACE RECOVERY  
Legal Name: EMBRACE RECOVERY, LLC  
Address: 23232 PERALTA DRIVE, SUITE 219  
City, State Zip: LAGUNA HILLS, CA 92653  
Phone: (949) 525-3696  
**Record ID:** 300288AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 4/30/2018 IMS: No

**Program Name:** SOCAL DETOX  
Legal Name: SOCAL DETOX LLC  
Address: 1703 AVENIDA SALVADOR  
City, State Zip: SAN CLEMENTE, CA 92672  
Phone: (888) 590-0777 Fax: (360) 323-7285  
**Record ID:** 300290AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 4/30/2018 IMS: No

**Program Name:** SOCAL DETOX  
Legal Name: SOCAL DETOX LLC  
Address: 835 AVENIDA SALVADOR  
City, State Zip: SAN CLEMENTE, CA 92672  
Phone: (888) 590-0777 Fax: (360) 323-7285  
**Record ID:** 300290BP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 6/30/2019 IMS: No

**Program Name:** SPENCER RECOVERY CENTERS  
Legal Name: COAST TO COAST REFERRAL CENTER, INC.  
Address: 1337 GAVIOTA  
City, State Zip: LAGUNA BEACH, CA 92651  
Phone: (949) 376-3705 Fax: (949) 376-6862  
**Record ID:** 300291AN  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 8/31/2018 IMS: No

**Program Name:** COAST TO COAST REFERRAL CENTER  
Legal Name: COAST TO COAST REFERRAL CENTER, INC.  
Address: 665 CAMINO DE LOS MARES, SUITE 104B  
City, State Zip: SAN CLEMENTE, CA 92673  
Phone: (949) 313-5200 Fax: (949) 313-5240  
**Record ID:** 300291BN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 4/30/2018 IMS: No

**Program Name:** WJW TREATMENT CENTERS  
Legal Name: CACTUS GARDENS OPPORTUNITY HOUSE, INC.  
Address: 13212 & 13222 CHAPMAN AVENUE  
City, State Zip: GARDEN GROVE, CA 92840  
Phone: (714) 703-9492 Fax: (714) 740-2030  
**Record ID:** 300292AN  
Service Type: RES  
Resident Capacity: 16  
Total Occupancy: 16  
Target Population: 1.2  
Expiration Date: 3/31/2018 IMS: No

**Program Name:** NSIGHT OUTPATIENT PROGRAM  
Legal Name: INSIGHT PSYCHOLOGY AND ADDICTION INC.  
Address: 4000 BIRCH STREET,  
SUITE 112A  
City, State Zip: NEWPORT BEACH, CA 92660  
Phone: (888) 256-2201 Fax: (949) 203-0402  
**Record ID:** 300293AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 7/31/2018 IMS: No

**Program Name:** COMMUNITY REHAB  
Legal Name: TRINITY REHAB GROUP, LLC.  
Address: 129 W PALMYRA AVENUE  
City, State Zip: ORANGE, CA 92866  
Phone: (714) 797-1264 Fax: (714) 970-1965  
**Record ID:** 300294AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 8/31/2018 IMS: No

**Program Name:** AKUA MIND & BODY  
Legal Name: AKUA BEHAVIORAL HEALTH, INC.  
Address: 1119 SUNFLOWER AVENUE  
City, State Zip: COSTA MESA, CA 92626  
Phone: (949) 279-1376  
**Record ID:** 300297AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 9/30/2018 IMS: No

**Program Name:** AKUA MIND & BODY  
Legal Name: AKUA BEHAVIORAL HEALTH, INC.  
Address: 20271 SW BIRCH STREET, SUITE 202  
City, State Zip: NEWPORT BEACH, CA 92660  
Phone: (714) 557-2350 Fax: (714) 947-4058  
**Record ID:** 300297BP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 3/31/2019 IMS: No

**Program Name:** AKUA MIND & BODY, INC.  
Legal Name: AKUA BEHAVIORAL HEALTH, INC.  
Address: 369 RALCAM PLACE  
City, State Zip: COSTA MESA, CA 92627  
Phone: (949) 279-1376  
**Record ID:** 300297CP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 10/31/2017 IMS: No

**Program Name:** AKUA MIND & BODY  
Legal Name: AKUA BEHAVIORAL HEALTH, INC.  
Address: 373 RALCAM PLACE  
City, State Zip: COSTA MESA, CA 92627  
Phone: (949) 646-2456  
**Record ID:** 300297DP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 5/31/2018 IMS: No

**Program Name:** AKUA MIND & BODY  
Legal Name: AKUA BEHAVIORAL HEALTH, INC.  
Address: 725 W. 20TH STREET  
City, State Zip: COSTA MESA, CA 92627  
Phone: (949) 873-5013  
**Record ID:** 300297EP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 5/31/2018 IMS: No

**Program Name:** AKUA MIND & BODY  
Legal Name: AKUA BEHAVIORAL HEALTH, INC.  
Address: 324 UNIVERSITY DRIVE  
City, State Zip: COSTA MESA, CA 92627  
Phone: (949) 279-1376  
**Record ID:** 300297FP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 5/31/2018 IMS: No

**Program Name:** CROSSROADS RECOVERY CENTERS  
Legal Name: DIVINE REHABILITATION, EDUCATION, & HOUSING NETWORK  
Address: 402 EAST LA HABRA BOULEVARD  
City, State Zip: LA HABRA, CA 90631  
Phone: (877) 293-0722  
**Record ID:** 300298AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 9/30/2018 IMS: No

**Program Name:** SECOND CHANCE ADDICTION RECOVERY CENTER, INC.  
Legal Name: SECOND CHANCE ADDICTION RECOVERY CENTER, INC.  
Address: 1335 SOUTH EUCLID STREET  
City, State Zip: ANAHEIM, CA 92802  
Phone: (714) 215-4371 Fax: (715) 533-7398  
**Record ID:** 300299AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 10/31/2018 IMS: No

**Program Name:** PATH TO SERENITY  
Legal Name: RECOVERY BAY REHABILITATION CENTER, LLC  
Address: 18912 PATRICIAN DRIVE  
City, State Zip: VILLA PARK, CA 92861  
Phone: (949) 289-0350 Fax: (949) 209-3710  
**Record ID:** 300300AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.3  
Expiration Date: 2/28/2019 IMS: No

**Program Name:** ADDICTION RECOVERY REHAB  
Legal Name: RECOVERY BAY REHABILITATION CENTER, LLC  
Address: 10002 BRILEY WAY  
City, State Zip: VILLA PARK, CA 92861  
Phone: (949) 289-0350 Fax: (949) 209-3710  
**Record ID:** 300300BP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.2  
Expiration Date: 1/31/2019 IMS: No

**Program Name:** GRANT ME THE COURAGE RECOVERY  
Legal Name: GRANT ME THE COURAGE RECOVERY, LLC  
Address: 3230 E. IMPERIAL HIGHWAY, SUITE 312  
City, State Zip: BREA, CA 92821  
Phone: (714) 674-0000 Fax: (866) 653-9110  
**Record ID:** 300302AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 2/28/2019 IMS: No

**Program Name:** CLEAN PATH RECOVERY  
Legal Name: CLEAN PATH RECOVERY, LLC  
Address: 2200 HARBOR BOULEVARD, SUITE C-210  
City, State Zip: COSTA MESA, CA 92627  
Phone: (949) 734-7432  
**Record ID:** 300303AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 12/31/2018 IMS: No

**Program Name:** CLEAN PATH RECOVERY  
Legal Name: CLEAN PATH RECOVERY, LLC  
Address: 1650 ADAMS AVENUE  
City, State Zip: COSTA MESA, CA 92626  
Phone: (949) 734-7432 Fax: (949) 209-1884  
**Record ID:** 300303BP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 4/30/2018 IMS: No

**Program Name:** CLEAN PATH BEHAVIORAL HEALTH  
Legal Name: CLEAN PATH RECOVERY, LLC  
Address: 2822 MONTEREY AVENUE  
City, State Zip: COSTA MESA, CA 92626  
Phone: (949) 734-7432 Ext:110 Fax: (949) 209-1884  
**Record ID:** 300303CP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 6/30/2018 IMS: No

**Program Name:** CLEAN PATH RECOVERY  
Legal Name: CLEAN PATH RECOVERY, LLC  
Address: 2272 PAMELA LANE,  
UNIT A  
City, State Zip: COSTA MESA, CA 92627  
Phone: (949) 734-7432 Ext:129 Fax: (949) 209-1884  
**Record ID:** 300303DP  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 7  
Target Population: 1.1  
Expiration Date: 6/30/2018 IMS: No

**Program Name:** CLEAN PATH BEHAVIORAL HEALTH  
Legal Name: CLEAN PATH RECOVERY, LLC  
Address: 973 ARBOR STREET  
City, State Zip: COSTA MESA, CA 92627  
Phone: (949) 734-7432 Ext:115 Fax: (949) 209-1884  
**Record ID:** 300303EP  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 6/30/2018 IMS: No

**Program Name:** CLEAN PATH BEHAVIORAL HEALTH  
Legal Name: CLEAN PATH RECOVERY, LLC  
Address: 13741 OLYMPIC AVENUE  
City, State Zip: COSTA MESA, CA 92626  
Phone: (949) 734-7432 Fax: (949) 209-1884  
**Record ID:** 300303FP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 7/31/2018 IMS: No

**Program Name:** CLEAN PATH RECOVERY  
Legal Name: CLEAN PATH RECOVERY, LLC  
Address: 308 22ND STREET  
City, State Zip: HUNTINGTON BEACH, CA 92648  
Phone: (949) 734-7432 Fax: (949) 209-1884  
**Record ID:** 300303GP  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 7/31/2018 IMS: No

**Program Name:** CLEAN PATH RECOVERY  
Legal Name: CLEAN PATH RECOVERY, LLC  
Address: 2272 PAMELA LANE, UNIT B  
City, State Zip: COSTA MESA, CA 92627  
Phone: (949) 734-7432 Fax: (949) 209-1884  
**Record ID:** 300303HP  
Service Type: RES  
Resident Capacity: 3  
Total Occupancy: 3  
Target Population: 1.8  
Expiration Date: 10/31/2018 IMS: No



**Program Name:** CLEAN PATH RECOVERY  
Legal Name: CLEAN PATH RECOVERY, LLC  
Address: 2272 PAMELA LANE, UNIT C  
City, State Zip: COSTA MESA, CA 92627  
Phone: (949) 734-7432 Fax: (949) 209-1884  
**Record ID:** 300303IP  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.8  
Expiration Date: 10/31/2018 IMS: No

**Program Name:** SOBER PARTNERS BEACH HOUSE  
Legal Name: PARTNERS PROJECT INC.  
Address: 517 14TH STREET  
City, State Zip: HUNTINGTON BEACH , CA 92647  
Phone: (657) 845-4159 Fax: (949) 877-0119  
**Record ID:** 300305AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.3  
Expiration Date: 12/31/2018 IMS: No

**Program Name:** SOBER PARTNERS WATERFRONT RECOVERY CENTER  
Legal Name: PARTNERS PROJECT INC.  
Address: 3101 WEST COAST HIGHWAY, SUITE 200  
City, State Zip: NEWPORT BEACH, CA 92663  
Phone: (855) 997-2786  
**Record ID:** 300305BP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 4/30/2019 IMS: No

**Program Name:** SOBER PARTNERS REEF HOUSE  
Legal Name: PARTNERS PROJECT INC.  
Address: 302 18TH STREET  
City, State Zip: HUNTINGTON BEACH, CA 92648  
Phone: (855) 997-2786  
**Record ID:** 300305CP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.2  
Expiration Date: 5/31/2018 IMS: No

**Program Name:** CALIFORNIA COAST DETOX AND REHAB  
Legal Name: NDR PACIFIC INC.  
Address: 24482 CARACAS STREET  
City, State Zip: DANA POINT, CA 92629  
Phone: (949) 218-8174  
**Record ID:** 300306AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 2/28/2019 IMS: No

**Program Name:** SHORELINE TREATMENT  
Legal Name: PURE LIFE RECOVERY, LLC.  
Address: 1 CALLE SALTAMONTES  
City, State Zip: SAN CLEMENTE, CA 92673  
Phone: (949) 388-7014 Fax: (949) 545-6267  
**Record ID:** 300308BP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 8  
Target Population: 1.1  
Expiration Date: 4/30/2019 IMS: No

**Program Name:** FAITH BY THE SEA  
Legal Name: FAITH BY THE SEA, INC.  
Address: 27129 CALLE ARROYO  
SUITE 1821  
City, State Zip: SAN JUAN CAPISTRANO, CA 92675  
Phone: (949) 542-8480 Fax: (949) 429-3698  
**Record ID:** 300309AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 2/28/2019 IMS: No

**Program Name:** MONARCH SHORES  
Legal Name: SUNSHINE BEHAVIORAL HEALTH LLC  
Address: 34575 CAMINO CAPISTRANO  
City, State Zip: DANA POINT, CA 92629  
Phone: (888) 783-0622 Fax: (949) 429-1845  
**Record ID:** 300311AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 2/28/2019 IMS: No

**Program Name:** MONARCH SHORES  
Legal Name: SUNSHINE BEHAVIORAL HEALTH LLC  
Address: 35072 CAMINO CAPISTRANO  
City, State Zip: DANA POINT, CA 92624  
Phone: (949) 276-4095 Fax: (949) 429-1845  
**Record ID:** 300311BP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 5/31/2019 IMS: No

**Program Name:** MONARCH SHORES  
Legal Name: SUNSHINE BEHAVIORAL HEALTH LLC  
Address: 1564 SKYLINE DRIVE  
City, State Zip: LAGUNA BEACH, CA 92651  
Phone: (949) 698-2249 Fax: (949) 429-1845  
**Record ID:** 300311CP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 7/31/2019 IMS: No

**Program Name:** MONARCH SHORES  
Legal Name: SUNSHINE BEHAVIORAL HEALTH LLC  
Address: 33762 AVENIDA CALITA  
City, State Zip: SAN JUAN CAPISTRANO, CA 92675  
Phone: (949) 698-2249 Fax: (949) 874-5911  
**Record ID:** 300311DP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 6/30/2019 IMS: No

**Program Name:** MONARCH SHORES  
Legal Name: SUNSHINE BEHAVIORAL HEALTH LLC  
Address: 27123 CALLE ARROYO,  
2121  
City, State Zip: SAN JUAN CAPISTRANO, CA 92675  
Phone: (877) 978-3047  
**Record ID:** 300311EP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 6/30/2018 IMS: No

**Program Name:** MONARCH SHORES  
Legal Name: SUNSHINE BEHAVIORAL HEALTH LLC  
Address: 283 UPLAND DRIVE  
City, State Zip: LAGUNA BEACH, CA 92651  
Phone: (949) 715-9174  
**Record ID:** 300311FP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 6/30/2018 IMS: No

**Program Name:** MONARCH SHORES  
Legal Name: SUNSHINE BEHAVIORAL HEALTH LLC  
Address: 31422 CEANOTHUS DRIVE  
City, State Zip: LAGUNA BEACH, CA 92651  
Phone: (949) 715-1647  
**Record ID:** 300311HP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 6/30/2018 IMS: No

**Program Name:** MONARCH SHORES  
Legal Name: SUNSHINE BEHAVIORAL HEALTH LLC  
Address: 27136 B PASEO ESPADA,  
#1121  
City, State Zip: SAN JUAN CAPISTRANO, CA 92675  
Phone: (877) 978-3047  
**Record ID:** 300311IP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 6/30/2018 IMS: No

**Program Name:** PILLARS RECOVERY, LLC  
Legal Name: PILLARS RECOVERY, LLC  
Address: 304 MARGUERITE AVENUE  
City, State Zip: CORONA DEL MAR, CA 92625  
Phone: (949) 610-9360 Fax: (949) 258-5510  
**Record ID:** 300312AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 2/28/2019 IMS: No

**Program Name:** PILLARS RECOVERY  
Legal Name: PILLARS RECOVERY, LLC  
Address: 28772 TOP OF THE WORLD  
City, State Zip: LAGUNA BEACH, CA 92651  
Phone: (949) 610-9360 Fax: (949) 258-5510  
**Record ID:** 300312BP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 9/30/2019 IMS: No

**Program Name:** PILLARS RECOVERY  
Legal Name: PILLARS RECOVERY, LLC  
Address: 326 OLD NEWPORT BLVD.  
City, State Zip: NEWPORT BEACH, CA 92663  
Phone: (949) 610-9360  
**Record ID:** 300312CP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 1/31/2018 IMS: No

**Program Name:** SOUTH COAST BEHAVIORAL HEALTH GUESTHOUSE, INC.  
Legal Name: SOUTH COAST BEHAVIORAL HEALTH GUESTHOUSE, INC  
Address: 1958 BALEARIC DRIVE  
City, State Zip: COSTA MESA, CA 92626  
Phone: (310) 422-6744 Fax: (310) 422-6744  
**Record ID:** 300313AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 10/31/2017 IMS: No

**Program Name:** SOUTH COAST BEHAVIORAL HEALTH GUESTHOUSE, INC.  
Legal Name: SOUTH COAST BEHAVIORAL HEALTH GUESTHOUSE, INC  
Address: 275 E AST WILSON STREET  
City, State Zip: COSTA MESA, CA 92627  
Phone: (310) 422-6744 Fax: (714) 556-0120  
**Record ID:** 300313BP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 10/31/2017 IMS: No

**Program Name:** ADDICTION HEALTH ALLIANCE, LLC  
Legal Name: ADDICTION HEALTH ALLIANCE, LLC  
Address: 605 AVENIDA LOS FLORES  
City, State Zip: SAN CLEMENTE, CA 92672  
Phone: (513) 280-2714 Fax: (949) 542-3878  
**Record ID:** 300314AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.2  
Expiration Date: 8/31/2019 IMS: No

**Program Name:** BEACHSIDE RECOVERY LLC  
Legal Name: BEACHSIDE RECOVERY LLC  
Address: 24662 SANTA CLARA AVENUE  
City, State Zip: DANA POINT, CA 92629  
Phone: (949) 531-6457 Fax: (949) 475-5567  
**Record ID:** 300315AP  
Service Type: RES-DETOX  
Resident Capacity: 12  
Total Occupancy: 12  
Target Population: 1.1  
Expiration Date: 4/30/2019 IMS: No

**Program Name:** BEACHSIDE RECOVERY LLC  
Legal Name: BEACHSIDE RECOVERY LLC  
Address: 16812 RED HILL AVENUE, SUITE A  
City, State Zip: IRVINE, CA 92606  
Phone: (949) 531-6457 Fax: (949) 475-5567  
**Record ID:** 300315BP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 4/30/2019 IMS: No

**Program Name:** BEACHSIDE RECOVERY LLC  
Legal Name: BEACHSIDE RECOVERY LLC  
Address: 10231 BRIER LANE  
City, State Zip: NORTH TUSTIN, CA 92705-1518  
Phone: (888) 387-5576 Fax: (949) 258-9303  
**Record ID:** 300315CP  
Service Type: RES  
Resident Capacity: 10  
Total Occupancy: 10  
Target Population: 1.1  
Expiration Date: 10/31/2017 IMS: No

**Program Name:** BEACHSIDE RECOVERY LLC  
Legal Name: BEACHSIDE RECOVERY LLC  
Address: 15548 SONORA STREET  
City, State Zip: TUSTIN, CA 92782  
Phone: (888) 387-5576 Fax: (949) 258-9303  
**Record ID:** 300315DP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 10/31/2017 IMS: No

**Program Name:** BEACHSIDE RECOVERY LLC  
Legal Name: BEACHSIDE RECOVERY LLC  
Address: 23671 BRASILIA STREET  
City, State Zip: MISSION VIEJO, CA 92691-3047  
Phone: (888) 387-5576 Fax: (949) 258-9303  
**Record ID:** 300315EP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 10/31/2017 IMS: No

**Program Name:** BEACHSIDE RECOVERY LLC  
Legal Name: BEACHSIDE RECOVERY LLC  
Address: 16490 HARBOR BLVD., SUITES A AND B  
City, State Zip: FOUNTAIN VALLEY, CA 92707  
Phone: (949) 531-6456  
**Record ID:** 300315FP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 7/31/2019 IMS: No

**Program Name:** SO CAL TREATMENT  
Legal Name: TRINA TIMANUS  
Address: 1246 E. TURIN AVENUE  
City, State Zip: ANAHEIM, CA 92805  
Phone: (714) 381-0432  
**Record ID:** 300317AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 8/31/2017 IMS: No

**Program Name:** OCEANFRONT RECOVERY  
Legal Name: OCEANFRONT RECOVERY AT LAGUNA BEACH, LLC  
Address: 900 GLENNEYRE STREET, SUITE T  
City, State Zip: LAGUNA BEACH, CA 92651  
Phone: (414) 614-7244 Fax: (949) 715-7037  
**Record ID:** 300318AP  
Service Type: NON  
Target Population: 1.2  
Expiration Date: 4/30/2019 IMS: No

**Program Name:** OCEANFRONT RECOVERY  
Legal Name: OCEANFRONT RECOVERY AT LAGUNA BEACH, LLC  
Address: 30662 MARILYN DRIVE  
City, State Zip: LAGUNA BEACH, CA 92651  
Phone: (949) 681-5100 Fax: (949) 484-2800  
**Record ID:** 300318BP  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.2  
Expiration Date: 10/31/2017 IMS: No

**Program Name:** OCEANFRONT RECOVERY  
Legal Name: OCEANFRONT RECOVERY AT LAGUNA BEACH, LLC  
Address: 31122 BROOKS STREET  
City, State Zip: LAGUNA BEACH, CA 92651  
Phone: (949) 681-5100 Fax: (949) 484-2800  
**Record ID:** 300318CP  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.2  
Expiration Date: 10/31/2017 IMS: No

**Program Name:** OCEANFRONT RECOVERY  
Legal Name: OCEANFRONT RECOVERY AT LAGUNA BEACH, LLC  
Address: 2575 TEMPLE HILLS DRIVE  
City, State Zip: LAGUNA BEACH, CA 92651  
Phone: (949) 681-5100  
**Record ID:** 300318DP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 11/30/2018 IMS: No

**Program Name:** OCEANFRONT RECOVERY  
Legal Name: OCEANFRONT RECOVERY AT LAGUNA BEACH, LLC  
Address: 431 NYES PL.  
City, State Zip: LAGUNA BEACH, CA 92651  
Phone: (949) 777-4766 Fax: (949) 715-5488  
**Record ID:** 300318EP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 2/28/2019 IMS: No

**Program Name:** HILLSIDE LAGUNA BEACH  
Legal Name: HILLSIDE LAGUNA BEACH LLC  
Address: 2516 TEMPLE HILLS DRIVE  
City, State Zip: LAGUNA BEACH, CA 92651  
Phone: (310) 445-5743 Fax: (949) 261-9999  
**Record ID:** 300319AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 5/31/2019 IMS: No

**Program Name:** ADVANCES IN MENTAL HEALTH AND ADDICTIONS TREATMENT, INC.  
Legal Name: ADVANCES IN MENTAL HEALTH AND ADDICTIONS TREATMENT, INC.  
Address: 18672 FLORIDA STREET, #100  
City, State Zip: HUNTINGTON BEACH, CA 92648  
Phone: (714) 596-6400 Fax: (714) 596-4900  
**Record ID:** 300320AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 9/30/2017 IMS: No

**Program Name:** ORANGE COUNTY RECOVERY  
Legal Name: STEPHEN AND AMBER KNIGHT  
Address: 18632 BEACH BOULEVARD, SUITE 240  
City, State Zip: HUNTINGTON BEACH, CA 92648  
Phone: (714) 418-6053  
**Record ID:** 300321AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 7/31/2017 IMS: No

**Program Name:** BALBOA RECOVERY  
Legal Name: KEVIN CULLEN  
Address: 430 31ST STREET, SUITE B  
City, State Zip: NEWPORT BEACH, CA 92663  
Phone: (949) 400-7120 Fax: (949) 675-3359  
**Record ID:** 300322AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 5/31/2019 IMS: No

**Program Name:** SOUTH SHORES RECOVERY  
Legal Name: SOUTH SHORES DETOX, LLC  
Address: 27568 VISTA DE DONOS  
City, State Zip: DANA POINT, CA 92624  
Phone: (949) 218-2347 Fax: (949) 481-7104  
**Record ID:** 300324AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 8/31/2019 IMS: No

**Program Name:** FIRST LIGHT RECOVERY  
Legal Name: FIRST LIGHT RECOVERY, LLC  
Address: 140 AVENIDA ALGODON, UNIT B & C  
City, State Zip: SAN CLEMENTE, CA 92672  
Phone: (949) 973-0700  
**Record ID:** 300325AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 9/30/2017 IMS: No

**Program Name:** CASA CAPRI  
Legal Name: CASA CAPRI LLC  
Address: 2787 BRISTOL STREET  
SUITE 215  
City, State Zip: COSTA MESA, CA 92626  
Phone: (949) 861-0576 Fax: (877) 820-8959  
**Record ID:** 300326AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 9/30/2017 IMS: No

**Program Name:** CASA CAPRI RECOVERY  
Legal Name: CASA CAPRI LLC  
Address: 15964 MT. JACKSON STREET  
City, State Zip: FOUNTAIN VALLEY, CA 92708  
Phone: (877) 836-8090 Fax: (877) 820-8959  
**Record ID:** 300326BP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.3  
Expiration Date: 6/30/2018 IMS: No

**Program Name:** CASA CAPRI RECOVERY  
Legal Name: CASA CAPRI LLC  
Address: 166 E. 18TH STREET,  
UNITS 1, 2 & 3  
City, State Zip: COSTA MESA, CA 92627  
Phone: (877) 836-8090 Fax: (877) 820-8959  
**Record ID:** 300326CP  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.3  
Expiration Date: 6/30/2018 IMS: No

**Program Name:** CASA CAPRI RECOVERY  
Legal Name: CASA CAPRI LLC  
Address: 10572 MORNING GLORY CIRCLE  
City, State Zip: FOUNTAIN VALLEY, CA 92708  
Phone: (877) 836-8090 Fax: (877) 820-8959  
**Record ID:** 300326DP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.3  
Expiration Date: 6/30/2019 IMS: No

**Program Name:** REFLECTIONS RECOVERY CENTER  
Legal Name: REFLECTIONS RECOVERY LLC  
Address: 17165 NEWHOPE STREET, SUITE M  
City, State Zip: FOUNTAIN VALLEY, CA 92708  
Phone: (714) 708-2950 Fax: (714) 708-2966  
**Record ID:** 300327AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 3/31/2019 IMS: No

**Program Name:** TRES VISTAS RECOVERY  
Legal Name: PAIN RECOVERY MEDICAL GROUP, INC.  
Address: 31642 AVENIDA EVITA  
City, State Zip: SAN JUAN CAPISTRANO, CA 92677  
Phone: (844) 900-0444 Fax: (949) 722-0491  
**Record ID:** 300328AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 8/31/2019 IMS: No

**Program Name:** SOLMAR RETREAT  
Legal Name: HOAG NEUROBEHAVIORAL HEALTH, LLC  
Address: 1 HOAG DRIVE  
City, State Zip: NEWPORT BEACH, CA 92663-4162  
Phone: (949) 764-5656 Fax: (949) 764-8185  
**Record ID:** 300329AP  
Service Type: RES  
Resident Capacity: 21  
Total Occupancy: 21  
Target Population: 1.1  
Expiration Date: 7/31/2017 IMS: No

**Program Name:** AFFINITY RECOVERY  
Legal Name: AFFINITY GROUP LLC  
Address: 31952 PASEO TERRAZA  
City, State Zip: SAN JUAN CAPISTRANO, CA 92675  
Phone: (714) 422-0119 Fax: (888) 276-0605  
**Record ID:** 300330AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 7/31/2019 IMS: Yes

**Program Name:** AFFINITY RECOVERY  
Legal Name: AFFINITY GROUP LLC  
Address: 1911 KINGS ROAD  
City, State Zip: NEWPORT BEACH, CA 92663  
Phone: (949) 321-8151 Fax: (888) 276-0605  
**Record ID:** 300330BP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 9/30/2017 IMS: Yes



**Program Name:** AFFINITY RECOVERY  
Legal Name: AFFINITY GROUP LLC  
Address: 9 STARLIGHT ISLE  
City, State Zip: LADERA RANCH, CA 92694-1467  
Phone: (855) 698-7114 Fax: (888) 276-0605  
**Record ID:** 300330CP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 6/30/2018 IMS: Yes

**Program Name:** COMPASS RECOVERY  
Legal Name: COMPASS RECOVERY, INC.  
Address: 3151 AIRWAY AVENUE, F105-B & K203  
City, State Zip: COSTA MESA, CA 92626  
Phone: (855) 204-7053 Fax: (949) 891-0440  
**Record ID:** 300331AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 7/31/2019 IMS: No

**Program Name:** COMPASS RECOVERY  
Legal Name: COMPASS RECOVERY, INC.  
Address: 9431 ALDERBURY STREET  
City, State Zip: CYPRESS, CA 90630-2855  
Phone: (855) 204-7053 Fax: (949) 891-0440  
**Record ID:** 300331BP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 8/31/2019 IMS: No

**Program Name:** COMPASS RECOVERY  
Legal Name: COMPASS RECOVERY, INC.  
Address: 30891 RIVERA PLACE  
City, State Zip: LAGUNA NIGUEL, CA 92677-2455  
Phone: (855) 204-7053 Fax: (949) 891-0440  
**Record ID:** 300331CP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 11/30/2017 IMS: No

**Program Name:** KOOL LIVING RECOVERY CENTER  
Legal Name: KOOL LIVING, INC.  
Address: 26421 VIA CALIFORNIA AND 26362 VIA CANON  
City, State Zip: CAPISTRANO BEACH, CA 92624  
Phone: (949) 542-4032 Fax: (949) 606-9282  
**Record ID:** 300332AP  
Service Type: RES-DETOX  
Resident Capacity: 12  
Total Occupancy: 12  
Target Population: 1.1  
Expiration Date: 8/31/2019 IMS: No

**Program Name:** KOOL LIVING RECOVERY CENTER  
Legal Name: KOOL LIVING, INC.  
Address: 4014 CALLE BIENVENIDOS  
City, State Zip: SAN CLEMENTE, CA 92672  
Phone: (949) 481-3826 Fax: (747) 202-0622  
**Record ID:** 300332BP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 8/31/2019 IMS: No

**Program Name:** KOOL LIVING RECOVERY CENTER  
Legal Name: KOOL LIVING, INC.  
Address: 440 AVENIDA CRESPI  
City, State Zip: SAN CLEMENTE, CA 92672  
Phone: (818) 671-4294 Fax: (747) 202-0622  
**Record ID:** 300332CP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 10/31/2017 IMS: No

**Program Name:** KOOL LIVING, INC.  
Legal Name: KOOL LIVING, INC.  
Address: 226421 CROWN VALLEY PARKWAY, SUITE 200  
City, State Zip: MISSION VIEJO, CA 95691  
Phone: (951) 427-4807 Fax: (747) 202-0622  
**Record ID:** 300332DP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 6/30/2018 IMS: No

**Program Name:** THE SOBER SPOT RECOVERY CENTER  
Legal Name: SOBER SPOT, LLC, THE  
Address: 25241 PASEO DE ALICIA, SUITE 220  
City, State Zip: LAGUNA HILLS, CA 92653  
Phone: (949) 388-5123 Fax: (949) 441-7165  
**Record ID:** 300333AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 11/30/2017 IMS: No

**Program Name:** WHOLE LIFE RECOVERY  
Legal Name: WHOLE LIFE RECOVERY, LLC  
Address: 32122 CAMINO CAPISTRANO SUITE 100  
City, State Zip: SAN JUAN CAPISTRANO, CA 92675  
Phone: (888) 963-8921  
**Record ID:** 300334AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 9/30/2017 IMS: No

**Program Name:** COASTLINE BREEZE  
Legal Name: COASTLINE BREEZE DETOX REHAB & RECOVERY  
Address: 33952 GRANADA DRIVE  
City, State Zip: DANA POINT, CA 92629  
Phone: (877) 557-9511 Fax: (480) 383-6983  
**Record ID:** 300335AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 10/31/2017 IMS: No

**Program Name:** LUMINANCE HEALTH GROUP, INC.  
Legal Name: LUMINANCE HEALTH GROUP, INC.  
Address: 1804 VIA SAGE  
City, State Zip: SAN CLEMENTE, CA 92672  
Phone: (949) 248-4645  
**Record ID:** 300337AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 8/31/2017 IMS: No

**Program Name:** LUMINANCE HEALTH GROUP, INC.  
Legal Name: LUMINANCE HEALTH GROUP, INC.  
Address: 21 LENNOX COURT  
City, State Zip: LADERA RANCH, CA 92694  
Phone: (310) 303-8325 Fax: (949) 203-8555  
**Record ID:** 300337BP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 3/31/2019 IMS: No

**Program Name:** LUMINANCE HEALTH GROUP, INC.  
Legal Name: LUMINANCE HEALTH GROUP, INC.  
Address: 27686 MANOR HILL  
City, State Zip: LAGUNA NIGUEL, CA 92677  
Phone: (310) 303-8325 Fax: (949) 203-8555  
**Record ID:** 300337CP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 3/31/2019 IMS: No

**Program Name:** LUMINANCE HEALTH GROUP, INC.  
Legal Name: LUMINANCE HEALTH GROUP, INC.  
Address: 29422 CLIPPER WAY  
City, State Zip: LAGUNA NIGUEL, CA 92677  
Phone: (310) 303-8325 Fax: (949) 203-8555  
**Record ID:** 300337DP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 3/31/2019 IMS: No

**Program Name:** LUMINANCE HEALTH GROUP, INC.  
Legal Name: LUMINANCE HEALTH GROUP, INC.  
Address: 24662 EL CAMINO CAPISTRANO  
City, State Zip: DANA POINT, CA 92629  
Phone: (310) 303-8325 Fax: (949) 203-8555  
**Record ID:** 300337EP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 3/31/2019 IMS: No

**Program Name:** LUMINANCE HEALTH GROUP, INC.  
Legal Name: LUMINANCE HEALTH GROUP, INC.  
Address: 27126 B PASEO ESPADA, SUITE 621,622,623  
City, State Zip: SAN JUAN CAPISTRANO, CA 92675  
Phone: (949) 351-0905 Fax: (949) 203-8555  
**Record ID:** 300337HP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 8/31/2019 IMS: No

**Program Name:** SUNRISE RECOVERY CENTER  
Legal Name: WECARE LLC  
Address: 2525 W. WOODLAND DRIVE  
City, State Zip: ANAHEIM, CA 92801  
Phone: (714) 821-1064 Fax: (714) 459-7393  
**Record ID:** 300338AP  
Service Type: NON-DETOX  
Target Population: 1.1  
Expiration Date: 9/30/2019 IMS: No

**Program Name:** CANYON VIEW TREATMENT CENTER  
Legal Name: PULZE RESIDENTIAL CARE GROUP, LLC  
Address: 1001 & 1005 S. MOUNTVALE COURT  
City, State Zip: ANAHEIM, CA 92808  
Phone: (951) 922-5338  
**Record ID:** 300341AP  
Service Type: RES-DETOX  
Resident Capacity: 12  
Total Occupancy: 12  
Target Population: 1.1  
Expiration Date: 10/31/2017 IMS: No

**Program Name:** A BETTER LIFE RECOVERY  
Legal Name: A BETTER LIFE RECOVERY, LLC  
Address: 27126 PASEO ESPADA, SUITES 1621-1623  
City, State Zip: SAN JUAN CAPISTRANO, CA 92675  
Phone: (949) 313-7443 Fax: (949) 579-2876  
**Record ID:** 300342AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 9/30/2017 IMS: No

**Program Name:** A BETTER LIFE RECOVERY  
Legal Name: A BETTER LIFE RECOVERY, LLC  
Address: 26006 CAMPEON  
City, State Zip: LAGUNA NIGUEL, CA 92677  
Phone: (714) 316-4630  
**Record ID:** 300342BP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 8  
Target Population: 1.1  
Expiration Date: 6/30/2019 IMS: No

**Program Name:** A BETTER LIFE RECOVERY  
Legal Name: A BETTER LIFE RECOVERY, LLC  
Address: 24262 SUNNYBROOK CIRCLE  
City, State Zip: LAKE FOREST, CA 92630  
Phone: (714) 316-4630  
**Record ID:** 300342CP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 8  
Target Population: 1.1  
Expiration Date: 6/30/2019 IMS: No

**Program Name:** CASA GLORIOSA  
Legal Name: GLORIOSA MANAGEMENT, LLC  
Address: 25466 GLORIOSA DRIVE  
City, State Zip: MISSION VIEJO, CA 92691  
Phone: (951) 427-4807 Fax: (949) 305-9054  
**Record ID:** 300345AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 10/31/2017 IMS: No

**Program Name:** TURNING POINT TREATMENT CENTER  
Legal Name: TURNING POINT TREATMENT CENTER, INC.  
Address: 28111 SOMERSET  
City, State Zip: MISSION VIEJO, CA 92692  
Phone: (949) 215-3775 Fax: (949) 215-3776  
**Record ID:** 300346AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 7  
Target Population: 1.1  
Expiration Date: 9/30/2017 IMS: No

**Program Name:** TURNING POINT TREATMENT CENTER  
Legal Name: TURNING POINT TREATMENT CENTER, INC.  
Address: 24851 VIA SANTA CRUZ  
City, State Zip: MISSION VIEJO, CA 92692  
Phone: (949) 215-0360 Fax: (949) 215-0465  
**Record ID:** 300346BP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 6/30/2019 IMS: No

**Program Name:** FRESH START OF CALIFORNIA  
Legal Name: FRESH START OF CALIFORNIA, LLC  
Address: 1210 N ROSS STREET  
City, State Zip: SANTA ANA, CA 92701  
Phone: (323) 419-7384  
**Record ID:** 300349AP  
Service Type: RES-DETOX  
Resident Capacity: 8  
Total Occupancy: 10  
Target Population: 1.1  
Expiration Date: 4/30/2018 IMS: No

**Program Name:** SHEER RECOVERY SERVICES  
Legal Name: SHEER RECOVERY, LLC  
Address: 32371 CARIBBEAN DRIVE  
City, State Zip: DANA POINT, CA 92629-3533  
Phone: (714) 658-3773 Fax: (949) 441-7165  
**Record ID:** 300350AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 4/30/2018 IMS: No

**Program Name:** SHEER RECOVERY SERVICES  
Legal Name: SHEER RECOVERY, LLC  
Address: 27130 PASEO ESPADA, SUITE A1422, A1423 & A1424  
City, State Zip: SAN JUAN CAPISTRANO, CA 92675-6712  
Phone: (714) 658-3773 Fax: (949) 441-7165  
**Record ID:** 300350BP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 4/30/2018 IMS: No

**Program Name:** SHEER RECOVERY  
Legal Name: SHEER RECOVERY, LLC  
Address: 24621 AQUILLA DRIVE  
City, State Zip: DANA POINT, CA 92629-1042  
Phone: (714) 658-3773 Fax: (949) 441-7165  
**Record ID:** 300350CP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 10/31/2018 IMS: No

**Program Name:** TRUVIDA RECOVERY  
Legal Name: CREST RECOVERY, LLC  
Address: 29522 VIA VALVERDE  
City, State Zip: LAGUNA NIGUEL, CA 92677  
Phone: (949) 283-4679  
**Record ID:** 300351AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 3/31/2018 IMS: No

**Program Name:** TRUVIDA WELLNESS  
Legal Name: CREST RECOVERY, LLC  
Address: 23726 BIRTCHEER DRIVE  
City, State Zip: LAKE FOREST, CA 92630  
Phone: (949) 283-4679  
**Record ID:** 300351BP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 6/30/2019 IMS: No

**Program Name:** SOUTH SHORES DETOX  
Legal Name: SOUTH SHORES DETOX,LLC  
Address: 32851 BUCCANEER STREET  
City, State Zip: DANA POINT, CA 92629  
Phone: (949) 388-4019  
**Record ID:** 300352AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 4/30/2018 IMS: No

**Program Name:** SURVIVORS LLC  
Legal Name: SURVIVORS LLC  
Address: 2082 SE BRISTOL STREET, SUITE 200  
City, State Zip: NEWPORT BEACH, CA 92660  
Phone: (957) 256-7698  
**Record ID:** 300354AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 3/31/2018 IMS: No

**Program Name:** FIRST CHOICE DETOX  
Legal Name: PACIFIC VIEW DETOX LLC  
Address: 26411 CHAPARRAL PLACE  
City, State Zip: LAGUNA HILLS, CA 92653  
Phone: (949) 207-8601 Fax: (949) 207-8601  
**Record ID:** 300355AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 8/31/2018 IMS: No

**Program Name:** ADDICTION CENTER FOR HEALING  
Legal Name: ADDICTION CENTER FOR HEALING  
Address: 6 HUGHES  
SUITE 130  
City, State Zip: IRVINE, CA 92618  
Phone: (949) 400-5852  
**Record ID:** 300357AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 5/31/2018 IMS: No

**Program Name:** DUCK HOUSE TREATMENT & RECOVERY  
Legal Name: DUCK HOUSE, LLC, THE  
Address: 952 DAHLIA AVENUE  
City, State Zip: COSTA MESA, CA 92626  
Phone: (657) 266-0623 Fax: (714) 852-5643  
**Record ID:** 300358AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 1/31/2019 IMS: No

**Program Name:** CAPO CANYON RECOVERY  
Legal Name: CAPO CANYON RECOVERY, LLC  
Address: 23822 STILLWATER LANE  
City, State Zip: LAGUNA NIGUEL, CA 92677  
Phone: (800) 804-8714 Fax: (949) 284-8040  
**Record ID:** 300359AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 10/31/2018 IMS: Yes

**Program Name:** 417 RECOVERY  
Legal Name: 417 SAN CLEMENTE, LLC.  
Address: 26010 ACERO,  
SUITE 200  
City, State Zip: MISSION VIEJO, CA 92691  
Phone: (949) 353-5017 Fax: (949) 356-6443  
**Record ID:** 300360AP  
Service Type: NON  
Target Population: 1.7  
Expiration Date: 12/31/2018 IMS: No

**Program Name:** LAGUNA DETOX  
Legal Name: JAWB, LLC.  
Address: 226 CLIFF DRIVE  
City, State Zip: LAGUNA BEACH, CA 92651  
Phone: (310) 946-8143  
**Record ID:** 300361AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 11/30/2018 IMS: No

**Program Name:** LAGUNA DETOX  
Legal Name: JAWB, LLC.  
Address: 224 CLIFF DRIVE  
City, State Zip: LAGUNA BEACH, CA 92651  
Phone: (310) 946-8143  
**Record ID:** 300361BP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 11/30/2018 IMS: No

**Program Name:** OCEAN GROUP, LLC  
Legal Name: OCEAN GROUP, LLC  
Address: 2305 TEMPLE HILLS DR.  
City, State Zip: LAGUNA BEACH, CA 92651  
Phone: (619) 871-7345  
**Record ID:** 300363AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.8  
Expiration Date: 4/30/2019 IMS: No

**Program Name:** ASPIRE RECOVERY INC.  
Legal Name: ASPIRE RECOVERY INC.  
Address: 16390 PACIFIC COAST HIGHWAY SUITE 200  
City, State Zip: HUNTINGTON BEACH, CA 92649  
Phone: (800) 467-4106 Fax: (855) 806-9448  
**Record ID:** 300364AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 12/31/2018 IMS: No

**Program Name:** CALIFORNIA PRIME RECOVERY  
Legal Name: CALIFORNIA PRIME RECOVERY SERVICES INC  
Address: 17330 NEWHOPE STREET  
SUITE A  
City, State Zip: FOUNTAIN VALLEY, CA 92708  
Phone: (949) 510-3358  
**Record ID:** 300365AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 12/31/2018 IMS: No

**Program Name:** PROTOTYPES' MOTHER AND CHILD RESIDENTIAL HOMES AT THE TUSTIN FAMILY CAMPUS  
Legal Name: HEALTHRIGHT 360  
Address: 15405 LANSLOWNE ROAD  
City, State Zip: TUSTIN, CA 92782  
Phone: (714) 566-8433 Fax: (714) 566-8433  
**Record ID:** 300366AN  
Service Type: RES  
Resident Capacity: 15  
Total Occupancy: 49  
Target Population: 1.4  
Expiration Date: 2/28/2019 IMS: No

**Program Name:** STAR DETOX CENTER  
Legal Name: SUBSTANCE TREATMENT ADDICTION RECOVERY DETOX CENTER  
Address: 1822 SOUTH BAYLESS STREET  
City, State Zip: ANAHEIM, CA 92802  
Phone: (844) 557-6237 Fax: (657) 699-3127  
**Record ID:** 300367AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.2  
Expiration Date: 1/31/2019 IMS: Yes

**Program Name:** HEALING PATH DETOX  
Legal Name: HEALING PATH DETOX LLC  
Address: 7661 AMBERLEAF CIRCLE (UNIT 1, 2, 3 AND 4)  
City, State Zip: HUNTINGTON BEACH, CA 92648  
Phone: (657) 329-0369  
**Record ID:** 300368AP  
Service Type: RES-DETOX  
Resident Capacity: 14  
Total Occupancy: 14  
Target Population: 1.1  
Expiration Date: 5/31/2019 IMS: No

**Program Name:** WAVELENGTHS RECOVERY, LLC  
Legal Name: WAVELENGTHS RECOVERY, LLC  
Address: 701 HUNTINGTON STREET  
City, State Zip: HUNTINGTON BEACH, CA 92648  
Phone: (714) 442-6668 Fax: (714) 442-2354  
**Record ID:** 300369AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 6/30/2019 IMS: No

**Program Name:** WAVELENGTHS RECOVERY, LLC  
Legal Name: WAVELENGTHS RECOVERY, LLC  
Address: 301 MAIN STREET, STE. 201  
City, State Zip: HUNTINGTON BEACH, CA 92648  
Phone: (714) 312-1011 Fax: (714) 442-2354  
**Record ID:** 300369BP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 5/31/2018 IMS: No



**Program Name:** WAVELENGTHS RECOVERY, LLC  
Legal Name: WAVELENGTHS RECOVERY, LLC  
Address: 101 HUNTINGTON STREET  
City, State Zip: HUNTINGTON BEACH, CA 92648  
Phone: (714) 312-1011 Fax: (714) 442-2354  
**Record ID:** 300369CP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 5/31/2019 IMS: No

**Program Name:** WAVELENGTHS RECOVERY, LLC  
Legal Name: WAVELENGTHS RECOVERY, LLC  
Address: 7761 GARFIELD AVENUE, UNIT 101  
City, State Zip: HUNTINGTON BEACH, CA 92648  
Phone: (714) 375-1178 Fax: (714) 442-2354  
**Record ID:** 300369DP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 6/30/2019 IMS: No

**Program Name:** WAVELENGTHS RECOVERY, LLC  
Legal Name: WAVELENGTHS RECOVERY, LLC  
Address: 7761 GARFIELD AVENUE, UNIT 2  
City, State Zip: HUNTINGTON BEACH, CA 92648  
Phone: (714) 312-1011 Fax: (714) 442-2354  
**Record ID:** 300369EP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 6/30/2019 IMS: No

**Program Name:** RISE AGAIN RECOVERY  
Legal Name: RISE AGAIN RECOVERY  
Address: 20932 BROOKHURST STREET, SUITE 101  
City, State Zip: HUNTINGTON BEACH, CA 92646  
Phone: (714) 907-1105  
**Record ID:** 300370AP  
Service Type: NON  
Target Population: 1.8  
Expiration Date: 2/28/2019 IMS: No

**Program Name:** STONERIVER GROUP  
Legal Name: STONERIVER GROUP, LLC  
Address: 140 AVENIDA ALGODON, UNIT A  
City, State Zip: SAN CLEMENTE, CA 92672  
Phone: (949) 542-8810  
**Record ID:** 300371AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.13  
Expiration Date: 6/30/2019 IMS: No

**Program Name:** SOUTHERN CALIFORNIA SUNRISE RECOVERY CENTER  
Legal Name: SOUTHERN CALIFORNIA SUNRISE RECOVERY CENTER, LLC  
Address: 30471 VIA ALCAZAR  
City, State Zip: LAGUNA NIGUEL, CA 92677  
Phone: (714) 232-0649 Fax: (714) 252-0173  
**Record ID:** 300373AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.13  
Expiration Date: 12/31/2018 IMS: No

**Program Name:** SOUTHERN CALIFORNIA SUNRISE RECOVERY CENTER, LLC  
Legal Name: SOUTHERN CALIFORNIA SUNRISE RECOVERY CENTER, LLC  
Address: 25681 SABINA AVE  
City, State Zip: MISSION VIEJO, CA 92691  
Phone: (714) 232-0649 Fax: (714) 252-0173  
**Record ID:** 300373BP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 5/31/2019 IMS: No

**Program Name:** SOUTHERN CALIFORNIA SUNRISE RECOVERY CENTER, LLC  
Legal Name: SOUTHERN CALIFORNIA SUNRISE RECOVERY CENTER, LLC  
Address: 24522 VANESSA DRIVE  
City, State Zip: MISSION VIEJO, CA 92691  
Phone: (714) 232-0649 Fax: (714) 252-0173  
**Record ID:** 300373DP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 7/31/2019 IMS: No

**Program Name:** TRUE RECOVERY  
Legal Name: TRUE RECOVERY INC.  
Address: 20351 SW ACACIA STREET, FL 2  
City, State Zip: NEWPORT BEACH, CA 92660  
Phone: (844) 744-8783 Fax: (714) 551-9339  
**Record ID:** 300376AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 6/30/2019 IMS: No

**Program Name:** DESTINY RECOVERY CENTER, LLC  
Legal Name: DESTINY RECOVERY CENTER, LLC  
Address: 23041 AVENIDA DE LA CARLOTA, SUITE 280  
City, State Zip: LAGUNA HILLS, CA 92653  
Phone: (310) 738-0008  
**Record ID:** 300377AP  
Service Type: NON-DETOX  
Target Population: 1.5  
Expiration Date: 2/28/2019 IMS: No

**Program Name:** R AND R RECOVERY  
Legal Name: R AND R RECOVERY  
Address: 4952 WARNER AVE, SUITE 100  
City, State Zip: HUNTINGTON BEACH, CA 92649  
Phone: (949) 307-6660  
**Record ID:** 300379AP  
Service Type: NON  
Target Population: 1.7  
Expiration Date: 2/28/2019 IMS: No

**Program Name:** SOLACE HILLS RECOVERY CENTER  
Legal Name: CORRAL MANAGEMENT, LLC  
Address: 20641 RED CORRAL ROAD  
City, State Zip: LAGUNA HILLS, CA 92653  
Phone: (714) 325-1950  
**Record ID:** 300381AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 2/28/2019 IMS: No

**Program Name:** CLEAR LIFE RECOVERY  
Legal Name: KKB HEALTH SOLUTIONS, LLC  
Address: 4120 BIRCH STREET, SUITE 121  
City, State Zip: NEWPORT BEACH, CA 92660  
Phone: (941) 883-1945 Fax: (949) 398-8469  
**Record ID:** 300382AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 6/30/2019 IMS: No

**Program Name:** NEW EXISTENCE  
Legal Name: NEW EXISTENCE, LLC  
Address: 17050 BUSHARD STREET, SUITE 200  
City, State Zip: FOUNTAIN VALLEY, CA 92708  
Phone: (714) 375-6626 Fax: (866) 991-3182  
**Record ID:** 300384AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 2/28/2019 IMS: No

**Program Name:** NOVATION  
Legal Name: NOVATION BEHAVIORAL HEALTH, LLC  
Address: 1707 EAST BAY AVENUE  
City, State Zip: NEWPORT BEACH, CA 92661  
Phone: (949) 734-9571 Fax: (888) 411-8786  
**Record ID:** 300385AP  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 3/31/2019 IMS: No

**Program Name:** ANCHORED TIDES RECOVERY  
Legal Name: ANCHORED TIDES RECOVERY  
Address: 19126 MAGNOLIA STREET, SUITE 101,  
City, State Zip: HUNTINGTON BEACH, CA 92646  
Phone: (714) 377-7706 Fax: (714) 377-7715  
**Record ID:** 300386AP  
Service Type: NON  
Target Population: 1.7  
Expiration Date: 6/30/2019 IMS: No

**Program Name:** MAINSTAY RECOVERY  
Legal Name: MAINSTAY RECOVERY, LLC  
Address: 2790 HARBOR BLVD, SUITE 208  
City, State Zip: COSTA MESA, CA 92625  
Phone: (417) 343-2426  
**Record ID:** 300387AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 5/31/2019 IMS: No

**Program Name:** CALIFORNIA ADDICTION INSTITUTE OF MIND AND MEDICINE  
Legal Name: AMERICAN ADDICTION INSTITUTE OF MIND AND MEDICINE  
Address: 17662 IRVINE BLVD, SUITE 10  
City, State Zip: TUSTIN, CA 92780  
Phone: (949) 929-6203  
**Record ID:** 300388AN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 6/30/2019 IMS: No

**Program Name:** DBT CENTER OF ORANGE COUNTY  
**Legal Name:** MICHELE S LOB, LICENSED MARRIAGE AND FAMILY THERAPY,  
A PROFESSIONAL CORPORATION  
**Address:** 4299 MACARTHUR BOULEVARD, #200  
**City, State Zip:** NEWPORT BEACH, CA 92660  
**Phone:** (949) 480-7767 **Fax:** (949) 209-1977  
**Record ID:** 300625AP  
**Service Type:** NON  
**Target Population:** 1.1  
**Expiration Date:** 4/30/2018 **IMS:** No

**Program Name:** BEGINNINGS  
**Legal Name:** ELITE CARE, INC.  
**Address:** 1991 ANAHEIM AVENUE,  
UNIT B  
**City, State Zip:** COSTA MESA, CA 92627  
**Phone:** (949) 954-6135  
**Record ID:** 300626AP  
**Service Type:** RES-DETOX  
**Resident Capacity:** 6  
**Total Occupancy:** 6  
**Target Population:** 1.1  
**Expiration Date:** 4/30/2018 **IMS:** No

**Program Name:** BEGINNINGS  
**Legal Name:** ELITE CARE, INC.  
**Address:** 1991 ANAHEIM AVENUE,  
UNIT A  
**City, State Zip:** COSTA MESA, CA 92627  
**Phone:** (888) 511-0607  
**Record ID:** 300626BP  
**Service Type:** RES-DETOX  
**Resident Capacity:** 6  
**Total Occupancy:** 6  
**Target Population:** 1.1  
**Expiration Date:** 4/30/2018 **IMS:** No

**Program Name:** BEGINNINGS  
**Legal Name:** ELITE CARE, INC.  
**Address:** 1991 ANAHEIM AVENUE,  
UNIT C  
**City, State Zip:** COSTA MESA, CA 92627  
**Phone:** (949) 397-2250  
**Record ID:** 300626CP  
**Service Type:** RES-DETOX  
**Resident Capacity:** 6  
**Total Occupancy:** 6  
**Target Population:** 1.1  
**Expiration Date:** 4/30/2018 **IMS:** No

**Program Name:** STILL WATERS RECOVERY CENTER, INC.  
**Legal Name:** STILL WATERS RECOVERY CENTER, INC.  
**Address:** 20422 BEACH BOULEVARD, SUITE 235  
**City, State Zip:** HUNTINGTON BEACH, CA 92648  
**Phone:** (714) 202-9818 **Fax:** (714) 242-1363  
**Record ID:** 300627AP  
**Service Type:** NON  
**Target Population:** 1.3  
**Expiration Date:** 2/28/2018 **IMS:** No

**Program Name:** LOTUS PLACE RECOVERY  
**Legal Name:** LOTUS PLACE RECOVERY, LLC  
**Address:** 16480 HARBOR BOULEVARD, SUITE 200  
**City, State Zip:** FOUNTAIN VALLEY, CA 92708  
**Phone:** (714) 884-4408 **Fax:** (714) 617-4125  
**Record ID:** 300628AP  
**Service Type:** NON  
**Target Population:** 1.1  
**Expiration Date:** 12/31/2017 **IMS:** No

**Program Name:** HALO HOUSE  
Legal Name: HALO HEALTH SERVICES, INC.  
Address: 2421 TUSTIN AVENUE  
City, State Zip: COSTA MESA, CA 92627  
Phone: (949) 307-3216  
**Record ID:** 300629AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 9/30/2018 IMS: No

**Program Name:** COASTLINE RECOVERY  
Legal Name: COASTLINE RECOVERY, LLC  
Address: 2102 BUSINESS CENTER DRIVE, SUITE 121  
City, State Zip: IRVINE, CA 92612  
Phone: (800) 712-9635  
**Record ID:** 300630AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 2/28/2018 IMS: No

**Program Name:** COASTLINE BEHAVIORAL HEALTH  
Legal Name: COASTLINE RECOVERY, LLC  
Address: 18377 BEACH BOULEVARD,  
209/210  
City, State Zip: HUNTINGTON BEACH, CA 92648  
Phone: (800) 712-9638 Fax: (714) 388-3844  
**Record ID:** 300630BP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 10/31/2018 IMS: No

**Program Name:** TRUE LIFE RECOVERY  
Legal Name: TRUE LIFE RECOVERY, INC.  
Address: 16832 MAPLE STREET  
City, State Zip: FOUNTAIN VALLEY, CA 92708  
Phone: (714) 351-7800  
**Record ID:** 300631AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.2  
Expiration Date: 6/30/2018 IMS: No

**Program Name:** THE HOUSE OF THE RISING SON, LLC  
Legal Name: THE HOUSE OF THE RISING SON, LLC  
Address: 147 EL LEVANTE  
City, State Zip: SAN CLEMENTE, CA 92672  
Phone: (503) 793-8919 Fax: (949) 606-8518  
**Record ID:** 300633AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 9/30/2018 IMS: No

**Program Name:** NATIONWIDE RECOVERY CENTERS  
Legal Name: NATIONWIDE RECOVERY CENTERS, LLC  
Address: 22602 COSTA BELLA  
City, State Zip: LAKE FOREST, CA 92630  
Phone: (949) 606-5742 Fax: (949) 525-4321  
**Record ID:** 300634AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 5/31/2018 IMS: No

**Program Name:** LEAD RECOVERY CENTER  
Legal Name: HIRED POWER TRANSITIONAL LIVING CENTER, LLC  
Address: 3151 AIRWAY AVENUE, F107  
City, State Zip: COSTA MESA, CA 92626-4607  
Phone: (800) 910-9299 Fax: (888) 870-3174  
**Record ID:** 300635AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 3/31/2018 IMS: No

**Program Name:** LEAD RECOVERY CENTER  
Legal Name: HIRED POWER TRANSITIONAL LIVING CENTER, LLC  
Address: 1897 ORANGE AVE., UNIT B  
City, State Zip: COSTA MESA, CA 92627  
Phone: (800) 380-0012 Fax: (888) 870-3174  
**Record ID:** 300635BP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.2  
Expiration Date: 6/30/2019 IMS: No

**Program Name:** PACIFIC SOLSTICE  
Legal Name: PACIFIC SOLSTICE, LLC  
Address: 23461 SOUTH POINTE DRIVE, SUITE 340  
City, State Zip: LAGUNA HILLS, CA 92653  
Phone: (949) 701-0221  
**Record ID:** 300636AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 3/31/2018 IMS: No

**Program Name:** SHANTI RECOVERY SERVICES  
Legal Name: SHANTI RECOVERY SERVICES, INC.  
Address: 31211 CASA GRANDE DRIVE  
City, State Zip: SAN JUAN CAPISTRANO, CA 92675  
Phone: (949) 294-5104  
**Record ID:** 300637AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 5/31/2018 IMS: No

**Program Name:** BROADWAY DETOX CENTER  
Legal Name: BROADWAY DETOX CENTER, LLC  
Address: 6021 JADE CIRCLE  
City, State Zip: HUNTINGTON BEACH, CA 92647  
Phone: (657) 227-3532  
**Record ID:** 300638AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 2/28/2018 IMS: No

**Program Name:** MISSION TREATMENT & RECOVERY  
Legal Name: PEPPERTREE MANAGEMENT, LLC  
Address: 25352 HILLARY LANE  
City, State Zip: LAGUNA HILLS, CA 92653  
Phone: (949) 652-5351  
**Record ID:** 300639AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 4/30/2018 IMS: No

**Program Name:** SUSTAIN RECOVERY  
Legal Name: OCTLC, INC.  
Address: 125 SOUTH CHAPARRAL COURT, SUITE 200  
City, State Zip: ANAHEIM, CA 92808  
Phone: (714) 376-5889 Fax: (675) 236-4152  
**Record ID:** 300640AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 2/28/2018 IMS: No

**Program Name:** ADVANCED RECOVERY SOLUTION  
Legal Name: ADVANCED RECOVERY SOLUTION, LLC.  
Address: 3744 N. HERMOSA PLACE  
City, State Zip: FULLERTON, CA 92835  
Phone: (951) 212-0439  
**Record ID:** 300641BP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 11/30/2018 IMS: No

**Program Name:** NEW LIFE TREATMENT CENTER  
Legal Name: NEW LIFE TREATMENT CENTER, INC.  
Address: 598 PIERPOINT DRIVE  
City, State Zip: COSTA MESA, CA 92626  
Phone: (657) 267-0219  
**Record ID:** 300642AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 7/31/2018 IMS: No

**Program Name:** NEW LIFE TREATMENT CENTER  
Legal Name: NEW LIFE TREATMENT CENTER, INC.  
Address: 1940 WEST ORANGEWOOD AVENUE,  
#205  
City, State Zip: ORANGE, CA 92868  
Phone: (626) 644-0070  
**Record ID:** 300642BP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 7/31/2018 IMS: No

**Program Name:** NEW LIFE TREATMENT CENTER  
Legal Name: NEW LIFE TREATMENT CENTER, INC.  
Address: 1764 NORTH MORNINGSIDE STREET  
City, State Zip: ORANGE, CA 92867  
Phone: (626) 644-0070  
**Record ID:** 300642CP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 7/31/2018 IMS: No

**Program Name:** MILESTONE DETOX  
Legal Name: MILESTONE DETOX, LLC  
Address: 31981 CALLE WINONA  
City, State Zip: SAN JUAN CAPISTRANO, CA 92675  
Phone: (949) 344-8149  
**Record ID:** 300646AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 6/30/2018 IMS: No

**Program Name:** AKUA MIND & BODY  
Legal Name: AKUA BEHAVIORAL HEALTH, INC.  
Address: 326 UNIVERSITY DRIVE  
City, State Zip: COSTA MESA, CA 92627  
Phone: (949) 279-1376  
**Record ID:** 300647AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.2  
Expiration Date: 5/31/2018 IMS: No

**Program Name:** AKUA MIND & BODY  
Legal Name: AKUA BEHAVIORAL HEALTH, INC.  
Address: 328 UNIVERSITY DRIVE  
City, State Zip: COSTA MESA, CA 92627  
Phone: (949) 279-1376  
**Record ID:** 300647BP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.3  
Expiration Date: 5/31/2018 IMS: No

**Program Name:** REALIGN DETOX & RESIDENTIAL TREATMENT CENTER  
Legal Name: REALIGN DETOX, LLC  
Address: 29552 CROWN CREEK  
City, State Zip: LAGUNA NIGUEL, CA 92677-3951  
Phone: (714) 232-0649 Fax: (714) 821-1084  
**Record ID:** 300648AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 6/30/2018 IMS: No

**Program Name:** ALTUS TREATMENT SERVICES  
Legal Name: ALTUS TREATMENT CENTRAL, LLC  
Address: 145 COLUMBIA,  
SUITE 200  
City, State Zip: ALISO VIEJO, CA 92656  
Phone: (949) 521-6138  
**Record ID:** 300650AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 5/31/2018 IMS: No

**Program Name:** ALTUS TREATMENT SERVICES  
Legal Name: ALTUS TREATMENT CENTRAL, LLC  
Address: 25542 RHODA DRIVE  
City, State Zip: MISSION VIEJO, CA 92691  
Phone: (949) 521-6138 Fax: (949) 521-7926  
**Record ID:** 300650BP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.2  
Expiration Date: 10/31/2018 IMS: No

**Program Name:** ALTUS TREATMENT SERVICES  
Legal Name: ALTUS TREATMENT CENTRAL, LLC  
Address: 24072 CASTILLA LANE  
City, State Zip: MISSION VIEJO, CA 92691  
Phone: (949) 521-6138 Fax: (949) 521-7926  
**Record ID:** 300650CP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.3  
Expiration Date: 10/31/2018 IMS: No



**Program Name:** ALTUS TREATMENT SERVICES  
Legal Name: ALTUS TREATMENT CENTRAL, LLC  
Address: 24102 LARKWOOD  
City, State Zip: LAKE FOREST, CA 92630  
Phone: (949) 521-6138  
**Record ID:** 300650DP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.2  
Expiration Date: 10/31/2018 IMS: No

**Program Name:** EPIC VICTORY, INC.  
Legal Name: EPIC VICTORY, INC.  
Address: 23547 MOULTON PARKWAY,  
201A & 201B  
City, State Zip: LAGUNA HILLS, CA 92653  
Phone: (949) 415-9217 Fax: (949) 583-1516  
**Record ID:** 300651AP  
Service Type: NON-DETOX  
Target Population: 1.1  
Expiration Date: 8/31/2018 IMS: No

**Program Name:** 12 SOUTH RECOVERY  
Legal Name: 12 SOUTH, LLC  
Address: 27285 LAS RAMBLAS,  
#147  
City, State Zip: MISSION VIEJO, CA 92691  
Phone: (949) 338-2275  
**Record ID:** 300653AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 5/31/2018 IMS: No

**Program Name:** BEACH CITY TREATMENT  
Legal Name: BEACH CITY TREATMENT, LLC  
Address: 421 11TH STREET  
City, State Zip: HUNTINGTON BEACH, CA 92648  
Phone: (714) 726-8652  
**Record ID:** 300654AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 6/30/2018 IMS: No

**Program Name:** BEACH CITY TREATMENT  
Legal Name: BEACH CITY TREATMENT, LLC  
Address: 30461 PUERTO VALLARTA  
City, State Zip: LAGUNA NIGUEL, CA 92677  
Phone: (714) 726-8652  
**Record ID:** 300654BP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 6/30/2018 IMS: No

**Program Name:** FRESH START RECOVERY SERVICES  
Legal Name: FRESH START, LLC  
Address: 2790 HARBOR BOULEVARD,  
SUITE 307 & 309  
City, State Zip: COSTA MESA, CA 92627  
Phone: (949) 295-2888  
**Record ID:** 300655AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 6/30/2018 IMS: No

**Program Name:** BRIDGES TO LIFE DETOX  
Legal Name: DAMASCUS ROAD, LLC  
Address: 1313 NORTH BROOKHURST STREET  
City, State Zip: ANAHEIM, CA 92801  
Phone: (714) 232-0649 Fax: (714) 252-0173  
**Record ID:** 300656AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 7/31/2018 IMS: No

**Program Name:** GUARDIAN HEALTH CARE  
Legal Name: GUARDIAN HEALTH CARE SERVICES, INC.  
Address: 1055 CHEYENNE STREET  
City, State Zip: COSTA MESA, CA 92626  
Phone: (657) 245-3991  
**Record ID:** 300658AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 10/31/2018 IMS: No

**Program Name:** GUARDIAN HEALTH CARE  
Legal Name: GUARDIAN HEALTH CARE SERVICES, INC.  
Address: 2534 SOUTH DEEGAN DRIVE  
City, State Zip: SANTA ANA, CA 92704  
Phone: (714) 852-3074  
**Record ID:** 300658BP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 10/31/2018 IMS: No

**Program Name:** RISING ROADS RECOVERY SERVICES FOR WOMEN, LLC  
Legal Name: RISING ROADS RECOVERY SERVICES FOR WOMEN, LLC  
Address: 10905 EL DOMINO AVENUE  
City, State Zip: FOUNTAIN VALLEY, CA 92708  
Phone: (714) 673-9007  
**Record ID:** 300659AP  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.3  
Expiration Date: 7/31/2018 IMS: No

**Program Name:** LANDMARK RECOVERY CENTER  
Legal Name: LANDMARK RECOVERY LLC.  
Address: 23265 SOUTH POINTE DRIVE,  
101  
City, State Zip: LAGUNA HILLS, CA 92653  
Phone: (888) 792-9170 Fax: (888) 792-2681  
**Record ID:** 300660AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 10/31/2018 IMS: No

**Program Name:** THE WELL RECOVERY PARTNERS  
Legal Name: THE WELL RECOVERY PARTNERS  
Address: 5282 CORNELL AVENUE  
City, State Zip: WESTMINSTER, CA 92683  
Phone: (714) 316-8100  
**Record ID:** 300662AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 10/31/2018 IMS: No

**Program Name:** THE WELL RECOVERY PARTNERS  
Legal Name: THE WELL RECOVERY PARTNERS  
Address: 603 LAKE STREET  
City, State Zip: HUNTINGTON BEACH, CA 92648  
Phone: (714) 316-8100  
**Record ID:** 300662BP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 7/31/2019 IMS: No

**Program Name:** PURE PATH RECOVERY  
Legal Name: PURE PATH RECOVERY LLC  
Address: 51 SORBONNE STREET  
City, State Zip: WESTMINSTER, CA 92683  
Phone: (949) 375-0070  
**Record ID:** 300663AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.3  
Expiration Date: 8/31/2018 IMS: No

**Program Name:** SAFE AND SOUND TREATMENT, LLC  
Legal Name: SAFE AND SOUND TREATMENT, LLC  
Address: 799 W 19TH STREET,  
UNIT G  
City, State Zip: COSTA MESA, CA 92627  
Phone: (714) 454-7502  
**Record ID:** 300666AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 10/31/2018 IMS: No

**Program Name:** SATORI RECOVERY CENTER  
Legal Name: SATORI RECOVERY CENTER, LLC  
Address: 2760 PARK AVENUE  
City, State Zip: LAGUNA BEACH, CA 92651  
Phone: (626) 825-8805  
**Record ID:** 300667AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 9/30/2018 IMS: No

**Program Name:** SATORI RECOVERY CENTER  
Legal Name: SATORI RECOVERY CENTER, LLC  
Address: 26142 BUENA VISTA COURT  
City, State Zip: LAGUNA HILLS, CA 92653  
Phone: (626) 825-8805  
**Record ID:** 300667BP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 3/31/2019 IMS: No

**Program Name:** NARCONON HUNTINGTON HARBOR HOUSE  
Legal Name: NARCONON FRESH START  
Address: 17123 ROUNDHILL DRIVE  
City, State Zip: HUNTINGTON BEACH, CA 92649  
Phone: (949) 675-8988 Fax: (888) 680-2730  
**Record ID:** 300668AN  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 10  
Target Population: 1.1  
Expiration Date: 8/31/2018 IMS: No

**Program Name:** THE EDGE, LLC  
Legal Name: THE EDGE, LLC  
Address: 26060 ACERO  
SUITE 124  
City, State Zip: MISSION VIEJO, CA 92691  
Phone: (949) 340-7762  
**Record ID:** 300669AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 9/30/2018 IMS: No

State of California, Department of Health Care Services  
Licensed Residential Facilities and/or  
Certified Alcohol and Drug Programs

As of 9/1/2017

Placer County

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**Program Name:** PLACER COUNTY ALCOHOL AND OTHER DRUG TREATMENT PROGRAM  
**Legal Name:** COUNTY OF PLACER, DEPARTMENT OF HEALTH & HUMAN SERVICES,  
ADULT SYSTEM OF CARE  
**Address:** 101 CIRBY HILLS DRIVE  
**City, State Zip:** ROSEVILLE, CA 95678  
**Phone:** (916) 787-8800 **Fax:** (916) 787-8857  
**Record ID:** 310002AN  
**Service Type:** NON  
**Target Population:** 1.1  
**Expiration Date:** 9/30/2017 **IMS:** No

**Program Name:** PLACER COUNTY ALCOHOL AND OTHER DRUG TREATMENT PROGRAM  
**Legal Name:** COUNTY OF PLACER, DEPARTMENT OF HEALTH & HUMAN SERVICES,  
ADULT SYSTEM OF CARE  
**Address:** 11512 B AVENUE  
**City, State Zip:** AUBURN, CA 95603  
**Phone:** (530) 889-7240 **Fax:** (530) 889-7293  
**Record ID:** 310002BN  
**Service Type:** NON  
**Target Population:** 1.8  
**Expiration Date:** 11/30/2017 **IMS:** No

**Program Name:** NEW LEAF COUNSELING SERVICES  
**Legal Name:** JAMES HARDWICK  
**Address:** 1254 HIGH STREET  
**City, State Zip:** AUBURN, CA 95603-5015  
**Phone:** (530) 889-9195 **Fax:** (530) 889-9197  
**Record ID:** 310007AP  
**Service Type:** NON  
**Target Population:** 1.3  
**Expiration Date:** 2/28/2018 **IMS:** No

**Program Name:** HOPE HELP AND HEALING  
**Legal Name:** HOPE HELP AND HEALING  
**Address:** 11960 HERITAGE OAK PLACE, SUITE 20  
**City, State Zip:** AUBURN, CA 95603-2403  
**Phone:** (530) 885-4249 **Fax:** (530) 885-6191  
**Record ID:** 310010CN  
**Service Type:** NON  
**Target Population:** 1.1  
**Expiration Date:** 5/31/2018 **IMS:** No

**Program Name:** TRUE STEP  
**Legal Name:** HOPE HELP AND HEALING  
**Address:** 318 LINCOLN WAY, #B  
**City, State Zip:** AUBURN, CA 95603  
**Phone:** (530) 392-0432 **Fax:** (530) 885-6191  
**Record ID:** 310010DN  
**Service Type:** RES  
**Resident Capacity:** 6  
**Total Occupancy:** 7  
**Target Population:** 1.2  
**Expiration Date:** 9/30/2018 **IMS:** No

**Program Name:** KOINONIA GROUP HOME #1  
**Legal Name:** KOINONIA FOSTER HOMES, INC.  
**Address:** 3880 OAK TREE LANE  
**City, State Zip:** LOOMIS, CA 95650-9316  
**Phone:** (916) 652-6557 **Fax:** (916) 652-8930  
**Record ID:** 310012AN  
**Service Type:** DSS  
**Target Population:** 1.5  
**Expiration Date:** 11/30/2018 **IMS:** No

**Program Name:** KOINONIA GROUP HOME #2  
Legal Name: KOINONIA FOSTER HOMES, INC.  
Address: 6331 KING ROAD  
City, State Zip: LOOMIS, CA 95650-8801  
Phone: (916) 652-3842 Fax: (916) 652-9586  
**Record ID:** 310012BN  
Service Type: DSS  
Target Population: 1.5  
Expiration Date: 11/30/2018 IMS: No

**Program Name:** KOINONIA GROUP HOME #3  
Legal Name: KOINONIA FOSTER HOMES, INC.  
Address: 5440 PARAGON STREET  
City, State Zip: ROCKLIN, CA 95677-2217  
Phone: (916) 624-2636 Fax: (916) 624-2069  
**Record ID:** 310012CN  
Service Type: DSS  
Target Population: 1.5  
Expiration Date: 11/30/2018 IMS: No

**Program Name:** KOINONIA GROUP HOME #4  
Legal Name: KOINONIA FOSTER HOMES, INC.  
Address: 8200 KING ROAD  
City, State Zip: LOOMIS, CA 95650-8813  
Phone: (916) 652-0516 Fax: (916) 652-4237  
**Record ID:** 310012DN  
Service Type: DSS  
Target Population: 1.5  
Expiration Date: 11/30/2018 IMS: No

**Program Name:** AUBURN CAMPUS-OUTPATIENT PROGRAM  
Legal Name: COMMUNITY RECOVERY RESOURCES  
Address: 12183 LOCKSLEY LANE,  
SUITE 101, 102, 103 & 104  
City, State Zip: AUBURN, CA 95602-2050  
Phone: (530) 885-1961 Fax: (916) 797-8979  
**Record ID:** 310019AN  
Service Type: NON  
Target Population: 1.4  
Expiration Date: 9/30/2017 IMS: No

**Program Name:** AUBURN CAMPUS RESIDENTIAL PROGRAM  
Legal Name: COMMUNITY RECOVERY RESOURCES  
Address: 12125 SHALE RIDGE ROAD  
City, State Zip: AUBURN, CA 95602  
Phone: (530) 885-1917 Fax: (530) 273-7740  
**Record ID:** 310019BN  
Service Type: RES-DETOX  
Resident Capacity: 28  
Total Occupancy: 28  
Target Population: 1.1  
Expiration Date: 11/30/2017 IMS: No

**Program Name:** LINCOLN SERVICE CENTER  
Legal Name: COMMUNITY RECOVERY RESOURCES  
Address: 1530 3RD STREET, SUITE 212  
City, State Zip: LINCOLN, CA 95648-2500  
Phone: (916) 434-8927 Fax: (916) 434-0678  
**Record ID:** 310019CN  
Service Type: NON  
Target Population: 1.9  
Expiration Date: 5/31/2019 IMS: No

**Program Name:** ROSEVILLE CAMPUS  
Legal Name: COMMUNITY RECOVERY RESOURCES  
Address: 730 SUNRISE AVENUE, SUITES 201, 250, 260, 261, & 271  
City, State Zip: ROSEVILLE, CA 95661-4553  
Phone: (916) 782-3737 Fax: (916) 782-3739  
**Record ID:** 310019EN  
Service Type: NON  
Target Population: 1.9  
Expiration Date: 5/31/2019 IMS: No

**Program Name:** SIERRA NATIVE ALLIANCE - WHITE BISON PROGRAM (WBP)  
Legal Name: NATIVE ALLIANCE OF THE SIERRA NEVADA FOOTHILLS  
Address: 610 AUBURN RAVINE ROAD, SUITE G & F  
City, State Zip: AUBURN, CA 95603-3930  
Phone: (530) 888-8767 Fax: (530) 888-8757  
**Record ID:** 310020AN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 7/31/2018 IMS: No

**Program Name:** NEW LEAF COUNSELING SERVICES HOFFMAN HOUSE  
Legal Name: JAMES N HARDWICK  
Address: 199 HOFFMAN AVENUE  
City, State Zip: AUBURN, CA 95603  
Phone: (530) 885-9067 Fax: (530) 885-2534  
**Record ID:** 310022AP  
Service Type: RES  
Resident Capacity: 9  
Total Occupancy: 15  
Target Population: 1.4  
Expiration Date: 5/31/2019 IMS: No

**State of California, Department of Health Care Services  
Licensed Residential Facilities and/or  
Certified Alcohol and Drug Programs**

**As of 9/1/2017**

**Plumas County**

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No licensed or certified facilities at this time.

Please check with a neighboring county for services.



State of California, Department of Health Care Services  
Licensed Residential Facilities and/or  
Certified Alcohol and Drug Programs

As of 9/1/2017

Riverside County

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**Program Name:** EMBRACE RECOVERY LLC  
Legal Name: EMBRACE RECOVERY LLC  
Address: 20263 WENDY LANE  
City, State Zip: MURRIETA, CA 92562  
Phone: (951) 223-4695 Fax: (951) 929-2780  
**Record ID:** 300362BP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.8  
Expiration Date: 7/31/2019 IMS: No

**Program Name:** ABC RECOVERY CENTERS  
Legal Name: A.B.C. RECOVERY CENTER, INC.  
Address: 44374 PALM STREET AND  
44435 BISKRA STREET  
City, State Zip: INDIO, CA 92201  
Phone: (760) 342-6616 Fax: (760) 347-8276  
**Record ID:** 330001AN  
Service Type: RES-DETOX  
Resident Capacity: 75  
Total Occupancy: 75  
Target Population: 1.9  
Expiration Date: 6/30/2018 IMS: No

**Program Name:** ABC RECOVERY CENTER OUTPATIENT PROGRAM  
Legal Name: A.B.C. RECOVERY CENTER, INC.  
Address: 82353 INDIO BLVD.  
City, State Zip: INDIO, CA 92201  
Phone: (760) 342-6616 Fax: (760) 347-8276  
**Record ID:** 330001BN  
Service Type: NON  
Target Population: 1.5  
Expiration Date: 7/31/2019 IMS: No

**Program Name:** THE RANCH  
Legal Name: THE RANCH RECOVERY CENTERS, INC.  
Address: 7885 ANNANDALE AVENUE  
City, State Zip: DESERT HOT SPRINGS, CA 92240-1419  
Phone: (760) 329-2924  
**Record ID:** 330003AN  
Service Type: RES-DETOX  
Resident Capacity: 46  
Total Occupancy: 46  
Target Population: 1.2  
Expiration Date: 6/30/2018 IMS: No

**Program Name:** HACIENDA VALDEZ  
Legal Name: THE RANCH RECOVERY CENTERS, INC.  
Address: 12890 QUINTA WAY  
City, State Zip: DESERT HOT SPRINGS, CA 92240-4852  
Phone: (760) 329-2959 Fax: (760) 329-2953  
**Record ID:** 330003BN  
Service Type: RES-DETOX  
Resident Capacity: 35  
Total Occupancy: 35  
Target Population: 1.3  
Expiration Date: 6/30/2018 IMS: No

**Program Name:** MEN'S SUBSTANCE ABUSE RECOVERY HOME  
Legal Name: WHITESIDE MANOR  
Address: 2709, 2743 & 2759 ORANGE STREET  
City, State Zip: RIVERSIDE, CA 92501  
Phone: (951) 686-9454 Fax: (951) 686-2303  
**Record ID:** 330004AN  
Service Type: RES-DETOX  
Resident Capacity: 32  
Total Occupancy: 32  
Target Population: 1.2  
Expiration Date: 5/31/2018 IMS: Yes

**Program Name:** WILSHIRE HOUSE  
Legal Name: WHITESIDE MANOR  
Address: 2452 AND 2456 WILSHIRE STREET  
City, State Zip: RIVERSIDE, CA 92501  
Phone: (951) 682-6631 Fax: (951) 686-2303  
**Record ID:** 330004TN  
Service Type: RES-DETOX  
Resident Capacity: 14  
Total Occupancy: 14  
Target Population: 1.3  
Expiration Date: 11/30/2018 IMS: Yes

**Program Name:** PALM AVENUE WOMEN'S PROGRAM  
Legal Name: WHITESIDE MANOR  
Address: 4750 PALM AVENUE  
City, State Zip: RIVERSIDE, CA 92501  
Phone: (951) 686-0021 Fax: (951) 686-0026  
**Record ID:** 330004WN  
Service Type: RES-DETOX  
Resident Capacity: 12  
Total Occupancy: 12  
Target Population: 1.3  
Expiration Date: 10/31/2017 IMS: Yes

**Program Name:** OMEGA/ BETA PROGRAM LAKE ELSINORE  
Legal Name: RIVERSIDE RECOVERY RESOURCES  
Address: 600 THIRD STREET, SUITE C  
City, State Zip: LAKE ELSINORE, CA 92530  
Phone: (951) 674-5354 Fax: (951) 674-5227  
**Record ID:** 330009ON  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 5/31/2018 IMS: No

**Program Name:** TIME TO CHANGE RECOVERY  
Legal Name: TTC RECOVERY, INC.  
Address: 29204 SHIPWRIGHT DRIVE  
City, State Zip: MENIFEE, CA 92585  
Phone: (888) 948-1468  
**Record ID:** 330010AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 7/31/2019 IMS: No

**Program Name:** WOODCREST RECOVERY CENTER  
Legal Name: MFI RECOVERY CENTER  
Address: 17270 ROOSEVELT STREET  
City, State Zip: RIVERSIDE, CA 92508  
Phone: (951) 683-6596 Fax: (951) 351-1554  
**Record ID:** 330013AN  
Service Type: RES-DETOX  
Resident Capacity: 56  
Total Occupancy: 56  
Target Population: 1.2  
Expiration Date: 11/30/2017 IMS: Yes

**Program Name:** A WOMAN'S PLACE  
Legal Name: MFI RECOVERY CENTER  
Address: 4295 BROCKTON AVENUE  
City, State Zip: RIVERSIDE, CA 92501  
Phone: (951) 683-6596 Fax: (951) 351-1554  
**Record ID:** 330013GN  
Service Type: RES-DETOX  
Resident Capacity: 38  
Total Occupancy: 64  
Target Population: 1.4  
Expiration Date: 7/31/2019 IMS: Yes

**Program Name:** MFI RECOVERY CENTER  
Legal Name: MFI RECOVERY CENTER  
Address: 5870 ARLINGTON AVENUE  
City, State Zip: RIVERSIDE, CA 92504  
Phone: (951) 683-6596 Fax: (951) 351-1554  
**Record ID:** 330013IN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 5/31/2019 IMS: No

**Program Name:** MFI RECOVERY CENTER  
Legal Name: MFI RECOVERY CENTER  
Address: 1035 WEST RAMSEY STREET, SUITE A  
City, State Zip: BANNING, CA 92220  
Phone: (951) 683-6596 Fax: (951) 351-1554  
**Record ID:** 330013JN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 5/31/2019 IMS: No

**Program Name:** MFI RECOVERY CENTER  
Legal Name: MFI RECOVERY CENTER  
Address: 4440 UNIVERSITY AVENUE, UNIT 2, 3, 4, 5, 7, 8, 9, 11, 12 & 13  
City, State Zip: RIVERSIDE, CA 92501  
Phone: (951) 683-6596 Fax: (951) 351-1554  
**Record ID:** 330013KN  
Service Type: RES-DETOX  
Resident Capacity: 33  
Total Occupancy: 33  
Target Population: 1.2  
Expiration Date: 8/31/2019 IMS: Yes

**Program Name:** VALLEY-WIDE COUNSELING SERVICES  
Legal Name: MFI RECOVERY CENTER  
Address: 1604 SOUTH SANTA FE AVENUE, SUITE 403  
City, State Zip: SAN JACINTO, CA 92583  
Phone: (951) 683-6596 Fax: (951) 351-1554  
**Record ID:** 330013QN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 6/30/2019 IMS: No

**Program Name:** MFI RECOVERY CENTER  
Legal Name: MFI RECOVERY CENTER  
Address: 24885 WHITEWOOD ROAD, #105  
City, State Zip: MURRIETA, CA 92563  
Phone: (951) 683-6596 Fax: (951) 351-1554  
**Record ID:** 330013RN  
Service Type: NON  
Target Population: 1.5  
Expiration Date: 7/31/2019 IMS: No

**Program Name:** LA VISTA, A PROGRAM OF MFI RECOVERY CENTER  
**Legal Name:** MFI RECOVERY CENTER  
**Address:** 2220 GIRARD STREET, BLDG. A & B & 294 E. MIDWAY AVENUE  
**City, State Zip:** SAN JACINTO, CA 92583  
**Phone:** (951) 925-8450 **Fax:** (951) 658-6686  
**Record ID:** 330013SN  
**Service Type:** RES-DETOX  
**Resident Capacity:** 29  
**Total Occupancy:** 29  
**Target Population:** 1.3  
**Expiration Date:** 10/31/2018 **IMS:** No

**Program Name:** MICHAEL'S HOUSE  
**Legal Name:** PALM SPRINGS TREATMENT CENTERS, LLC  
**Address:** 430 SOUTH CAHUILLA ROAD  
**City, State Zip:** PALM SPRINGS, CA 92262  
**Phone:** (760) 416-7951  
**Record ID:** 330014BP  
**Service Type:** RES-DETOX  
**Resident Capacity:** 30  
**Total Occupancy:** 30  
**Target Population:** 1.1  
**Expiration Date:** 8/31/2018 **IMS:** No

**Program Name:** PALM SPRINGS SERENITY RETREAT  
**Legal Name:** PALM SPRINGS TREATMENT CENTERS, LLC  
**Address:** 2095 NORTH INDIAN CANYON DRIVE  
**City, State Zip:** PALM SPRINGS, CA 92262  
**Phone:** (760) 416-7951 **Fax:** (760) 416-1330  
**Record ID:** 330014CP  
**Service Type:** RES-DETOX  
**Resident Capacity:** 30  
**Total Occupancy:** 30  
**Target Population:** 1.1  
**Expiration Date:** 10/31/2018 **IMS:** No

**Program Name:** MICHAEL'S HOUSE  
**Legal Name:** PALM SPRINGS TREATMENT CENTERS, LLC  
**Address:** 1910 SOUTH CAMINO REAL  
**City, State Zip:** PALM SPRINGS, CA 92264  
**Phone:** (760) 320-3433  
**Record ID:** 330014DP  
**Service Type:** RES-DETOX  
**Resident Capacity:** 60  
**Total Occupancy:** 110  
**Target Population:** 1.1  
**Expiration Date:** 3/31/2018 **IMS:** No

**Program Name:** MICHAEL'S HOUSE OUTPATIENT CENTER  
**Legal Name:** PALM SPRINGS TREATMENT CENTERS, LLC  
**Address:** 515 NORTH PALM CANYON DRIVE, BUILDING H  
**City, State Zip:** PALM SPRINGS, CA 92262  
**Phone:** (760) 318-1010 **Fax:** (760) 325-0112  
**Record ID:** 330014EP  
**Service Type:** NON  
**Target Population:** 1.8  
**Expiration Date:** 11/30/2018 **IMS:** No

**Program Name:** SOROPTIMIST HOUSE OF HOPE #1  
**Legal Name:** SOROPTIMIST HOUSE OF HOPE, INC.  
**Address:** 13525 CIELO AZUL WAY  
**City, State Zip:** DESERT HOT SPRINGS, CA 92240  
**Phone:** (760) 329-4673 **Fax:** (760) 329-7311  
**Record ID:** 330016AN  
**Service Type:** RES  
**Resident Capacity:** 6  
**Total Occupancy:** 6  
**Target Population:** 1.3  
**Expiration Date:** 2/28/2018 **IMS:** No

**Program Name:** METCALF RECOVERY RANCH  
Legal Name: VARP, INC.  
Address: 9826 18TH AVENUE  
City, State Zip: BLYTHE, CA 92225  
Phone: (760) 922-8625 Fax: (760) 922-6717  
**Record ID:** 330020AN  
Service Type: RES  
Resident Capacity: 20  
Total Occupancy: 20  
Target Population: 1.2  
Expiration Date: 6/30/2018 IMS: No

**Program Name:** SAN JACINTO SAPT  
Legal Name: COUNTY OF RIVERSIDE  
Address: 1370 S. STATE STREET, SUITE A  
City, State Zip: SAN JACINTO, CA 92583  
Phone: (951) 791-3350 Fax: (951) 791-3353  
**Record ID:** 330023BN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 5/31/2018 IMS: No

**Program Name:** RIVERSIDE SAPT  
Legal Name: COUNTY OF RIVERSIDE  
Address: 2085 RUSTIN AVENUE  
City, State Zip: RIVERSIDE, CA 92507  
Phone: (951) 955-2105 Fax: (951) 955-8060  
**Record ID:** 330023CN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 5/31/2018 IMS: No

**Program Name:** CORONA SAPT  
Legal Name: COUNTY OF RIVERSIDE  
Address: 623 NORTH MAIN STREET, SUITE D-11  
City, State Zip: CORONA, CA 92880  
Phone: (951) 737-2962  
**Record ID:** 330023DN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 5/31/2018 IMS: No

**Program Name:** RIVERSIDE COUNTY SUBSTANCE ABUSE PROGRAM  
Legal Name: COUNTY OF RIVERSIDE  
Address: 83-912 AVENUE 45, SUITE 9  
City, State Zip: INDIO, CA 92201  
Phone: (760) 347-0754 Fax: (760) 347-8507  
**Record ID:** 330023EN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 5/31/2018 IMS: No

**Program Name:** BLYTHE SAPT  
Legal Name: COUNTY OF RIVERSIDE  
Address: 1297 WEST HOBSON WAY  
City, State Zip: BLYTHE, CA 92225-1423  
Phone: (760) 921-5000 Fax: (760) 921-5002  
**Record ID:** 330023FN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 5/31/2018 IMS: No

**Program Name:** CATHEDRAL CITY SAPT  
Legal Name: COUNTY OF RIVERSIDE  
Address: 68-615 PEREZ ROAD, SUITE 3A, 4A, 5A, 6A AND 7A  
City, State Zip: CATHEDRAL CITY, CA 92234  
Phone: (760) 770-2213 Fax: (760) 770-2240  
**Record ID:** 330023HN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 5/31/2018 IMS: No

**Program Name:** HILL ALCOHOL & DRUG TREATMENT  
Legal Name: COMMUNITY SOLUTIONS, INC.  
Address: 41877 NORTH ENTERPRISE CIRCLE, #100  
City, State Zip: TEMECULA, CA 92590  
Phone: (951) 719-3685 Fax: (951) 719-3684  
**Record ID:** 330032BP  
Service Type: NON-DETOX  
Target Population: 1.1  
Expiration Date: 12/31/2018 IMS: No

**Program Name:** CASA LAS PALMAS RECOVERY HOME  
Legal Name: RIVERSIDE COUNTY LATINO COMMISSION ON ALCOHOL AND DRUG ABUSE SERVICES, INC.  
Address: 83844 HOPI AVENUE  
City, State Zip: INDIO, CA 92203  
Phone: (760) 347-9442  
**Record ID:** 330037AN  
Service Type: RES  
Resident Capacity: 7  
Total Occupancy: 7  
Target Population: 1.2  
Expiration Date: 7/31/2018 IMS: No

**Program Name:** CASA CECILIA RECOVERY HOME  
Legal Name: RIVERSIDE COUNTY LATINO COMMISSION ON ALCOHOL AND DRUG ABUSE SERVICES, INC.  
Address: 83885 ROSA AVENUE  
City, State Zip: THERMAL, CA 92274  
Phone: (760) 398-2008 Fax: (760) 342-8022  
**Record ID:** 330037BN  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 7  
Target Population: 1.3  
Expiration Date: 5/31/2018 IMS: No

**Program Name:** RIVERSIDE COUNTY LATINO COMMISSION COUNSELING CENTER  
Legal Name: RIVERSIDE COUNTY LATINO COMMISSION ON ALCOHOL AND DRUG ABUSE SERVICES, INC.  
Address: 1612 FIRST STREET  
City, State Zip: COACHELLA, CA 92236  
Phone: (760) 398-9000 Fax: (760) 398-9790  
**Record ID:** 330037DN  
Service Type: NON  
Target Population: 1.5  
Expiration Date: 2/28/2019 IMS: No

**Program Name:** PERRIS VALLEY RECOVERY PROGRAMS, INC.  
Legal Name: PERRIS VALLEY RECOVERY PROGRAMS, INC.  
Address: 236 E. THIRD STREET,  
B  
City, State Zip: PERRIS, CA 92570  
Phone: (951) 657-2960 Fax: (951) 940-4600  
**Record ID:** 330038BN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 4/30/2018 IMS: No

**Program Name:** 10 ACRE RANCH, INC.  
Legal Name: 10 ACRE RANCH, INC.  
Address: 5953 GRAND AVENUE  
City, State Zip: RIVERSIDE, CA 92504  
Phone: (951) 784-7081 Fax: (951) 784-7084  
**Record ID:** 330042BN  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.2  
Expiration Date: 10/31/2017 IMS: No

**Program Name:** 10 ACRE RANCH, INC.  
Legal Name: 10 ACRE RANCH, INC.  
Address: 4175 BROCKTON AVENUE  
City, State Zip: RIVERSIDE, CA 92501-1369  
Phone: (951) 394-8108 Fax: (951) 394-8109  
**Record ID:** 330042CN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 12/31/2017 IMS: No

**Program Name:** THE HIGH ROAD PROGRAM  
Legal Name: THE HIGH ROAD PROGRAM  
Address: 3579 ARLINGTON AVENUE, SUITE 200  
City, State Zip: RIVERSIDE, CA 92506  
Phone: (951) 781-6762 Fax: (951) 781-6249  
**Record ID:** 330050AN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 6/30/2019 IMS: No

**Program Name:** THE AWARENESS PROGRAM  
Legal Name: AWARENESS PROGRAM, INC.  
Address: 45926 OASIS STREET  
City, State Zip: INDIO, CA 92201  
Phone: (760) 342-1233 Fax: (760) 342-5344  
**Record ID:** 330051AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 6/30/2019 IMS: No

**Program Name:** SUNRISE RECOVERY RANCH  
Legal Name: SOBER LIVING BY THE SEA, INC.  
Address: 6690 LIMONITE FRONTAGE ROAD  
City, State Zip: RIVERSIDE, CA 92509  
Phone: (951) 328-0146 Fax: (949) 675-4285  
**Record ID:** 330056BP  
Service Type: RES-DETOX  
Resident Capacity: 13  
Total Occupancy: 13  
Target Population: 1.1  
Expiration Date: 7/31/2018 IMS: No

**Program Name:** SUNRISE RECOVERY RANCH  
Legal Name: SOBER LIVING BY THE SEA, INC.  
Address: 6798 LIMONITE FRONTAGE ROAD  
City, State Zip: RIVERSIDE, CA 92509  
Phone: (951) 328-0146 Fax: (949) 675-4285  
**Record ID:** 330056CP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 12/31/2018 IMS: No

**Program Name:** SUNRISE RECOVERY RANCH  
Legal Name: SOBER LIVING BY THE SEA, INC.  
Address: 6770 LIMONITE FRONTAGE ROAD  
City, State Zip: RIVERSIDE, CA 92509  
Phone: (951) 328-0146 Fax: (949) 675-4285  
**Record ID:** 330056DP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 12/31/2018 IMS: No

**Program Name:** THE WYLIE CENTER  
Legal Name: THE CAROLYN E. WYLIE CENTER FOR CHILDREN, YOUTH & FAMILIES  
Address: 4164 BROCKTON AVENUE  
City, State Zip: RIVERSIDE, CA 92501  
Phone: (951) 683-5193 Fax: (909) 683-6019  
**Record ID:** 330065AN  
Service Type: NON  
Target Population: 1.4  
Expiration Date: 2/28/2018 IMS: No

**Program Name:** U. S. VETS SUBSTANCE ABUSE TREATMENT PROGRAM/VETERANS IN PROGRESS I  
Legal Name: UNITED STATES VETERANS INITIATIVE  
Address: 15105 6TH STREET, ROOMS 323-326  
City, State Zip: MARCH ARB, CA 92518  
Phone: (951) 999-9120 Fax: (951) 656-6890  
**Record ID:** 330075AN  
Service Type: RES  
Resident Capacity: 12  
Total Occupancy: 12  
Target Population: 1.2  
Expiration Date: 11/30/2017 IMS: No

**Program Name:** TEMECULA VALLEY TREATMENT CENTER  
Legal Name: WCHS, INC.  
Address: 40700 CALIFORNIA OAKS ROAD, SUITES 201, 202 AND 203  
City, State Zip: MURRIETA, CA 92562  
Phone: (951) 894-5072 Fax: (951) 894-7324  
**Record ID:** 330081AP  
Service Type: NON-DETOX  
Target Population: 1.1  
Expiration Date: 7/31/2018 IMS: No

**Program Name:** DESERT TREATMENT CLINIC  
Legal Name: WCHS, INC.  
Address: 1330 NORTH INDIAN CANYON DRIVE, SUITES A, B AND C  
City, State Zip: PALM SPRINGS, CA 92262  
Phone: (760) 322-9065 Fax: (760) 322-8916  
**Record ID:** 330081CP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 6/30/2018 IMS: No

**Program Name:** RIVERSIDE TREATMENT CENTER  
Legal Name: WCHS, INC.  
Address: 1021 WEST LA CADENA  
City, State Zip: RIVERSIDE, CA 92501  
Phone: (951) 784-8010 Fax: (951) 784-2859  
**Record ID:** 330081DP  
Service Type: NON-DETOX  
Target Population: 1.1  
Expiration Date: 11/30/2018 IMS: No



**Program Name:** SPENCER RECOVERY CENTERS  
Legal Name: SPENCER RECOVERY CENTERS, INC.  
Address: 1276 NORTH PALM CANYON DRIVE, #204  
City, State Zip: PALM SPRINGS, CA 92262  
Phone: (760) 778-4876 Fax: (949) 313-5240  
**Record ID:** 330086AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 5/31/2019 IMS: No

**Program Name:** PALM SPRINGS RECOVERY  
Legal Name: SPENCER RECOVERY CENTERS, INC.  
Address: 1404 NORTH PALM CANYON DRIVE  
City, State Zip: PALM SPRINGS, CA 92262  
Phone: (949) 376-3705 Fax: (949) 376-6862  
**Record ID:** 330086BP  
Service Type: RES  
Resident Capacity: 32  
Total Occupancy: 32  
Target Population: 1.1  
Expiration Date: 11/30/2018 IMS: No

**Program Name:** FORTERUS HEALTH CARE SERVICES, INC.  
Legal Name: FORTERUS HEALTH CARE SERVICES, INC.  
Address: 30852 HIGHLAND VISTA CIRCLE  
City, State Zip: TEMECULA, CA 92591  
Phone: (951) 837-2401 Fax: (951) 848-9402  
**Record ID:** 330098BP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 9  
Target Population: 1.1  
Expiration Date: 6/30/2018 IMS: No

**Program Name:** FORTERUS HEALTH CARE SERVICES, INC.  
Legal Name: FORTERUS HEALTH CARE SERVICES, INC.  
Address: 41126 ENGLEMAN OAK STREET  
City, State Zip: MURRIETA, CA 92562  
Phone: (951) 894-8641 Fax: (951) 848-9402  
**Record ID:** 330098GP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 12/31/2018 IMS: No

**Program Name:** FORTERUS HEALTH CARE SERVICES, INC.  
Legal Name: FORTERUS HEALTH CARE SERVICES, INC.  
Address: 40734 SYMERON WAY  
City, State Zip: MURRIETA, CA 92562  
Phone: (951) 894-8641 Fax: (951) 848-9402  
**Record ID:** 330098JP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 12/31/2018 IMS: No

**Program Name:** FORTERUS HEALTH CARE SERVICES  
Legal Name: FORTERUS HEALTH CARE SERVICES, INC.  
Address: 41655 DATE STREET, #101  
City, State Zip: MURRIETA, CA 92562  
Phone: (951) 894-8620 Fax: (951) 848-9402  
**Record ID:** 330098KP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 3/31/2018 IMS: No

**Program Name:** RANCH CREEK RECOVERY  
Legal Name: RANCH CREEK RECOVERY, INC.  
Address: 25650 BASS POINT  
City, State Zip: MURRIETA, CA 92592  
Phone: (951) 676-9111 Fax: (951) 571-4841  
**Record ID:** 330100AP  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 1/31/2019 IMS: No

**Program Name:** RANCH CREEK RECOVERY OUTPATIENT  
Legal Name: RANCH CREEK RECOVERY, INC.  
Address: 43264 BUSINESS PARK DRIVE #101  
City, State Zip: TEMECULA, CA 92590  
Phone: (951) 696-9200 Fax: (951) 695-9366  
**Record ID:** 330100BP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 7/31/2018 IMS: No

**Program Name:** PHYSICIANS FOR HEALTHY HOSPITALS, INC. / HEMET VALLEY RECOVERY CENTER  
Legal Name: PHYSICIANS FOR HEALTHY HOSPITALS, INC.  
Address: 371 NORTH WESTON PLACE  
City, State Zip: HEMET, CA 92543  
Phone: (951) 765-4900 Fax: (951) 765-4764  
**Record ID:** 330101AP  
Service Type: RES  
Resident Capacity: 16  
Total Occupancy: 16  
Target Population: 1.1  
Expiration Date: 11/30/2018 IMS: No

**Program Name:** SOUTHERN CALIFORNIA DETOX  
Legal Name: SOUTHERN CALIFORNIA DETOX TREATMENT AND RECOVERY LLC.  
Address: 42012 DAHLIA WAY  
City, State Zip: TEMECULA, CA 92591  
Phone: (714) 854-2026  
**Record ID:** 330105AP  
Service Type: RES-DETOX  
Resident Capacity: 4  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 4/30/2018 IMS: No

**Program Name:** SOUTHERN CALIFORNIA DETOX TREATMENT AND RECOVERY  
Legal Name: SOUTHERN CALIFORNIA DETOX TREATMENT AND RECOVERY LLC.  
Address: 41743 ENTERPRISE CIRCLE N.  
#208  
City, State Zip: TEMECULA, CA 92590  
Phone: (714) 854-2026  
**Record ID:** 330105BP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 5/31/2018 IMS: No

**Program Name:** DESERT PALMS RECOVERY  
Legal Name: BEHAVIORAL HEALTH SOLUTIONS OF CALIFORNIA LLC  
Address: 67580 JONES ROAD  
City, State Zip: CATHEDRAL CITY, CA 92234  
Phone: (760) 969-4140 Fax: (760) 969-4169  
**Record ID:** 330112BP  
Service Type: RES-DETOX  
Resident Capacity: 36  
Total Occupancy: 36  
Target Population: 1.1  
Expiration Date: 6/30/2019 IMS: No

**Program Name:** SUNSPIRE HEALTH IOP  
Legal Name: BEHAVIORAL HEALTH SOLUTIONS OF CALIFORNIA LLC  
Address: 73-771 DINAH SHORE DRIVE,  
SUITE 200  
City, State Zip: PALM DESERT, CA 92211  
Phone: (760) 464-2611 Fax: (760) 969-4179  
**Record ID:** 330112CP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 1/31/2018 IMS: No

**Program Name:** SERENITY PALMS  
Legal Name: IRECOVER TREATMENT CENTERS INC.  
Address: 37066 BANKSIDE DRIVE  
City, State Zip: CATHEDRAL CITY, CA 92234  
Phone: (760) 459-3736 Fax: (406) 784-3994  
**Record ID:** 330113AP  
Service Type: RES-DETOX  
Resident Capacity: 30  
Total Occupancy: 30  
Target Population: 1.1  
Expiration Date: 11/30/2017 IMS: No

**Program Name:** ADDICTION THERAPEUTIC SERVICES  
Legal Name: J. HERNDONS, LLC  
Address: 559 S. PALM CANYON DRIVE, SUITE B-101  
City, State Zip: PALM SPRINGS, CA 92264  
Phone: (760) 778-6120 Fax: (760) 406-6077  
**Record ID:** 330114AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 9/30/2017 IMS: No

**Program Name:** AJ'S AMETHYST HOUSE  
Legal Name: B II A J OUR HOUSE, LLC  
Address: 1119 W. 7TH STREET  
City, State Zip: SAN JACINTO, CA 92582  
Phone: (951) 654-1089 Fax: (951) 654-7868  
**Record ID:** 330115AP  
Service Type: RES  
Resident Capacity: 28  
Total Occupancy: 32  
Target Population: 1.3  
Expiration Date: 12/31/2017 IMS: No

**Program Name:** KEN SEELEY COMMUNITIES  
Legal Name: INTERVENTION911  
Address: 420 S PALM CANYON DRIVE  
SUITE C AND D  
City, State Zip: PALM SPRINGS, CA 92262-7304  
Phone: (323) 401-3660  
**Record ID:** 330116BP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 12/31/2017 IMS: No

**Program Name:** BELLA MONTE RECOVERY  
Legal Name: BELLA MONTE RECOVERY LLC  
Address: 68111 CALLE TIENDAS  
City, State Zip: DESERT HOT SPRINGS, CA 92240  
Phone: (760) 676-5125 Fax: (760) 671-9806  
**Record ID:** 330117AP  
Service Type: RES  
Resident Capacity: 38  
Total Occupancy: 38  
Target Population: 1.1  
Expiration Date: 12/31/2017 IMS: No

**Program Name:** 2 SHINE AGAIN  
Legal Name: 2 SHINE AGAIN INC.  
Address: 37347 AVENIDA CHAPALA  
City, State Zip: TEMECULA, CA 92592  
Phone: (951) 303-3056 Fax: (951) 303-3056  
**Record ID:** 330119AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 8  
Target Population: 1.1  
Expiration Date: 4/30/2018 IMS: No

**Program Name:** SECOND 2 NONE RECOVERY SERVICES  
Legal Name: OPTIMAL METABOLIC SOLUTIONS, LLC  
Address: 40165 MURRIETA HOT SPRINGS ROAD, SUITE I  
City, State Zip: MURRIETA, CA 92563  
Phone: (951) 461-1800 Fax: (951) 667-3383  
**Record ID:** 330123AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 7/31/2018 IMS: No

**Program Name:** TEMECULA SAPT  
Legal Name: COUNTY OF RIVERSIDE  
Address: 40925 COUNTY CENTER DRIVE, SUITE #200  
City, State Zip: TEMECULA, CA 92590  
Phone: (951) 600-6360 Fax: (951) 600-6850  
**Record ID:** 330124BN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 1/31/2019 IMS: No

**Program Name:** DESERT HOT SPRINGS SAPT  
Legal Name: COUNTY OF RIVERSIDE  
Address: 14320 PALM DRIVE  
City, State Zip: DESERT HOT SPRINGS, CA 92240  
Phone: (760) 773-6767 Fax: (760) 773-6760  
**Record ID:** 330124CN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 7/31/2017 IMS: No

**Program Name:** LAKE ELSINORE SAPT  
Legal Name: COUNTY OF RIVERSIDE  
Address: 31760 CASINO DRIVE, SUITE 200  
City, State Zip: LAKE ELSINORE, CA 92530  
Phone: (951) 471-4649 Fax: (951) 471-4687  
**Record ID:** 330124DN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 7/31/2019 IMS: No

**Program Name:** BANNING SAPT  
Legal Name: COUNTY OF RIVERSIDE  
Address: 1330 W. RAMSEY STREET  
City, State Zip: BANNING, CA 92220  
Phone: (951) 849-7142 Fax: (951) 849-1762  
**Record ID:** 330124EN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 7/31/2019 IMS: No

**Program Name:** SOVEREIGN HEALTH OF CALIFORNIA  
Legal Name: DUAL DIAGNOSIS TREATMENT CENTER, INC.  
Address: 69508 BORREGO ROAD  
City, State Zip: CATHEDRAL CITY, CA 92234  
Phone: (949) 324-2818 Fax: (760) 699-2450  
**Record ID:** 330125BP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 10/31/2017 IMS: No

**Program Name:** BLUESTONE RECOVERY, INC.  
Legal Name: BLUESTONE RECOVERY, INC.  
Address: 1660 CHICAGO AVENUE, #M-11  
City, State Zip: RIVERSIDE, CA 92507  
Phone: (951) 823-0540 Fax: (951) 823-0541  
**Record ID:** 330127AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 12/31/2018 IMS: No

**Program Name:** SOUTH CALIFORNIA ROAD TO RECOVERY  
Legal Name: MALIBU BEHAVIORAL HEALTH SERVICES, INC.  
Address: 7057 GASKIN PLACE  
City, State Zip: RIVERSIDE, CA 92506  
Phone: (949) 397-5056  
**Record ID:** 330128AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 6/30/2019 IMS: No

**Program Name:** THE CENTER FOR LIFE CHANGE  
Legal Name: THE CENTER FOR LIFE CHANGE, INC.  
Address: 43397 BUSINESS PARK DRIVE, SUITE D8  
City, State Zip: TEMECULA, CA 92590  
Phone: (951) 775-4000  
**Record ID:** 330129AN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 4/30/2019 IMS: No

**Program Name:** WEST COAST RECOVERY CENTER, LLC  
Legal Name: WEST COAST RECOVERY CENTER, LLC  
Address: 910 N STATE STREET  
City, State Zip: HEMET, CA 92543  
Phone: (951) 929-8200 Fax: (951) 929-8750  
**Record ID:** 330130BP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 9/30/2018 IMS: No

**Program Name:** WEST COAST RECOVERY CENTER, LLC  
Legal Name: WEST COAST RECOVERY CENTER, LLC  
Address: 910 N STATE STREET,  
D  
City, State Zip: HEMET, CA 92543  
Phone: (951) 929-8200 Fax: (951) 929-8750  
**Record ID:** 330130CP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 9/30/2018 IMS: No

**Program Name:** SOVEREIGN HEALTH CANTERA  
Legal Name: SATYA HEALTH OF CALIFORNIA, INC.  
Address: 501 N. CANTERA CIRCLE  
City, State Zip: PALM SPRINGS, CA 92262  
Phone: (949) 276-5553  
**Record ID:** 330131AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 6/30/2018 IMS: No

**Program Name:** ADELANTE RECOVERY CENTER, INC.  
Legal Name: ADELANTE RECOVERY CENTER, INC.  
Address: 23970 SPENSER BUTTE DRIVE  
City, State Zip: PERRIS, CA 92570  
Phone: (951) 657-7863 Fax: (951) 943-9251  
**Record ID:** 330132AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 10/31/2017 IMS: No

**Program Name:** GRANJA RESIDENTIAL DETOXIFICATION AND TREATMENT SERVICES  
Legal Name: WEST COAST WELLNESS CENTERS LLC  
Address: 39689 GRANJA COURT  
City, State Zip: TEMECULA, CA 92592  
Phone: (951) 693-9200 Fax: (951) 929-8500  
**Record ID:** 330133AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 12/31/2017 IMS: No

**Program Name:** MOUNTAINSIDE RECOVERY CENTER  
Legal Name: WEST COAST WELLNESS CENTERS LLC  
Address: 25827 BAY MEADOWS WAY  
City, State Zip: MURRIETA, CA 92563  
Phone: (951) 302-1247 Fax: (915) 929-8500  
**Record ID:** 330133BP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 12/31/2017 IMS: No

**Program Name:** MOUNTAINSIDE RECOVERY CENTER  
Legal Name: WEST COAST WELLNESS CENTERS LLC  
Address: 34480 SYCAMORE SPRINGS ROAD  
City, State Zip: HEMET, CA 92544  
Phone: (951) 693-9200 Fax: (951) 693-9200  
**Record ID:** 330133CP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 12/31/2017 IMS: No

**Program Name:** MOUNTAINSIDE RECOVERY CENTER  
Legal Name: WEST COAST WELLNESS CENTERS LLC  
Address: 27600 SUNDAY DRIVE  
City, State Zip: TEMECULA, CA 92590  
Phone: (951) 308-0018 Fax: (951) 929-8500  
**Record ID:** 330133DP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 12/31/2017 IMS: No

**Program Name:** MOUNTAINSIDE RECOVERY CENTER  
Legal Name: WEST COAST WELLNESS CENTERS LLC  
Address: 784 OLIVETTE STREET  
City, State Zip: HEMET, CA 92543  
Phone: (951) 929-8200  
**Record ID:** 330133FP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 2/28/2018 IMS: No

**Program Name:** WEST COAST COUNSELING WELLNESS CENTERS  
Legal Name: WEST COAST WELLNESS CENTERS LLC  
Address: 660 N CAWSTON AVENUE  
City, State Zip: HEMET, CA 92545  
Phone: (951) 929-8200  
**Record ID:** 330133GP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 2/28/2018 IMS: No

**Program Name:** MOUNTAINSIDE RECOVERY CENTER  
Legal Name: WEST COAST WELLNESS CENTERS LLC  
Address: 36480 VILLA DEL SOL  
City, State Zip: WILDOMAR, CA 92590  
Phone: (951) 223-4695 Fax: (951) 929-2780  
**Record ID:** 330133JP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.8  
Expiration Date: 12/31/2018 IMS: No

**Program Name:** MOUNTAINSIDE RECOVERY CENTER  
Legal Name: WEST COAST WELLNESS CENTERS LLC  
Address: 31631 AUTO CENTER DRIVE  
City, State Zip: LAKE ELSINORE, CA 92530  
Phone: (951) 929-8200 Fax: (951) 929-2780  
**Record ID:** 330133KP  
Service Type: RES-DETOX  
Resident Capacity: 36  
Total Occupancy: 36  
Target Population: 1.8  
Expiration Date: 12/31/2018 IMS: No

**Program Name:** MOUNTAINSIDE RECOVERY CENTER  
Legal Name: WEST COAST WELLNESS CENTERS LLC  
Address: 44240 LA CRUZ DRIVE  
City, State Zip: TEMECULA, CA 92590  
Phone: (951) 223-4695 Fax: (951) 929-2780  
**Record ID:** 330133LP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.8  
Expiration Date: 12/31/2018 IMS: No

**Program Name:** MOUNTAINSIDE RECOVERY CENTER  
Legal Name: WEST COAST WELLNESS CENTERS LLC  
Address: 21952 AVENIDA DE ARBOLES  
City, State Zip: MURRIETA, CA 92562  
Phone: (951) 223-4695 Fax: (951) 929-2780  
**Record ID:** 330133NP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.8  
Expiration Date: 3/31/2019 IMS: No

**Program Name:** HEARTH STONE HOUSE  
Legal Name: HEARTH STONE HOUSE, INC  
Address: 44500 SAN PASCAUL AVENUE  
City, State Zip: PALM DESERT, CA 92260  
Phone: (760) 779-1999 Fax: (760) 799-8999  
**Record ID:** 330134AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 9/30/2017 IMS: No

**Program Name:** CALIFORNIA HIGHLANDS ADDICTION TREATMENT  
Legal Name: CALIFORNIA ADDICTION TREATMENT CENTER LLC  
Address: 15986 S. HIGHLAND SPRINGS AVENUE  
City, State Zip: BANNING, CA 92220  
Phone: (213) 787-5755 Fax: (909) 245-1090  
**Record ID:** 330135AP  
Service Type: RES-DETOX  
Resident Capacity: 16  
Total Occupancy: 16  
Target Population: 1.1  
Expiration Date: 10/31/2017 IMS: No

**Program Name:** BEST NEW LIFE RECOVERY  
Legal Name: BROOKE ELIZABETH BEST-FREEMAN  
Address: 20755 CARANCHO ROAD  
City, State Zip: TEMECULA, CA 92590  
Phone: (951) 545-4606  
**Record ID:** 330137BP  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 7  
Target Population: 1.1  
Expiration Date: 6/30/2018 IMS: No

**Program Name:** THE KILOBY CENTER FOR RECOVERY, INC.  
Legal Name: THE KILOBY CENTER FOR RECOVERY, INC.  
Address: 71-777 SAN JACINTO DRIVE, SUITE 102  
City, State Zip: RANCHO MIRAGE, CA 92270  
Phone: (442) 666-8526  
**Record ID:** 330138AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 5/31/2019 IMS: No

**Program Name:** NEW LIFE RIVERSIDE SUBSTANCE USE  
Legal Name: RIVERSIDE COUNTY SUBSTANCE USE PROGRAM  
Address: 771 BLAINE STREET, SUITE C  
City, State Zip: RIVERSIDE, CA 92507  
Phone: (951) 358-4120 Fax: (951) 358-4189  
**Record ID:** 330139AN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 1/31/2018 IMS: No

**Program Name:** DAY REPORTING CENTER RIVERSIDE SUBSTANCE USE  
Legal Name: RIVERSIDE COUNTY SUBSTANCE USE PROGRAM  
Address: 1020 IOWA AVENUE, SUITE B  
City, State Zip: RIVERSIDE, CA 92507  
Phone: (951) 358-6691 Fax: (951) 358-4479  
**Record ID:** 330139BN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 1/31/2018 IMS: No



**Program Name:** BLUE TIGER RECOVERY  
Legal Name: BLUE TIGER RECOVERY LLC  
Address: 2825 E TAHQUITZ CANYON WAY, BUILDING C  
City, State Zip: PALM SPRINGS, CA 92262  
Phone: (760) 534-3487 Fax: (760) 406-4045  
**Record ID:** 330140AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 11/30/2017 IMS: No

**Program Name:** FULL CIRCLE RECOVERY  
Legal Name: FULL CIRCLE RECOVERY, INC.  
Address: 765 GARDEN GROVE  
City, State Zip: NORCO, CA 92860  
Phone: (951) 737-6199 Fax: (951) 737-6199  
**Record ID:** 330141AN  
Service Type: RES  
Resident Capacity: 4  
Total Occupancy: 4  
Target Population: 1.2  
Expiration Date: 2/28/2018 IMS: No

**Program Name:** FULL CIRCLE RECOVERY  
Legal Name: FULL CIRCLE RECOVERY, INC.  
Address: 139 TRAKEHNER  
City, State Zip: NORCO, CA 92860  
Phone: (951) 737-6199 Fax: (951) 737-6199  
**Record ID:** 330141BN  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 2/28/2018 IMS: No

**Program Name:** FULL CIRCLE RECOVERY, INC.  
Legal Name: FULL CIRCLE RECOVERY, INC.  
Address: 1860 LAMPTON LANE  
City, State Zip: NORCO, CA 92860  
Phone: (951) 737-6199 Fax: (951) 737-6199  
**Record ID:** 330141CN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 1/31/2018 IMS: No

**Program Name:** CLEAR VISION RECOVERY CENTER  
Legal Name: CLEAR VISION, LLC  
Address: 16891 ALITA DRIVE  
City, State Zip: RIVERSIDE, CA 92504  
Phone: (951) 313-7403 Fax: (951) 787-4962  
**Record ID:** 330142AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 3/31/2018 IMS: No

**Program Name:** PHOENIX RISING RECOVERY  
Legal Name: EXECUTIVE RECOVERY GROUP, INC.  
Address: 35450 PEGASUS COURT  
City, State Zip: PALM DESERT, CA 92211  
Phone: (760) 409-1287  
**Record ID:** 330143AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 1/31/2018 IMS: No

**Program Name:** PHOENIX RISING RECOVERY  
Legal Name: EXECUTIVE RECOVERY GROUP, INC.  
Address: 77725 ENFIELD LANE,  
100/200  
City, State Zip: PALM DESERT, CA 92211  
Phone: (760) 409-1287  
**Record ID:** 330143BP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 7/31/2018 IMS: No

**Program Name:** RANCHO MILAGRO RECOVERY, INC.  
Legal Name: RANCHO MILAGRO RECOVERY, INC.  
Address: 31985 HONEYSUCKLE CIRCLE  
City, State Zip: WINCHESTER, CA 92596  
Phone: (951) 384-2672  
**Record ID:** 330144AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 4/30/2018 IMS: No

**Program Name:** SUN RAY ADDICTIONS COUNSELING & EDUCATION  
Legal Name: SUN RAY HOLDING COMPANY, LLC  
Address: 950 N STATE STREET, SUITE D & E  
City, State Zip: HEMET, CA 92543  
Phone: (951) 652-3560 Fax: (951) 929-8750  
**Record ID:** 330145AP  
Service Type: NON-DETOX  
Target Population: 1.1  
Expiration Date: 1/31/2018 IMS: No

**Program Name:** SOUTHERN CALIFORNIA ADDICTION CENTER  
Legal Name: SOUTHERN CALIFORNIA ADDICTION CENTER  
Address: 36500 DE PORTOLA ROAD  
City, State Zip: TEMECULA, CA 92592  
Phone: (951) 302-2481 Fax: (951) 302-2392  
**Record ID:** 330146AP  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 2/28/2018 IMS: No

**Program Name:** SOUTHERN CALIFORNIA ADDICTION CENTER  
Legal Name: SOUTHERN CALIFORNIA ADDICTION CENTER  
Address: 44274 GEORGE CUSHMAN COURT #208  
City, State Zip: TEMECULA, CA 92592  
Phone: (714) 619-5081 Fax: (714) 619-5084  
**Record ID:** 330146BP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 3/31/2019 IMS: No

**Program Name:** LEE'S TREATMENT AND RECOVERY  
Legal Name: LEE'S TREATMENT AND RECOVERY, LLC  
Address: 245 N. LINCOLN  
City, State Zip: CORONA, CA 92882-1851  
Phone: (877) 251-3669 Fax: (951) 737-6691  
**Record ID:** 330147AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 7  
Target Population: 1.1  
Expiration Date: 5/31/2018 IMS: No

**Program Name:** PALM DESERT RECOVERY CENTER  
Legal Name: PALM DESERT RECOVERY CENTER, INC.  
Address: 73733 FRED WARING DRIVE,  
SUITE 100  
City, State Zip: PALM DESERT, CA 92260  
Phone: (760) 230-5300 Fax: (760) 990-2247  
**Record ID:** 330148AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 1/31/2018 IMS: No

**Program Name:** ZEN MOUNTAIN PATH  
Legal Name: ZEN RECOVERY, LLC  
Address: 26299 TAHQUITZ DRIVE  
City, State Zip: IDYLLWILD, CA 92549  
Phone: (714) 604-2684  
**Record ID:** 330149AP  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.2  
Expiration Date: 7/31/2018 IMS: No

**Program Name:** INLAND DETOX, INC  
Legal Name: INLAND DETOX, INC  
Address: 38630 MESA ROAD  
City, State Zip: TEMECULA, CA 92592  
Phone: (951) 355-9116  
**Record ID:** 330150AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 5/31/2018 IMS: No

**Program Name:** SOLUTION BASED TREATMENT & DETOX  
Legal Name: SCE CORP.  
Address: 41017 ARRON COURT  
City, State Zip: MURRIETA, CA 92562  
Phone: (951) 698-4823 Fax: (951) 696-9783  
**Record ID:** 330152AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 8  
Target Population: 1.1  
Expiration Date: 7/31/2018 IMS: No

**Program Name:** PACIFIC GROVE HOSPITAL  
Legal Name: VISTA BEHAVIORAL HOSPITAL, LLC  
Address: 5900 BROCKTON AVENUE  
City, State Zip: RIVERSIDE, CA 92506  
Phone: (951) 275-8400 Fax: (951) 786-0293  
**Record ID:** 330153AP  
Service Type: NON-DETOX  
Target Population: 1.1  
Expiration Date: 9/30/2018 IMS: No

**Program Name:** TURNING POINT TREATMENT CENTER  
Legal Name: TURNING POINT TREATMENT CENTER, INC.  
Address: 30235 YNEZ ROAD  
City, State Zip: TEMECULA, CA 92592  
Phone: (951) 308-1913 Fax: (951) 308-9133  
**Record ID:** 330154AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 9/30/2018 IMS: No

**Program Name:** AXIS RESIDENTIAL TREATMENT, LLC  
Legal Name: AXIS RESIDENTIAL TREATMENT, LLC  
Address: 75450 FAIRWAY DRIVE  
City, State Zip: INDIAN WELLS, CA 92210  
Phone: (760) 469-8275 Fax: (760) 346-8032  
**Record ID:** 330155AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 9/30/2018 IMS: No

**Program Name:** SAN DIEGO DETOX, INC.  
Legal Name: SAN DIEGO DETOX, INC.  
Address: 9480 PATS POINT  
City, State Zip: CORONA, CA 92883  
Phone: (951) 987-0540  
**Record ID:** 330156CP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 4/30/2019 IMS: No

**Program Name:** SAN DIEGO DETOX, INC.  
Legal Name: SAN DIEGO DETOX, INC.  
Address: 9440 PATS POINT  
City, State Zip: CORONA, CA 92883  
Phone: (951) 987-0540  
**Record ID:** 330156DP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 4/30/2019 IMS: No

**Program Name:** BRISAS IOP  
Legal Name: BRISAS IOP, LLC  
Address: 5700 DIVISION STREET, SUITE 200-A AND SUITE 200-B  
City, State Zip: RIVERSIDE, CA 92506  
Phone: (951) 205-5888 Fax: (951) 346-3399  
**Record ID:** 330157AP  
Service Type: NON-DETOX  
Target Population: 1.1  
Expiration Date: 2/28/2019 IMS: No

**Program Name:** DIVINE INTERVENTION RECOVERY RANCH  
Legal Name: THE ROSE OF SHARON 7  
Address: 23931 S. WARREN ROAD  
City, State Zip: SAN JACINTO, CA 92582  
Phone: (760) 618-1286 Fax: (951) 926-1173  
**Record ID:** 330158AN  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.3  
Expiration Date: 1/31/2019 IMS: No

**Program Name:** ASCENSION TREATMENT CENTERS CALIFORNIA, LLC  
Legal Name: ASCENSION TREATMENT CENTERS CALIFORNIA, LLC  
Address: 555 S PALM CANYON DRIVE, A202  
City, State Zip: PALM SPRINGS, CA 92264  
Phone: (760) 396-7436  
**Record ID:** 330159AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 12/31/2018 IMS: No

**Program Name:** ASCENSION TREATMENT CENTERS CALIFORNIA, LLC  
Legal Name: ASCENSION TREATMENT CENTERS CALIFORNIA, LLC  
Address: 280 E. MEL AVE.  
City, State Zip: PALM SPRINGS, CA 92262  
Phone: (760) 396-7436  
**Record ID:** 330159BP  
Service Type: RES-DETOX  
Resident Capacity: 14  
Total Occupancy: 14  
Target Population: 1.1  
Expiration Date: 6/30/2019 IMS: No

**Program Name:** JILOA TREATMENT  
Legal Name: JILOA TREATMENT AND RECOVERY CENTERS, INC.  
Address: 26340 KALMIA AVENUE  
City, State Zip: MORENO VALLEY, CA 92555  
Phone: (951) 203-4474 Fax: (951) 208-4491  
**Record ID:** 330160AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.8  
Expiration Date: 1/31/2019 IMS: No

**Program Name:** NATURAL REST HOUSE  
Legal Name: NATURAL REST HOUSE, INC.  
Address: 79100 OCOTILLO DRIVE  
City, State Zip: LA QUINTA, CA 92270  
Phone: (812) 204-4324  
**Record ID:** 330161AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.8  
Expiration Date: 6/30/2019 IMS: No

**Program Name:** BETTY FORD CENTER - OUTPATIENT PROGRAM  
Legal Name: HAZELDEN BETTY FORD FOUNDATION  
Address: 39000 BOB HOPE DRIVE  
City, State Zip: RANCHO MIRAGE, CA 92270  
Phone: (866) 831-5700 Fax: (760) 733-1807  
**Record ID:** 330164AN  
Service Type: NON  
Target Population: 1.7  
Expiration Date: 5/31/2019 IMS: No

**Program Name:** EVOLVE DETOX AND REHABILITATION CENTER, INC.  
Legal Name: EVOLVE DETOX AND REHABILITATION CENTER, INC.  
Address: 6560 SANDY LANE  
City, State Zip: RIVERSIDE, CA 92505  
Phone: (714) 232-0649 Fax: (714) 252-0173  
**Record ID:** 330165AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 5/31/2019 IMS: No

**Program Name:** TRANQUIL PALMS  
Legal Name: SBR RECOVERY. LLC  
Address: 44-775 DEEP CANYON ROAD  
City, State Zip: PALM DESERT, CA 92260  
Phone: (858) 345-7422  
**Record ID:** 330166AP  
Service Type: NON  
Target Population: 1.3  
Expiration Date: 3/31/2019 IMS: No

**Program Name:** GRAND TERRACE DETOX AND RECOVERY  
Legal Name: GRAND TERRACE DETOX AND RECOVERY  
Address: 18989 SOUTH GRAND AVE.  
City, State Zip: LAKE ELSINORE, CA 92530  
Phone: (951) 201-9145 Fax: (714) 252-0173  
**Record ID:** 330168AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 6/30/2019 IMS: No

State of California, Department of Health Care Services  
Licensed Residential Facilities and/or  
Certified Alcohol and Drug Programs

As of 9/1/2017

Sacramento County

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**Program Name:** ALPHA OAKS  
Legal Name: ASSOCIATED REHABILITATION PROGRAM FOR WOMEN, INC.  
Address: 8400 FAIR OAKS BOULEVARD  
City, State Zip: CARMICHAEL, CA 95608-2502  
Phone: (916) 944-3920 Fax: (916) 944-7740  
**Record ID:** 340001AN  
Service Type: RES-DETOX  
Resident Capacity: 23  
Total Occupancy: 23  
Target Population: 1.3  
Expiration Date: 5/31/2018 IMS: No

**Program Name:** CORNERSTONE  
Legal Name: ASSOCIATED REHABILITATION PROGRAM FOR WOMEN, INC.  
Address: 6348 AND 6350 APPIAN WAY  
City, State Zip: CARMICHAEL, CA 95608-0724  
Phone: (916) 966-5102 Fax: (916) 966-9362  
**Record ID:** 340001BN  
Service Type: RES  
Resident Capacity: 11  
Total Occupancy: 12  
Target Population: 1.3  
Expiration Date: 4/30/2018 IMS: No

**Program Name:** ALTUA  
Legal Name: RIVER CITY RECOVERY CENTER, INC.  
Address: 12490 ALTA MESA ROAD  
City, State Zip: HERALD, CA 95638-8409  
Phone: (209) 748-2470  
**Record ID:** 340002AN  
Service Type: RES  
Resident Capacity: 55  
Total Occupancy: 55  
Target Population: 1.2  
Expiration Date: 7/31/2018 IMS: No

**Program Name:** STARLIGHT  
Legal Name: RIVER CITY RECOVERY CENTER, INC.  
Address: 2218 E STREET  
City, State Zip: SACRAMENTO, CA 95816  
Phone: (916) 442-4519 Fax: (916) 442-3577  
**Record ID:** 340002BN  
Service Type: RES  
Resident Capacity: 24  
Total Occupancy: 26  
Target Population: 1.3  
Expiration Date: 11/30/2018 IMS: No

**Program Name:** SOBRIETY BRINGS A CHANGE  
Legal Name: SOBRIETY BRINGS A CHANGE  
Address: 4600 47TH AVENUE #102  
City, State Zip: SACRAMENTO, CA 95824-3923  
Phone: (916) 454-4242  
**Record ID:** 340008AN  
Service Type: NON  
Target Population: 1.5  
Expiration Date: 9/30/2018 IMS: No

**Program Name:** ALTERNATIVE HOUSE  
Legal Name: WELLSPACE HEALTH  
Address: 1550 JULIESSE AVENUE  
City, State Zip: SACRAMENTO, CA 95815-1803  
Phone: (916) 921-6598  
**Record ID:** 340015AN  
Service Type: RES-DETOX  
Resident Capacity: 48  
Total Occupancy: 48  
Target Population: 1.1  
Expiration Date: 2/28/2018 IMS: No

**Program Name:** CRISIS INTAKE AND COUNSELING CENTER  
Legal Name: WELLSPACE HEALTH  
Address: 1820 J STREET  
City, State Zip: SACRAMENTO, CA 95811-3010  
Phone: (916) 325-5556 Fax: (916) 444-5620  
**Record ID:** 340015CN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 1/31/2018 IMS: No

**Program Name:** OPTIONS FOR RECOVERY - RESIDENTIAL TREATMENT PROGRAM  
Legal Name: VOLUNTEERS OF AMERICA NORTHERN CALIFORNIA AND NORTHERN NEVADA, INC.  
Address: 1001 GRAND AVENUE  
City, State Zip: SACRAMENTO, CA 95838-3512  
Phone: (916) 929-1951 Fax: (916) 929-5116  
**Record ID:** 340018AN  
Service Type: RES-DETOX  
Resident Capacity: 16  
Total Occupancy: 28  
Target Population: 1.4  
Expiration Date: 11/30/2018 IMS: No

**Program Name:** D & A DETOX CENTER  
Legal Name: D & A DETOX CENTER  
Address: 2721 BARBERA WAY  
City, State Zip: RANCHO CORDOVA, CA 95670-4804  
Phone: (916) 364-7660  
**Record ID:** 340035CN  
Service Type: RES-DETOX  
Resident Capacity: 10  
Total Occupancy: 10  
Target Population: 1.1  
Expiration Date: 3/31/2018 IMS: No

**Program Name:** D & A TREATMENT CENTER  
Legal Name: D & A DETOX CENTER  
Address: 10157 LA ALEGRIA DRIVE  
City, State Zip: RANCHO CORDOVA, CA 95670-3109  
Phone: (916) 361-2833 Fax: (916) 364-5389  
**Record ID:** 340035FN  
Service Type: RES  
Resident Capacity: 10  
Total Occupancy: 10  
Target Population: 1.2  
Expiration Date: 6/30/2019 IMS: No

**Program Name:** ANOTHER CHOICE, ANOTHER CHANCE  
Legal Name: ANOTHER CHOICE, ANOTHER CHANCE  
Address: 7000 FRANKLIN BOULEVARD  
SUITES 625 AND 670  
City, State Zip: SACRAMENTO, CA 95823  
Phone: (916) 388-9418  
**Record ID:** 340037AN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 6/30/2018 IMS: No



**Program Name:** SACRAMENTO COUNTY ADULT DRUG COURT  
Legal Name: SACRAMENTO COUNTY ADULT DRUG COURT  
Address: 3201 FLORIN-PERKINS ROAD  
City, State Zip: SACRAMENTO, CA 95826-3900  
Phone: (916) 875-1171  
**Record ID:** 340038AN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 10/31/2018 IMS: No

**Program Name:** NEW DAWN TREATMENT CENTERS  
Legal Name: CDT SERVICE CORPORATION  
Address: 6371 AUBURN BOULEVARD, SUITE A  
City, State Zip: CITRUS HEIGHTS, CA 95621-5275  
Phone: (916) 723-1319 Fax: (866) 575-1276  
**Record ID:** 340039AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 11/30/2018 IMS: No

**Program Name:** NEW DAWN TREATMENT CENTERS  
Legal Name: CDT SERVICE CORPORATION  
Address: 6039, 6040, 6043, AND 6045 ROLOFF WAY  
City, State Zip: ORANGEVALE, CA 95662-4544  
Phone: (916) 989-1675 Fax: (866) 892-3394  
**Record ID:** 340039BP  
Service Type: RES  
Resident Capacity: 22  
Total Occupancy: 22  
Target Population: 1.1  
Expiration Date: 11/30/2017 IMS: No

**Program Name:** NEW DAWN TREATMENT CENTERS  
Legal Name: CDT SERVICE CORPORATION  
Address: 8780 & 8782 SHERRY DRIVE  
City, State Zip: ORANGEVALE, CA 95662-4534  
Phone: (916) 989-1675 Fax: (866) 892-3394  
**Record ID:** 340039CP  
Service Type: RES-DETOX  
Resident Capacity: 11  
Total Occupancy: 11  
Target Population: 1.1  
Expiration Date: 2/28/2019 IMS: No

**Program Name:** NEW DAWN TREATMENT CENTERS  
Legal Name: CDT SERVICE CORPORATION  
Address: 9960 BUSINESS PARK DRIVE, SUITE 160  
City, State Zip: SACRAMENTO, CA 95827-1733  
Phone: (916) 363-2732  
**Record ID:** 340039EP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 10/31/2017 IMS: No

**Program Name:** THE PROMISE HOUSE  
Legal Name: BRIDGES PROFESSIONAL TREATMENT SERVICES  
Address: 2727 P STREET  
City, State Zip: SACRAMENTO, CA 95816-6403  
Phone: (916) 452-3073  
**Record ID:** 340041BN  
Service Type: RES-DETOX  
Resident Capacity: 28  
Total Occupancy: 28  
Target Population: 1.4  
Expiration Date: 10/31/2017 IMS: No

**Program Name:** BRIDGES OUTPATIENT TREATMENT SERVICES  
Legal Name: BRIDGES PROFESSIONAL TREATMENT SERVICES  
Address: 3600 POWER INN ROAD, SUITE D  
City, State Zip: SACRAMENTO, CA 95826-3826  
Phone: (916) 453-2704 Fax: (916) 453-2708  
**Record ID:** 340041CN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 1/31/2019 IMS: No

**Program Name:** BRIDGES RESIDENTIAL  
Legal Name: BRIDGES PROFESSIONAL TREATMENT SERVICES  
Address: 1731 P STREET  
City, State Zip: SACRAMENTO, CA 95814-6104  
Phone: (916) 450-0700 Fax: (916) 930-0554  
**Record ID:** 340041DN  
Service Type: RES-DETOX  
Resident Capacity: 28  
Total Occupancy: 28  
Target Population: 1.2  
Expiration Date: 7/31/2019 IMS: No

**Program Name:** CARES ALCOHOL AND OTHER DRUG OUTPATIENT PROGRAM  
Legal Name: THE CENTER FOR A.I.D.S. RESEARCH, EDUCATION AND SERVICES - SACRAMENTO  
Address: 1500 21ST STREET  
City, State Zip: SACRAMENTO, CA 95814-5216  
Phone: (916) 443-3299 Fax: (916) 325-1980  
**Record ID:** 340042BN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 10/31/2017 IMS: No

**Program Name:** CENTER POINT  
Legal Name: CENTER POINT, INC.  
Address: 11228 FAIR OAKS BOULEVARD  
City, State Zip: FAIR OAKS, CA 95628-5139  
Phone: (916) 962-2800 Fax: (415) 492-8844  
**Record ID:** 340048AN  
Service Type: RES  
Resident Capacity: 31  
Total Occupancy: 35  
Target Population: 1.4  
Expiration Date: 9/30/2017 IMS: No

**Program Name:** NATIONAL COUNCIL ON ALCOHOLISM AND  
DRUG DEPENDENCE SACRAMENTO REGION AFFILIATE  
Legal Name: NATIONAL COUNCIL ON ALCOHOLISM AND  
DRUG DEPENDENCE INC. SACRAMENTO REGION AFFILIATE  
Address: 2143 HURLEY WAY  
City, State Zip: SACRAMENTO, CA 95825  
Phone: (916) 922-5110 Fax: (916) 921-1832  
**Record ID:** 340052BN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 5/31/2018 IMS: No

**Program Name:** SACRAMENTO VETERANS RESOURCE CENTER  
Legal Name: VIETNAM VETERANS OF CALIFORNIA, INC.  
Address: 7270 EAST SOUTHGATE DRIVE, BUILDING 4  
City, State Zip: SACRAMENTO, CA 95823-2621  
Phone: (916) 393-8387 Fax: (916) 393-8389  
**Record ID:** 340058AN  
Service Type: RES  
Resident Capacity: 22  
Total Occupancy: 22  
Target Population: 1.1  
Expiration Date: 11/30/2017 IMS: No

**Program Name:** KOINONIA GROUP HOME #5  
Legal Name: KOINONIA FOSTER HOMES, INC.  
Address: 4232 BIG CLOUD WAY  
City, State Zip: ANTELOPE, CA 95843-2406  
Phone: (916) 652-0171 Fax: (916) 652-3979  
**Record ID:** 340063AN  
Service Type: DSS  
Target Population: 1.5  
Expiration Date: 10/31/2018 IMS: No

**Program Name:** CLEAN & SOBER DETOX  
Legal Name: CLEAN & SOBER DETOX, A CALIFORNIA NONPROFIT CORPORATION  
Address: 8946 MADISON AVENUE  
City, State Zip: FAIR OAKS, CA 95628-4010  
Phone: (916) 965-3386 Fax: (916) 536-1393  
**Record ID:** 340067AN  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 7  
Target Population: 1.1  
Expiration Date: 10/31/2017 IMS: No

**Program Name:** AZURE ACRES IOP  
Legal Name: THE CAMP RECOVERY CENTER, LLC  
Address: 2641 COTTAGE WAY  
SUITES 8, 9 AND 10  
City, State Zip: SACRAMENTO, CA 95825  
Phone: (916) 338-0400 Fax: (916) 338-3589  
**Record ID:** 340078AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 10/31/2017 IMS: No

**Program Name:** SACRAMENTO TREATMENT CLINIC  
Legal Name: TREATMENT ASSOCIATES, INC.  
Address: 7225 EAST SOUTHGATE DRIVE, SUITE D  
City, State Zip: SACRAMENTO, CA 95823-2651  
Phone: (760) 710-0951 Fax: (916) 394-1010  
**Record ID:** 340080AP  
Service Type: NON-DETOX  
Target Population: 1.1  
Expiration Date: 11/30/2018 IMS: No

**Program Name:** SACRAMENTO NATIVE AMERICAN HEALTH CENTER  
Legal Name: SACRAMENTO NATIVE AMERICAN HEALTH CENTER, INC.  
Address: 2020 J STREET  
City, State Zip: SACRAMENTO, CA 95814-3120  
Phone: (916) 341-0575 Fax: (916) 341-0574  
**Record ID:** 340082AN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 4/30/2018 IMS: No

**Program Name:** STRATEGIES FOR CHANGE OUTPATIENT  
Legal Name: STRATEGIES FOR CHANGE  
Address: 4441 AUBURN BOULEVARD, SUITE E  
City, State Zip: SACRAMENTO, CA 95841-4139  
Phone: (916) 473-5764 Fax: (916) 473-5766  
**Record ID:** 340084AN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 7/31/2019 IMS: No

**Program Name:** STRATEGIES FOR CHANGE  
 Legal Name: STRATEGIES FOR CHANGE  
 Address: 4343 WILLIAMSBOURGH DRIVE  
 City, State Zip: SACRAMENTO, CA 95823-2006  
 Phone: (916) 395-3552  
**Record ID:** 340084BN  
 Service Type: NON  
 Target Population: 1.1  
 Expiration Date: 8/31/2018 IMS: No

**Program Name:** SIERRA VISTA HOSPITAL OUTPATIENT CD PROGRAM  
 Legal Name: BHC SIERRA VISTA HOSPITAL, INC.  
 Address: 8009 BRUCEVILLE ROAD #100  
 City, State Zip: SACRAMENTO, CA 95823-2332  
 Phone: (916) 288-0300 Fax: (916) 689-5517  
**Record ID:** 340090AP  
 Service Type: NON  
 Target Population: 1.1  
 Expiration Date: 1/31/2018 IMS: No

**Program Name:** CLEAN & SOBER RECOVERY HOME  
 Legal Name: CLEAN & SOBER RECOVERY SERVICES, INC.  
 Address: 5820 CHESTNUT AVENUE  
 City, State Zip: ORANGEVALE, CA 95662-4807  
 Phone: (916) 990-0190 Fax: (916) 990-0193  
**Record ID:** 340093AP  
 Service Type: RES  
 Resident Capacity: 24  
 Total Occupancy: 24  
 Target Population: 1.1  
 Expiration Date: 3/31/2018 IMS: No

**Program Name:** CLEAN & SOBER RECOVERY SERVICES, INC.  
 Legal Name: CLEAN & SOBER RECOVERY SERVICES, INC.  
 Address: 9198 GREENBACK LANE, SUITE 101  
 City, State Zip: ORANGEVALE, CA 95662  
 Phone: (916) 990-0190 Fax: (916) 990-0193  
**Record ID:** 340093BP  
 Service Type: NON  
 Target Population: 1.1  
 Expiration Date: 2/28/2019 IMS: No

**Program Name:** PATHWAYS RECOVERY  
 Legal Name: PATHWAYS RECOVERY  
 Address: 6538 GREY OAK COURT  
 City, State Zip: CITRUS HEIGHTS, CA 95621-1024  
 Phone: (916) 735-8377 Fax: (877) 494-5088  
**Record ID:** 340098AP  
 Service Type: RES-DETOX  
 Resident Capacity: 6  
 Total Occupancy: 6  
 Target Population: 1.1  
 Expiration Date: 2/28/2018 IMS: No

**Program Name:** TOWNS HEALTH SERVICES  
 Legal Name: TOWNS HEALTH SERVICES, INC.  
 Address: 750 SPAANS DRIVE  
 SUITE C, D, AND F  
 City, State Zip: GALT, CA 95632-8609  
 Phone: (916) 612-2452 Fax: (209) 744-9910  
**Record ID:** 340100AP  
 Service Type: NON  
 Target Population: 1.1  
 Expiration Date: 3/31/2018 IMS: No

**Program Name:** PALM TREE RANCH  
Legal Name: TOWNS HEALTH SERVICES, INC.  
Address: 12370 CLAY STATION ROAD  
City, State Zip: HERALD, CA 95638  
Phone: (209) 748-2628  
**Record ID:** 340100BP  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 7  
Target Population: 1.1  
Expiration Date: 1/31/2018 IMS: No

**Program Name:** SACRAMENTO RECOVERY HOUSE  
Legal Name: SACRAMENTO RECOVERY HOUSE, INC.  
Address: 1914 22ND STREET  
City, State Zip: SACRAMENTO, CA 95816-7109  
Phone: (916) 455-6258  
**Record ID:** 340103AN  
Service Type: RES  
Resident Capacity: 17  
Total Occupancy: 18  
Target Population: 1.2  
Expiration Date: 8/31/2018 IMS: No

**Program Name:** GATEWAY HOUSE  
Legal Name: SACRAMENTO RECOVERY HOUSE, INC.  
Address: 4049 MILLER WAY  
City, State Zip: SACRAMENTO, CA 95817-1332  
Phone: (916) 451-9312 Fax: (916) 451-8014  
**Record ID:** 340103BN  
Service Type: RES  
Resident Capacity: 18  
Total Occupancy: 18  
Target Population: 1.3  
Expiration Date: 5/31/2018 IMS: No

**Program Name:** VERITAS COUNSELING CDIOP  
Legal Name: VERITAS COUNSELING CDIOP  
Address: 3137 DWIGHT ROAD, SUITE 600  
City, State Zip: ELK GROVE, CA 95758-6472  
Phone: (916) 422-1319 Fax: (916) 422-1321  
**Record ID:** 340105AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 9/30/2017 IMS: No

**Program Name:** VALLEY RECOVERY CENTER OF CALIFORNIA  
Legal Name: SUMMIT BHC SACRAMENTO, LLC  
Address: 2221 FAIR OAKS BOULEVARD  
City, State Zip: SACRAMENTO, CA 95825-5501  
Phone: (916) 514-8500  
**Record ID:** 340106AP  
Service Type: RES-DETOX  
Resident Capacity: 48  
Total Occupancy: 48  
Target Population: 1.1  
Expiration Date: 4/30/2018 IMS: No

**Program Name:** CEDAR POINT RECOVERY  
Legal Name: CEDAR POINT RECOVERY, LLC  
Address: 8950 CAL CENTER DRIVE, SUITE 160  
City, State Zip: SACRAMENTO, CA 95826  
Phone: (916) 273-4543 Fax: (916) 376-7467  
**Record ID:** 340109AP  
Service Type: NON-DETOX  
Target Population: 1.1  
Expiration Date: 10/31/2017 IMS: No

**Program Name:** CEDAR POINT RECOVERY  
Legal Name: CEDAR POINT RECOVERY, LLC  
Address: 1099 STEWART ROAD  
City, State Zip: SACRAMENTO, CA 95864-5303  
Phone: (844) 262-0337 Fax: (916) 514-9307  
**Record ID:** 340109BP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 10  
Target Population: 1.1  
Expiration Date: 10/31/2017 IMS: No

**Program Name:** HOPE @ LAST  
Legal Name: LAST ENTERPRISE, INC.  
Address: 6326 MAIN AVENUE,  
22  
City, State Zip: ORANGEVALE, CA 95662  
Phone: (916) 671-1767  
**Record ID:** 340110AP  
Service Type: NON  
Target Population: 1.3  
Expiration Date: 7/31/2018 IMS: No

**Program Name:** DIAMOND HOUSE DETOX  
Legal Name: PSYCHNP CONSULTANTS, INC.  
Address: 8624 DIAMOND OAK WAY  
City, State Zip: ELK GROVE, CA 95624  
Phone: (425) 941-2436  
**Record ID:** 340111AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 11/30/2018 IMS: No

**Program Name:** AKUA MIND & BODY  
Legal Name: AKUA BEHAVIORAL HEALTH, INC.  
Address: 10087 TERRA LOMA DRIVE  
City, State Zip: RANCHO CORDOVA, CA 95670  
Phone: (916) 368-7074 Fax: (916) 368-7090  
**Record ID:** 340113AP  
Service Type: RES  
Resident Capacity: 20  
Total Occupancy: 20  
Target Population: 1.1  
Expiration Date: 3/31/2019 IMS: No

State of California, Department of Health Care Services  
Licensed Residential Facilities and/or  
Certified Alcohol and Drug Programs

As of 9/1/2017

San Benito County

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**Program Name:** SAN BENITO COUNTY BEHAVIORAL HEALTH  
**Legal Name:** SAN BENITO COUNTY BEHAVIORAL HEALTH  
**Address:** 1131 SAN FELIPE ROAD  
**City, State Zip:** HOLLISTER, CA 95023  
**Phone:** (831) 636-4020 **Fax:** (831) 636-4015  
**Record ID:** 350001AN  
**Service Type:** NON  
**Target Population:** 1.1  
**Expiration Date:** 4/30/2019 **IMS:** No

**Program Name:** BRIGHT FUTURE RECOVERY, INC.  
**Legal Name:** BRIGHT FUTURE RECOVERY, INC.  
**Address:** 1000 FAIRVIEW ROAD  
**City, State Zip:** HOLLISTER, CA 95023  
**Phone:** (831) 245-7736  
**Record ID:** 350002AP  
**Service Type:** RES-DETOX  
**Resident Capacity:** 12  
**Total Occupancy:** 12  
**Target Population:** 1.1  
**Expiration Date:** 6/30/2019 **IMS:** No

State of California, Department of Health Care Services  
Licensed Residential Facilities and/or  
Certified Alcohol and Drug Programs

As of 9/1/2017

San Bernardino County

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**Program Name:** RECOVERY CENTER  
**Legal Name:** INLAND VALLEY DRUG AND ALCOHOL RECOVERY SERVICES  
**Address:** 934 NORTH MOUNTAIN AVENUE,  
SUITES A, B, C AND D  
**City, State Zip:** UPLAND, CA 91786  
**Phone:** (909) 949-4667  
**Record ID:** 360001AAN  
**Service Type:** NON  
**Target Population:** 1.1  
**Expiration Date:** 5/31/2019                      **IMS:** No

**Program Name:** INLAND VALLEY RECOVERY SERVICES - SAN BERNARDINO RECOVERY CENTER  
**Legal Name:** INLAND VALLEY DRUG AND ALCOHOL RECOVERY SERVICES  
**Address:** 939 N. D STREET, BUILDINGS A & B AND 955 N. D STREET  
**City, State Zip:** SAN BERNARDINO, CA 92410  
**Phone:** (909) 889-6519                      **Fax:** (909) 889-6560  
**Record ID:** 360001ABN  
**Service Type:** NON  
**Target Population:** 1.1  
**Expiration Date:** 4/30/2018                      **IMS:** No

**Program Name:** WOMEN'S AND MEN'S RESIDENTIAL SERVICES  
**Legal Name:** INLAND VALLEY DRUG AND ALCOHOL RECOVERY SERVICES  
**Address:** 1260 ARROW HIGHWAY, BUILDING B & C  
**City, State Zip:** UPLAND, CA 91786  
**Phone:** (909) 932-1069                      **Fax:** (909) 932-1087  
**Record ID:** 360001ZLN  
**Service Type:** RES-DETOX  
**Resident Capacity:** 130  
**Total Occupancy:** 130  
**Target Population:** 1.4  
**Expiration Date:** 2/28/2018                      **IMS:** No

**Program Name:** CEDAR HOUSE LIFE CHANGE CENTER  
**Legal Name:** SOCIAL SCIENCE SERVICES, INC.  
**Address:** 18612 SANTA ANA AVENUE  
**City, State Zip:** BLOOMINGTON, CA 92316  
**Phone:** (909) 421-7120  
**Record ID:** 360002CN  
**Service Type:** NON  
**Target Population:** 1.1  
**Expiration Date:** 1/31/2018                      **IMS:** No

**Program Name:** CEDAR HOUSE LIFE CHANGE CENTER  
**Legal Name:** SOCIAL SCIENCE SERVICES, INC.  
**Address:** 18612 SANTA ANA AVENUE  
**City, State Zip:** BLOOMINGTON, CA 92316  
**Phone:** (909) 421-7120  
**Record ID:** 360002DN  
**Service Type:** RES  
**Resident Capacity:** 125  
**Total Occupancy:** 125  
**Target Population:** 1.1  
**Expiration Date:** 1/31/2018                      **IMS:** No



**Program Name:** CEDAR HOUSE LIFE CHANGE CENTER  
Legal Name: SOCIAL SCIENCE SERVICES, INC.  
Address: 10888 MAPLE AVENUE  
City, State Zip: BLOOMINGTON, CA 92316  
Phone: (909) 873-0478 Fax: (909) 421-7128  
**Record ID:** 360002FN  
Service Type: RES  
Resident Capacity: 11  
Total Occupancy: 26  
Target Population: 1.4  
Expiration Date: 10/31/2017 IMS: No

**Program Name:** ST. JOHN OF GOD HEALTH CARE SERVICES  
Legal Name: ST. JOHN OF GOD HEALTH CARE SERVICES  
Address: 13333 PALMDALE ROAD  
City, State Zip: VICTORVILLE, CA 92392  
Phone: (760) 241-4917  
**Record ID:** 360003HN  
Service Type: RES-DETOX  
Resident Capacity: 66  
Total Occupancy: 82  
Target Population: 1.1  
Expiration Date: 5/31/2018 IMS: No

**Program Name:** ST. JOHN OF GOD HEALTH CARE SERVICES  
Legal Name: ST. JOHN OF GOD HEALTH CARE SERVICES  
Address: 15534 6TH STREET  
City, State Zip: VICTORVILLE, CA 92392  
Phone: (760) 241-4917 Fax: (760) 241-8911  
**Record ID:** 360003IN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 11/30/2017 IMS: No

**Program Name:** GIBSON HOUSE FOR MEN  
Legal Name: VARP, INC.  
Address: 1100, 1078 AND 1094 NORTH D STREET, AND 1087 NORTH STODDARD STREET  
City, State Zip: SAN BERNARDINO, CA 92410  
Phone: (909) 381-3774  
**Record ID:** 360004BN  
Service Type: RES  
Resident Capacity: 58  
Total Occupancy: 61  
Target Population: 1.2  
Expiration Date: 8/31/2018 IMS: No

**Program Name:** GIBSON HOUSE RECOVERY CENTER FOR WOMEN  
Legal Name: VARP, INC.  
Address: 1103, 1107, 1069, 1135, 1139, NORTH D STREET AND  
382 & 384 11TH STREET  
City, State Zip: SAN BERNARDINO, CA 92410  
Phone: (909) 888-6956  
**Record ID:** 360004FN  
Service Type: RES  
Resident Capacity: 53  
Total Occupancy: 62  
Target Population: 1.3  
Expiration Date: 8/31/2018 IMS: No

**Program Name:** VARP, INC. OUTPATIENT PROGRAM  
Legal Name: VARP, INC.  
Address: 1149 NORTH D STREET  
City, State Zip: SAN BERNARDINO, CA 92410  
Phone: (909) 381-3774 Fax: (909) 381-6845  
**Record ID:** 360004TN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 10/31/2018 IMS: No

**Program Name:** PINE RIDGE TREATMENT CENTER  
Legal Name: PINE RIDGE TREATMENT CENTER, INCORPORATED  
Address: 2727 HIGHLAND DRIVE  
City, State Zip: RUNNING SPRINGS, CA 92382  
Phone: (909) 867-7028  
**Record ID:** 360007AP  
Service Type: RES  
Resident Capacity: 24  
Total Occupancy: 24  
Target Population: 1.2  
Expiration Date: 9/30/2017 IMS: No

**Program Name:** PINE RIDGE TREATMENT CENTERS, INC. - VICTORVILLE  
Legal Name: PINE RIDGE TREATMENT CENTER, INCORPORATED  
Address: 15367 BONANZA ROAD, #A  
City, State Zip: VICTORVILLE, CA 92392  
Phone: (760) 955-1012 Fax: (760) 955-4811  
**Record ID:** 360007BP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 9/30/2017 IMS: No

**Program Name:** PINE RIDGE TREATMENT CENTERS, INC. - SAN BERNARDINO  
Legal Name: PINE RIDGE TREATMENT CENTER, INCORPORATED  
Address: 1881 COMMERCENTER EAST, SUITE 220  
City, State Zip: SAN BERNARDINO, CA 92408  
Phone: (909) 890-0294  
**Record ID:** 360007CP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 9/30/2017 IMS: No

**Program Name:** PINE RIDGE TREATMENT CENTER - LUCERNE VALLEY  
Legal Name: PINE RIDGE TREATMENT CENTERS, INCORPORATED  
Address: 9401 CRYSTAL CREEK ROAD  
City, State Zip: LUCERNE VALLEY, CA 92356  
Phone: (760) 248-9199  
**Record ID:** 360007DP  
Service Type: RES-DETOX  
Resident Capacity: 24  
Total Occupancy: 24  
Target Population: 1.1  
Expiration Date: 6/30/2018 IMS: No

**Program Name:** INLAND BEHAVIORAL AND HEALTH SERVICES, INC.  
Legal Name: INLAND BEHAVIORAL AND HEALTH SERVICES, INC.  
Address: 1963 NORTH E STREET  
City, State Zip: SAN BERNARDINO, CA 92405  
Phone: (909) 881-6146 Fax: (909) 881-0111  
**Record ID:** 360015AN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 11/30/2017 IMS: No

**Program Name:** MATRIX INSTITUTE ON ADDICTIONS  
Legal Name: MATRIX INSTITUTE ON ADDICTIONS  
Address: 11777 SEBASTIAN WAY, SUITES 102 A & B  
City, State Zip: RANCHO CUCAMONGA, CA 91730  
Phone: (909) 989-9724  
**Record ID:** 360020AN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 5/31/2019 IMS: No

**Program Name:** DAP RECOVERY HOME  
Legal Name: DRUG ALTERNATIVE PROGRAM  
Address: 11805 AND 11816 ARLISS LANE  
City, State Zip: GRAND TERRACE, CA 92313  
Phone: (909) 783-1094  
**Record ID:** 360021BN  
Service Type: RES  
Resident Capacity: 12  
Total Occupancy: 12  
Target Population: 1.2  
Expiration Date: 8/31/2017 IMS: No

**Program Name:** HIGH DESERT CHILD ADOLESCENT AND FAMILY SERVICES CENTER  
Legal Name: HIGH DESERT CHILD ADOLESCENT AND FAMILY SERVICES CENTER, INCORPORATED  
Address: 16248 VICTOR STREET  
City, State Zip: VICTORVILLE, CA 92395  
Phone: (760) 243-7151 Fax: (760) 952-1432  
**Record ID:** 360030AN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 10/31/2017 IMS: No

**Program Name:** HIGH DESERT CHILD ADOLESCENT AND FAMILY SERVICES CENTER, INC.  
Legal Name: HIGH DESERT CHILD ADOLESCENT AND FAMILY SERVICES CENTER, INCORPORATED  
Address: 225 BARSTOW ROAD  
City, State Zip: BARSTOW, CA 92311  
Phone: (760) 243-7151  
**Record ID:** 360030BN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 8/31/2019 IMS: No

**Program Name:** PRIDE  
Legal Name: MENTAL HEALTH SYSTEMS, INC.  
Address: 1874 BUSINESS DRIVE, SUITE B  
City, State Zip: SAN BERNARDINO, CA 92408  
Phone: (858) 573-2600 Fax: (858) 573-5144  
**Record ID:** 360033AN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 3/31/2019 IMS: No

**Program Name:** VICTOR VALLEY CENTER FOR CHANGE  
Legal Name: MENTAL HEALTH SYSTEMS, INC.  
Address: 15770 MOJAVE DRIVE, SUITES K & L  
City, State Zip: VICTORVILLE, CA 92394  
Phone: (858) 573-2600 Fax: (858) 573-5144  
**Record ID:** 360033BN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 1/31/2019 IMS: No

**Program Name:** REDLANDS CENTER FOR CHANGE  
Legal Name: MENTAL HEALTH SYSTEMS, INC.  
Address: 1874 BUSINESS CENTER DRIVE, SUITE C  
City, State Zip: SAN BERNARDINO, CA 92408  
Phone: (858) 573-2600 Fax: (909) 335-1701  
**Record ID:** 360033DN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 3/31/2019 IMS: No

**Program Name:** CENTRAL VALLEY REGIONAL RECOVERY CENTER  
Legal Name: MENTAL HEALTH SYSTEMS, INC.  
Address: 1076 SANTO ANTONIO DRIVE, SUITES B, C & D  
City, State Zip: COLTON, CA 92324  
Phone: (858) 573-2600 Fax: (909) 433-9824  
**Record ID:** 360033HN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 9/30/2017 IMS: No

**Program Name:** NEEDLES CENTER FOR CHANGE  
Legal Name: MENTAL HEALTH SYSTEMS, INC.  
Address: 300 H STREET  
City, State Zip: NEEDLES, CA 92363  
Phone: (858) 573-2600 Fax: (858) 573-5144  
**Record ID:** 360033IN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 4/30/2018 IMS: No

**Program Name:** FONTANA CENTER FOR CHANGE  
Legal Name: MENTAL HEALTH SYSTEMS, INC.  
Address: 1076 SANTO ANTONIO DRIVE, SUITES B & D, ROOMS 2, 4 & 9  
City, State Zip: COLTON, CA 92324  
Phone: (858) 573-2600 Fax: (858) 573-5144  
**Record ID:** 360033JN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 9/30/2017 IMS: No

**Program Name:** SAN BERNARDINO CENTER FOR CHANGE  
Legal Name: MENTAL HEALTH SYSTEMS, INC.  
Address: 1874 BUSINESS CENTER DRIVE, SUITE A  
City, State Zip: SAN BERNARDINO, CA 92408  
Phone: (858) 573-2600 Fax: (909) 386-0529  
**Record ID:** 360033MN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 1/31/2019 IMS: No

**Program Name:** BIG BEAR CENTER FOR CHANGE  
Legal Name: MENTAL HEALTH SYSTEMS, INC.  
Address: 41945 BIG BEAR BOULEVARD, SUITE 208  
City, State Zip: BIG BEAR LAKE, CA 92315  
Phone: (909) 872-0223 Fax: (909) 872-1686  
**Record ID:** 360033NN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 8/31/2017 IMS: No

**Program Name:** YUCCA VALLEY CENTER FOR CHANGE  
Legal Name: MENTAL HEALTH SYSTEMS, INC.  
Address: 58945 BUSINESS CENTER DRIVE, SUITES J, N & P  
City, State Zip: YUCCA VALLEY, CA 92284  
Phone: (909) 872-0223 Fax: (909) 872-1686  
**Record ID:** 360033ON  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 9/30/2017 IMS: No

**Program Name:** JOSHUA TREE CENTER FOR CHANGE  
Legal Name: MENTAL HEALTH SYSTEMS, INC.  
Address: 61607 29 PALMS HIGHWAY, SUITE C & D  
City, State Zip: JOSHUA TREE, CA 92252  
Phone: (909) 872-0223 Fax: (909) 872-1686  
**Record ID:** 360033PN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 8/31/2017 IMS: No

**Program Name:** RIM FAMILY SERVICES  
Legal Name: RIM FAMILY SERVICES, INC.  
Address: 28545 HIGHWAY 18  
City, State Zip: SKY FOREST, CA 92385  
Phone: (909) 336-1800 Fax: (909) 336-0990  
**Record ID:** 360036AN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 6/30/2018 IMS: No

**Program Name:** RIALTO BEHAVIORAL ADDICTION TREATMENT SERVICES  
**Legal Name:** SAN BERNARDINO COUNTY BEHAVIORAL HEALTH DEPARTMENT  
**Address:** 850 E. FOOTHILL BOULEVARD, SUITE A, SECTIONS A-F  
**City, State Zip:** RIALTO, CA 92376  
**Phone:** (909) 421-9465 **Fax:** (909) 421-9457  
**Record ID:** 360050AN  
**Service Type:** NON  
**Target Population:** 1.4  
**Expiration Date:** 5/31/2019 **IMS:** No

**Program Name:** SAN BERNARDINO COUNTY - BARSTOW ADS  
**Legal Name:** SAN BERNARDINO COUNTY DEPARTMENT OF BEHAVIORAL HEALTH  
**Address:** 1841 E. MAIN STREET  
**City, State Zip:** BARSTOW, CA 92311  
**Phone:** (760) 255-5700 **Fax:** (760) 256-5092  
**Record ID:** 360050EN  
**Service Type:** NON  
**Target Population:** 1.1  
**Expiration Date:** 9/30/2017 **IMS:** No

**Program Name:** MARIPOSA COMMUNITY COUNSELING  
**Legal Name:** SAN BERNARDINO COUNTY DEPARTMENT OF BEHAVIORAL HEALTH  
**Address:** 2940 INLAND EMPIRE BOULEVARD  
**City, State Zip:** ONTARIO, CA 91764  
**Phone:** (909) 933-6341 **Fax:** (909) 933-6355  
**Record ID:** 360050HN  
**Service Type:** NON  
**Target Population:** 1.1  
**Expiration Date:** 3/31/2018 **IMS:** No

**Program Name:** SUPERVISED TREATMENT AFTER RELEASE PROGRAM (STAR)  
**Legal Name:** SAN BERNARDINO COUNTY BEHAVIORAL HEALTH DEPARTMENT  
**Address:** 1330 EAST COOLEY DRIVE, ROOMS 106, 119, 129, 131, 137, 200, 201, 203, 205, 206, LOBBY AND CLERICAL AREA  
**City, State Zip:** COLTON, CA 92324  
**Phone:** (909) 423-0750 **Fax:** (909) 423-0760  
**Record ID:** 360050IN  
**Service Type:** NON  
**Target Population:** 1.1  
**Expiration Date:** 11/30/2017 **IMS:** No

**Program Name:** FONTANA CHOICE SUBSTANCE USE DISORDER TREATMENT  
**Legal Name:** COUNTY OF SAN BERNARDINO, DEPARTMENT OF BEHAVIORAL HEALTH  
**Address:** 17830 ARROW BOULEVARD  
**City, State Zip:** FONTANA, CA 92335  
**Phone:** (909) 463-7556  
**Record ID:** 360050JN  
**Service Type:** NON  
**Target Population:** 1.1  
**Expiration Date:** 2/28/2019 **IMS:** No

**Program Name:** VICTORVILLE CHOICE SUBSTANCE USE DISORDER TREATMENT  
**Legal Name:** COUNTY OF SAN BERNARDINO, DEPARTMENT OF BEHAVIORAL HEALTH  
**Address:** 15480 RAMONA AVENUE  
**City, State Zip:** VICTORVILLE, CA 92392-2421  
**Phone:** (760) 243-8145 **Fax:** (909) 388-0898  
**Record ID:** 360050KN  
**Service Type:** NON  
**Target Population:** 1.1  
**Expiration Date:** 11/30/2017 **IMS:** No

**Program Name:** RIVERSIDE-SAN BERNARDINO COUNTY INDIAN HEALTH, INC. (SAN MANUEL CLINIC)  
**Legal Name:** RIVERSIDE-SAN BERNARDINO COUNTY INDIAN HEALTH, INC.  
**Address:** 11980 MOUNT VERNON AVENUE  
**City, State Zip:** GRAND TERRANCE, CA 92313  
**Phone:** (951) 864-1097 **Fax:** (951) 849-9633  
**Record ID:** 360058AN  
**Service Type:** NON  
**Target Population:** 1.8  
**Expiration Date:** 4/30/2019 **IMS:** No

**Program Name:** COLTON CLINICAL SERVICES  
Legal Name: WCHS, INC.  
Address: 2275 EAST COOLEY DRIVE  
City, State Zip: COLTON, CA 92324  
Phone: (909) 370-1777 Fax: (909) 370-1776  
**Record ID:** 360066AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 11/30/2018 IMS: No

**Program Name:** TIME FOR CHANGE FOUNDATION  
Legal Name: TIME FOR CHANGE FOUNDATION  
Address: 1255 EAST HIGHLAND AVENUE, SUITE 211  
City, State Zip: SAN BERNARDINO, CA 92404  
Phone: (909) 886-2994 Fax: (909) 886-0218  
**Record ID:** 360071AN  
Service Type: NON  
Target Population: 1.3  
Expiration Date: 6/30/2017 IMS: No

**Program Name:** NEW CREATION ADDICTION TREATMENT CENTER  
Legal Name: G AND C SWAN INC.  
Address: 11646 ENCANTO LANE AND 23950 PRADO LANE  
City, State Zip: COLTON, CA 92324  
Phone: (909) 981-6121 Fax: (909) 944-0192  
**Record ID:** 360075AP  
Service Type: RES-DETOX  
Resident Capacity: 16  
Total Occupancy: 16  
Target Population: 1.1  
Expiration Date: 4/30/2018 IMS: No

**Program Name:** HIS HOUSE  
Legal Name: G AND C SWAN INC.  
Address: 239 AND 215 WEST 9TH STREET, SUITE I, J AND K, AND  
227 NORTH PALM AVENUE  
City, State Zip: UPLAND, CA 91786  
Phone: (909) 981-6121 Fax: (909) 944-0192  
**Record ID:** 360075BP  
Service Type: RES-DETOX  
Resident Capacity: 30  
Total Occupancy: 31  
Target Population: 1.2  
Expiration Date: 4/30/2018 IMS: No

**Program Name:** HIS HOUSE  
Legal Name: G AND C SWAN INC.  
Address: 1354 CARLOS PLACE  
City, State Zip: ONTARIO, CA 91764  
Phone: (909) 519-0767 Fax: (909) 944-0192  
**Record ID:** 360075CP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.2  
Expiration Date: 12/31/2018 IMS: No

**Program Name:** NEW CREATION ADDICTION TREATMENT CENTER  
Legal Name: G AND C SWAN INC.  
Address: 9531 PITTSBURGH AVENUE  
City, State Zip: RANCHO CUCUMUNGA, CA 91786  
Phone: (909) 241-7219 Fax: (909) 985-2316  
**Record ID:** 360075DP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 6/30/2019 IMS: No

**Program Name:** ABOVE IT ALL TREATMENT CENTER  
Legal Name: HI-LAND MOUNTAIN HOMES, INC.  
Address: 27482 NORTH BAY ROAD  
City, State Zip: LAKE ARROWHEAD, CA 92352  
Phone: (909) 338-1234 Fax: (909) 744-8938  
**Record ID:** 360082BP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 12/31/2018 IMS: No

**Program Name:** ABOVE IT ALL TREATMENT CENTER  
Legal Name: HI-LAND MOUNTAIN HOMES, INC  
Address: 23739 LAKE DRIVE  
City, State Zip: CRESTLINE, CA 92325  
Phone: (202) 294-1554  
**Record ID:** 360082DP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 8/31/2017 IMS: No

**Program Name:** SERENITY LODGE  
Legal Name: SERENITY LODGE  
Address: 974, 985, 986, 977, 995 & 1010 MEADOWBROOK ROAD;  
1032 CEDAR LANE AND 1000 PINE COURT, LAKE ARROWHEAD, CA  
City, State Zip: CREST PARK, CA 92326  
Phone: (909) 294-3913 Fax: (909) 294-3913  
**Record ID:** 360091AP  
Service Type: RES  
Resident Capacity: 48  
Total Occupancy: 48  
Target Population: 1.1  
Expiration Date: 3/31/2019 IMS: No

**Program Name:** CREEKSIDE RANCH TREATMENT CENTER  
Legal Name: COVENANT HEALTH SERVICES  
Address: 2730 MILL CREEK ROAD  
City, State Zip: MENTONE, CA 92359-0000  
Phone: (909) 794-2027 Fax: (909) 794-2027  
**Record ID:** 360092AN  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 6/30/2018 IMS: No

**Program Name:** NEW CREATION  
Legal Name: NEW CREATION BEHAVIORAL HEALTHCARE FOUNDATION  
Address: 2511 S MCCARTY DRIVE  
City, State Zip: COLTON, CA 92324  
Phone: (909) 519-0767 Fax: (909) 985-2316  
**Record ID:** 360096AN  
Service Type: RES  
Resident Capacity: 10  
Total Occupancy: 10  
Target Population: 1.1  
Expiration Date: 6/30/2018 IMS: No

**Program Name:** MERITO HOUSE  
Legal Name: MERITO HOUSE, LLC  
Address: 911 CHURCH STREET  
City, State Zip: REDLANDS, CA 92372  
Phone: (909) 981-6121 Fax: (909) 985-2316  
**Record ID:** 360098AP  
Service Type: RES-DETOX  
Resident Capacity: 12  
Total Occupancy: 12  
Target Population: 1.2  
Expiration Date: 11/30/2018 IMS: No

**Program Name:** BENCHMARK TRANSITIONS  
Legal Name: BENCHMARK YOUNG ADULT SCHOOL, INC.  
Address: 36442 WILDWOOD CANYON ROAD  
City, State Zip: YUCAIPA, CA 92399  
Phone: (800) 474-4848 Fax: (909) 748-6424  
**Record ID:** 360099AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 11/30/2018 IMS: No

**Program Name:** BENCHMARK TRANSITIONS  
Legal Name: BENCHMARK YOUNG ADULT SCHOOL, INC.  
Address: 1971 ESSEX COURT  
City, State Zip: REDLANDS, CA 92373  
Phone: (800) 474-4848  
**Record ID:** 360099BP  
Service Type: NON-DETOX  
Target Population: 1.1  
Expiration Date: 9/30/2018 IMS: No

**Program Name:** BENCHMARK TRANSITIONS AT PANORAMA RIDGE  
Legal Name: BENCHMARK YOUNG ADULT SCHOOL, INC.  
Address: 35826 PANORAMA DRIVE  
City, State Zip: YUCAIPA, CA 92399  
Phone: (800) 474-4848 Fax: (909) 793-4499  
**Record ID:** 360099CP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 6/30/2018 IMS: No

**Program Name:** REVIVAL RECOVERY SERVICES  
Legal Name: REVIVAL RECOVERY SERVICES  
Address: 12350 INDIAN RIVER DRIVE  
City, State Zip: APPLE VALLEY, CA 92308  
Phone: (760) 887-1632 Fax: (760) 961-8173  
**Record ID:** 360103AN  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 7  
Target Population: 1.2  
Expiration Date: 6/30/2019 IMS: No

**Program Name:** NEW ORIGINS  
Legal Name: NEW ORIGINS, LLC  
Address: 101 E. REDLANDS BOULEVARD, SUITE 200  
City, State Zip: REDLANDS, CA 92373  
Phone: (955) 984-1788 Fax: (909) 335-2804  
**Record ID:** 360105AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 10/31/2019 IMS: No

**Program Name:** DBA: JOSHUA TREE RECOVERY HOME  
Legal Name: AMERICAN HEALTH SERVICES LLC  
Address: 65675 SULLIVAN ROAD  
City, State Zip: JOSHUA TREE, CA 92252  
Phone: (916) 802-7002  
**Record ID:** 360106AP  
Service Type: RES-DETOX  
Resident Capacity: 16  
Total Occupancy: 16  
Target Population: 1.2  
Expiration Date: 5/31/2018 IMS: No



**Program Name:** BLUESTONE MANOR  
Legal Name: BLUESTONE RECOVERY, INC.  
Address: 29556 HOOK CREEK ROAD  
City, State Zip: CEDAR GLEN, CA 92321-0400  
Phone: (951) 536-2213 Fax: (909) 074-4839  
**Record ID:** 360107BP  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 8  
Target Population: 1.2  
Expiration Date: 2/28/2019 IMS: No

**Program Name:** FIRST STEP RECOVERY CENTER  
Legal Name: ROUTE 66 RECOVERY PARTNERS, A MEDICAL CORPORATION  
Address: 12402 INDUSTRIAL BOULEVARD,  
B-6  
City, State Zip: VICTORVILLE, CA 92395  
Phone: (760) 780-1237 Fax: (877) 780-3252  
**Record ID:** 360108AP  
Service Type: NON-DETOX  
Target Population: 1.1  
Expiration Date: 5/31/2018 IMS: No

**Program Name:** LAKE ARROWHEAD RECOVERY CENTER  
Legal Name: LAKE ARROWHEAD RECOVERY CENTER, LLC  
Address: 28729 PALISADES DRIVE,  
BUILDING A & B  
City, State Zip: LAKE ARROWHEAD, CA 92352  
Phone: (435) 590-4147  
**Record ID:** 360109AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 2/28/2019 IMS: No

**Program Name:** HARVEY HOUSE MANOR I  
Legal Name: HARVEY HOUSE INC  
Address: 3512 AND 3515 NOLAN STREET  
City, State Zip: SAN BERNARDINO, CA 92407  
Phone: (951) 347-3672 Fax: (951) 934-6166  
**Record ID:** 360111AP  
Service Type: RES  
Resident Capacity: 12  
Total Occupancy: 12  
Target Population: 1.2  
Expiration Date: 12/31/2018 IMS: No

**Program Name:** HARVEY HOUSE MANOR II  
Legal Name: HARVEY HOUSE INC  
Address: 11372 SAN JUAN STREET UPPER, UNITS A AND B  
City, State Zip: LOMA LINDA, CA 92564  
Phone: (951) 347-3672 Fax: (951) 934-6166  
**Record ID:** 360111BP  
Service Type: RES  
Resident Capacity: 8  
Total Occupancy: 8  
Target Population: 1.2  
Expiration Date: 12/31/2018 IMS: No

**Program Name:** TOO BE FREE RECOVERY INCORPORATED  
Legal Name: TOO BE FREE RECOVERY INCORPORATED  
Address: 1799 N. WATERMAN AVE, SUITE F  
City, State Zip: SAN BERNARDINO, CA 92504  
Phone: (951) 347-3672 Fax: (951) 934-6166  
**Record ID:** 360112AN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 7/31/2019 IMS: No

**Program Name:** HOWER LODGE  
Legal Name: HOWER LODGE  
Address: 26166 CIRCLE DRIVE  
City, State Zip: LAKE ARROWHEAD, CA 92352  
Phone: (909) 744-9271  
**Record ID:** 360113AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 7  
Target Population: 1.3  
Expiration Date: 6/30/2019 IMS: No

State of California, Department of Health Care Services  
Licensed Residential Facilities and/or  
Certified Alcohol and Drug Programs

As of 9/1/2017

San Diego County

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**Program Name:** CROSSROADS FOUNDATION  
Legal Name: THE CROSSROADS FOUNDATION  
Address: 3594 FOURTH AVENUE  
City, State Zip: SAN DIEGO, CA 92103  
Phone: (619) 296-1151 Fax: (619) 296-6218  
**Record ID:** 370002AN  
Service Type: RES  
Resident Capacity: 20  
Total Occupancy: 22  
Target Population: 1.3  
Expiration Date: 6/30/2019 IMS: No

**Program Name:** HEARTLAND HOUSE  
Legal Name: THE TWELFTH STEP HOUSE OF SAN DIEGO  
Address: 5855 AND 5860 (APT 2 & 3) STREAMVIEW DRIVE  
City, State Zip: SAN DIEGO, CA 92105  
Phone: (619) 287-5460  
**Record ID:** 370003AN  
Service Type: RES  
Resident Capacity: 28  
Total Occupancy: 28  
Target Population: 1.2  
Expiration Date: 9/30/2017 IMS: No

**Program Name:** SAN DIEGO FREEDOM RANCH  
Legal Name: SAN DIEGO FREEDOM RANCH, INC.  
Address: 1777 BUCKMAN SPRINGS ROAD  
City, State Zip: CAMPO, CA 91906  
Phone: (619) 478-5696 Fax: (619) 478-2404  
**Record ID:** 370004AN  
Service Type: RES  
Resident Capacity: 50  
Total Occupancy: 60  
Target Population: 1.2  
Expiration Date: 10/31/2017 IMS: No

**Program Name:** JR RANCH  
Legal Name: SAN DIEGO FREEDOM RANCH, INC.  
Address: 1765 BUCKMAN SPRINGS ROAD  
City, State Zip: CAMPO, CA 91906  
Phone: (619) 478-5696 Fax: (619) 479-2404  
**Record ID:** 370004BN  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.2  
Expiration Date: 8/31/2017 IMS: No

**Program Name:** SERENITY CENTER  
Legal Name: HEALTHRIGHT 360  
Address: 1341 NORTH ESCONDIDO BOULEVARD  
City, State Zip: ESCONDIDO, CA 92026  
Phone: (760) 747-1015  
**Record ID:** 370005GN  
Service Type: RES  
Resident Capacity: 120  
Total Occupancy: 140  
Target Population: 1.3  
Expiration Date: 5/31/2018 IMS: No

**Program Name:** PATHFINDERS  
Legal Name: PATHFINDERS OF SAN DIEGO  
Address: 2952 AND 2980 CEDAR STREET, AND 1530 DALE STREET  
City, State Zip: SAN DIEGO, CA 92102  
Phone: (619) 239-7370 Fax: (619) 239-1817  
**Record ID:** 370006AN  
Service Type: RES  
Resident Capacity: 42  
Total Occupancy: 44  
Target Population: 1.2  
Expiration Date: 7/31/2018 IMS: No

**Program Name:** AMIGOS SOBRIOS  
Legal Name: VOLUNTEERS OF AMERICA, SOUTHWEST CALIFORNIA, INCORPORATION  
Address: 741 11TH AVENUE  
City, State Zip: SAN DIEGO, CA 92101  
Phone: (619) 232-7754 Fax: (619) 232-0968  
**Record ID:** 370007BN  
Service Type: RES  
Resident Capacity: 18  
Total Occupancy: 18  
Target Population: 1.2  
Expiration Date: 10/31/2017 IMS: No

**Program Name:** RENAISSANCE TREATMENT CENTER  
Legal Name: VOLUNTEERS OF AMERICA, SOUTHWEST CALIFORNIA, INCORPORATION  
Address: 2300 EAST 7TH STREET  
City, State Zip: NATIONAL CITY, CA 91950  
Phone: (619) 791-2730 Fax: (619) 282-8262  
**Record ID:** 370007CN  
Service Type: RES-DETOX  
Resident Capacity: 120  
Total Occupancy: 120  
Target Population: 1.8  
Expiration Date: 4/30/2018 IMS: No

**Program Name:** STEPPING STONE OF SAN DIEGO  
Legal Name: THE STEPPING STONE OF SAN DIEGO  
Address: 3767 CENTRAL AVENUE  
City, State Zip: SAN DIEGO, CA 92105  
Phone: (619) 584-4010 Fax: (619) 521-1701  
**Record ID:** 370008DN  
Service Type: RES  
Resident Capacity: 31  
Total Occupancy: 31  
Target Population: 1.8  
Expiration Date: 5/31/2018 IMS: No

**Program Name:** THE FELLOWSHIP CENTER  
Legal Name: THE FELLOWSHIP CENTER, INC.  
Address: 737 AND 745 EAST GRAND AVENUE, 726 AND 736 EAST 2ND AVENUE,  
AND 123 SOUTH ELM STREET  
City, State Zip: ESCONDIDO, CA 92025  
Phone: (760) 745-8478 Fax: (760) 745-6852  
**Record ID:** 370009AN  
Service Type: RES-DETOX  
Resident Capacity: 113  
Total Occupancy: 113  
Target Population: 1.2  
Expiration Date: 7/31/2018 IMS: No

**Program Name:** VETERANS VILLAGE OF SAN DIEGO REHABILITATION CENTER  
Legal Name: VIETNAM VETERANS OF SAN DIEGO  
Address: 4115, 4125, 4137, & 4141 PACIFIC HIGHWAY AND 3670 COUTS STREET  
City, State Zip: SAN DIEGO, CA 92110  
Phone: (619) 497-0142 Fax: (619) 497-0263  
**Record ID:** 370010BN  
Service Type: RES  
Resident Capacity: 242  
Total Occupancy: 242  
Target Population: 1.1  
Expiration Date: 6/30/2018 IMS: No

**Program Name:** THE WAY BACK  
Legal Name: THE WAY BACK  
Address: 2516 A STREET  
City, State Zip: SAN DIEGO, CA 92102-2199  
Phone: (619) 235-0592 Fax: (619) 235-0593  
**Record ID:** 370011AN  
Service Type: RES  
Resident Capacity: 27  
Total Occupancy: 29  
Target Population: 1.1  
Expiration Date: 2/28/2018 IMS: No

**Program Name:** TRADITION ONE-MEN  
Legal Name: TRADITION ONE  
Address: 4104, 4114 AND 4124 DELTA STREET  
City, State Zip: SAN DIEGO, CA 92113  
Phone: (619) 264-0141 Fax: (619) 264-7274  
**Record ID:** 370012AN  
Service Type: RES  
Resident Capacity: 46  
Total Occupancy: 49  
Target Population: 1.2  
Expiration Date: 2/28/2018 IMS: No

**Program Name:** TURNING POINT  
Legal Name: THE TURNING POINT HOME OF SAN DIEGO  
Address: 1315 25TH STREET  
City, State Zip: SAN DIEGO, CA 92102  
Phone: (619) 233-0067 Fax: (619) 233-3990  
**Record ID:** 370013AN  
Service Type: RES  
Resident Capacity: 20  
Total Occupancy: 21  
Target Population: 1.3  
Expiration Date: 7/31/2017 IMS: No

**Program Name:** CASA DE MILAGROS  
Legal Name: METROPOLITAN AREA ADVISORY COMMITTEE  
ON ANTI-POVERTY OF SAN DIEGO COUNTY, INC.  
Address: 1127 SOUTH 38TH STREET  
City, State Zip: SAN DIEGO, CA 92113  
Phone: (619) 262-4002  
**Record ID:** 370014AN  
Service Type: RES  
Resident Capacity: 18  
Total Occupancy: 18  
Target Population: 1.3  
Expiration Date: 9/30/2017 IMS: No

**Program Name:** NOSOTROS  
Legal Name: METROPOLITAN AREA ADVISORY COMMITTEE  
ON ANTI-POVERTY OF SAN DIEGO COUNTY, INC.  
Address: 73 NORTH 2ND AVENUE  
City, State Zip: CHULA VISTA, CA 91910  
Phone: (619) 426-4801 Fax: (619) 426-0034  
**Record ID:** 370014BN  
Service Type: RES  
Resident Capacity: 17  
Total Occupancy: 17  
Target Population: 1.2  
Expiration Date: 9/30/2017 IMS: No

**Program Name:** HOUSE OF METAMORPHOSIS  
Legal Name: HOUSE OF METAMORPHOSIS, INC.  
Address: 2970 MARKET STREET  
City, State Zip: SAN DIEGO, CA 92102  
Phone: (619) 236-9492 Fax: (619) 236-9127  
**Record ID:** 370021AN  
Service Type: RES  
Resident Capacity: 64  
Total Occupancy: 64  
Target Population: 1.1  
Expiration Date: 11/30/2017 IMS: No

**Program Name:** HOUSE OF METAMORPHOSIS TRANSITIONAL LIVING FACILITY  
Legal Name: HOUSE OF METAMORPHOSIS, INC.  
Address: 2867 AND 2871 C STREET  
City, State Zip: SAN DIEGO, CA 92102  
Phone: (619) 236-9217 Fax: (619) 236-9127  
**Record ID:** 370021KN  
Service Type: RES  
Resident Capacity: 12  
Total Occupancy: 12  
Target Population: 1.1  
Expiration Date: 3/31/2019 IMS: No

**Program Name:** SHORT TERM I--MARLBOROUGH  
Legal Name: CRASH, INC.  
Address: 4161 MARLBOROUGH AVENUE  
City, State Zip: SAN DIEGO, CA 92105  
Phone: (619) 282-7274 Fax: (619) 282-7496  
**Record ID:** 370024IN  
Service Type: RES  
Resident Capacity: 50  
Total Occupancy: 50  
Target Population: 1.2  
Expiration Date: 3/31/2019 IMS: No

**Program Name:** GOLDEN HILL HOUSE II  
Legal Name: CRASH, INC.  
Address: 726 F STREET  
City, State Zip: SAN DIEGO, CA 92101  
Phone: (619) 239-9691 Fax: (619) 239-0909  
**Record ID:** 370024KN  
Service Type: RES  
Resident Capacity: 63  
Total Occupancy: 63  
Target Population: 1.1  
Expiration Date: 5/31/2018 IMS: No

**Program Name:** GOLDEN HILL HOUSE  
Legal Name: CRASH, INC.  
Address: 2410 E STREET  
City, State Zip: SAN DIEGO, CA 92102  
Phone: (619) 234-3346 Fax: (619) 234-3357  
**Record ID:** 370024LN  
Service Type: RES  
Resident Capacity: 43  
Total Occupancy: 43  
Target Population: 1.3  
Expiration Date: 4/30/2019 IMS: No

**Program Name:** PEMARRO  
Legal Name: GROUP CONSCIENCE  
Address: 1482 KINGS VILLA ROAD  
City, State Zip: RAMONA, CA 92065  
Phone: (760) 789-8070 Fax: (760) 789-8073  
**Record ID:** 370025AN  
Service Type: RES-DETOX  
Resident Capacity: 10  
Total Occupancy: 10  
Target Population: 1.1  
Expiration Date: 5/31/2018 IMS: No

**Program Name:** CHOICES IN RECOVERY/FOUNDATION HOUSE  
Legal Name: THE BETHESDA RECOVERY CENTER  
Address: 619 CIVIC CENTER DRIVE  
City, State Zip: VISTA, CA 92083  
Phone: (760) 945-5290 Fax: (760) 945-7765  
**Record ID:** 370039IN  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 8  
Target Population: 1.1  
Expiration Date: 9/30/2018 IMS: No

**Program Name:** CHOICES IN RECOVERY - ALCOHOL AND DRUG ABUSE OUTPATIENT TREATMENT PROGRAM  
Legal Name: THE BETHESDA RECOVERY CENTER  
Address: 733 SOUTH SANTA FE AVENUE  
City, State Zip: VISTA, CA 92083  
Phone: (760) 945-5290 Fax: (760) 945-7765  
**Record ID:** 370039JN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 2/28/2019 IMS: No

**Program Name:** CHOICES IN RECOVERY/NEW HOUSE  
Legal Name: THE BETHESDA RECOVERY CENTER  
Address: 747 MELROSE PLACE  
City, State Zip: VISTA, CA 92083  
Phone: (760) 945-5290 Fax: (760) 945-7765  
**Record ID:** 370039KN  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 8  
Target Population: 1.2  
Expiration Date: 4/30/2019 IMS: No

**Program Name:** CHOICES IN RECOVERY/HILL HOUSE  
Legal Name: THE BETHESDA RECOVERY CENTER  
Address: 1135 NORTH DRIVE  
City, State Zip: VISTA, CA 92083  
Phone: (760) 945-5290 Fax: (760) 945-7765  
**Record ID:** 370039LN  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 8  
Target Population: 1.2  
Expiration Date: 4/30/2019 IMS: No

**Program Name:** CHOICES IN RECOVERY/HUMBLE HOUSE  
Legal Name: THE BETHESDA RECOVERY CENTER  
Address: 248 HILL DRIVE  
City, State Zip: VISTA, CA 92083  
Phone: (760) 945-5290 Fax: (760) 945-7765  
**Record ID:** 370039MN  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 8  
Target Population: 1.3  
Expiration Date: 4/30/2019 IMS: No

**Program Name:** MCALISTER INSTITUTE SOUTH BAY REGIONAL RECOVERY CENTER  
**Legal Name:** MCALISTER INSTITUTE FOR TREATMENT & EDUCATION, INC.  
**Address:** 1180 3RD AVENUE, SUITES C-3, C-4 AND C-5  
**City, State Zip:** CHULA VISTA, CA 91911  
**Phone:** (619) 691-8164  
**Record ID:** 370045ABN  
**Service Type:** NON  
**Target Population:** 1.1  
**Expiration Date:** 2/28/2019 IMS: No

**Program Name:** SOUTH TEEN RECOVERY CENTER  
**Legal Name:** MCALISTER INSTITUTE FOR TREATMENT & EDUCATION, INC.  
**Address:** 629 THIRD AVENUE, SUITE C  
**City, State Zip:** CHULA VISTA, CA 91910-5741  
**Phone:** (619) 691-1045 Fax: (619) 691-1491  
**Record ID:** 370045ACN  
**Service Type:** NON  
**Target Population:** 1.1  
**Expiration Date:** 4/30/2018 IMS: No

**Program Name:** NORTH CENTRAL TEEN RECOVERY CENTER  
**Legal Name:** MCALISTER INSTITUTE FOR TREATMENT & EDUCATION, INC.  
**Address:** 7625 MESA COLLEGE DRIVE, SUITE 115B  
**City, State Zip:** SAN DIEGO, CA 92111  
**Phone:** (858) 277-4633 Fax: (858) 277-4933  
**Record ID:** 370045AEN  
**Service Type:** NON  
**Target Population:** 1.5  
**Expiration Date:** 8/31/2017 IMS: No

**Program Name:** MCALISTER INSTITUTE EAST TEEN RECOVERY CENTER  
**Legal Name:** MCALISTER INSTITUTE FOR TREATMENT & EDUCATION, INC.  
**Address:** 550 FESLER STREET, SUITE G1 AND G2  
**City, State Zip:** EL CAJON, CA 92020  
**Phone:** (619) 588-5361 Fax: (619) 588-5421  
**Record ID:** 370045AMN  
**Service Type:** NON  
**Target Population:** 1.5  
**Expiration Date:** 4/30/2019 IMS: No

**Program Name:** NORTH COASTAL REGIONAL RECOVERY CENTER  
**Legal Name:** MCALISTER INSTITUTE FOR TREATMENT & EDUCATION, INC.  
**Address:** 2821 OCEANSIDE BOULEVARD  
**City, State Zip:** OCEANSIDE, CA 92054  
**Phone:** (760) 721-2781  
**Record ID:** 370045AN  
**Service Type:** NON  
**Target Population:** 1.1  
**Expiration Date:** 4/30/2018 IMS: No

**Program Name:** NEW HOPE TEEN RECOVERY CENTER  
**Legal Name:** MCALISTER INSTITUTE FOR TREATMENT & EDUCATION, INC.  
**Address:** 1212 S. 43RD STREET, SUITE C, D, AND E  
**City, State Zip:** SAN DIEGO, CA 92113  
**Phone:** (619) 690-9904 Fax: (619) 263-1793  
**Record ID:** 370045APN  
**Service Type:** NON  
**Target Population:** 1.5  
**Expiration Date:** 11/30/2017 IMS: No

**Program Name:** NORTH INLAND WOMEN/ADOLESCENT RECOVERY CENTER  
**Legal Name:** MCALISTER INSTITUTE FOR TREATMENT & EDUCATION, INC.  
**Address:** 751 RANCHEROS DRIVE, SUITE 3, 4, AND 5  
**City, State Zip:** SAN MARCOS, CA 92069  
**Phone:** (760) 761-0515 Fax: (760) 761-0464  
**Record ID:** 370045AQN  
**Service Type:** NON  
**Target Population:** 1.5  
**Expiration Date:** 10/31/2017 IMS: No



**Program Name:** NORTH COASTAL TEEN RECOVERY CENTER  
Legal Name: MCALISTER INSTITUTE FOR TREATMENT & EDUCATION, INC.  
Address: 3923 WARING ROAD, SUITE D  
City, State Zip: OCEANSIDE, CA 92056  
Phone: (760) 726-4451 Fax: (760) 726-4465  
**Record ID:** 370045ARN  
Service Type: NON  
Target Population: 1.10  
Expiration Date: 1/31/2018 IMS: No

**Program Name:** NORTH COASTAL TEEN RECOVERY CENTER  
Legal Name: MCALISTER INSTITUTE FOR TREATMENT & EDUCATION, INC.  
Address: 3921 WARING ROAD, SUITE A  
City, State Zip: OCEANSIDE, CA 92056  
Phone: (760) 726-4451 Fax: (760) 726-4465  
**Record ID:** 370045ASN  
Service Type: NON  
Target Population: 1.10  
Expiration Date: 7/31/2019 IMS: No

**Program Name:** MCALISTER INSTITUTE SOUTH BAY WOMEN'S RECOVERY CENTER  
Legal Name: MCALISTER INSTITUTE FOR TREATMENT & EDUCATION, INC.  
Address: 2414 HOOVER AVENUE, SUITES A, B, C  
City, State Zip: NATIONAL CITY, CA 91950  
Phone: (619) 336-1226 Fax: (619) 477-1052  
**Record ID:** 370045BN  
Service Type: NON  
Target Population: 1.3  
Expiration Date: 4/30/2018 IMS: No

**Program Name:** EAST COUNTY REGIONAL RECOVERY CENTER  
Legal Name: MCALISTER INSTITUTE FOR TREATMENT & EDUCATION, INC.  
Address: 1365 NORTH JOHNSON AVENUE, SUITES 111 AND 113  
City, State Zip: EL CAJON, CA 92020  
Phone: (619) 440-4801 Ext:1592 Fax: (619) 442-1592  
**Record ID:** 370045DN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 4/30/2018 IMS: No

**Program Name:** MCALISTER INSTITUTE - LEMON GROVE FACILITY  
Legal Name: MCALISTER INSTITUTE FOR TREATMENT & EDUCATION, INC.  
Address: 2049 SKYLINE DRIVE  
City, State Zip: LEMON GROVE, CA 91945  
Phone: (619) 465-7303  
**Record ID:** 370045FN  
Service Type: RES-DETOX  
Resident Capacity: 155  
Total Occupancy: 180  
Target Population: 1.9  
Expiration Date: 4/30/2018 IMS: No

**Program Name:** MCALISTER INSTITUTE GROUP HOME-EAST  
Legal Name: MCALISTER INSTITUTE FOR TREATMENT & EDUCATION, INC.  
Address: 2219 ODESSA COURT  
City, State Zip: LEMON GROVE, CA 91945  
Phone: (619) 461-4871  
**Record ID:** 370045MN  
Service Type: DSS  
Target Population: 1.5  
Expiration Date: 11/30/2018 IMS: No

**Program Name:** MCALISTER INSTITUTE GROUP HOME NORTH  
Legal Name: MCALISTER INSTITUTE FOR TREATMENT & EDUCATION, INC.  
Address: 323 HUNTER STREET  
City, State Zip: RAMONA, CA 92065  
Phone: (760) 789-0571 Fax: (760) 789-0577  
**Record ID:** 370045QN  
Service Type: DSS  
Target Population: 1.5  
Expiration Date: 4/30/2019 IMS: No

**Program Name:** EAST COUNTY REGIONAL RECOVERY CENTER  
Legal Name: MCALISTER INSTITUTE FOR TREATMENT & EDUCATION, INC.  
Address: 1385 NORTH JOHNSON AVENUE, SUITES 102/103  
City, State Zip: EL CAJON, CA 92020  
Phone: (619) 440-4801  
**Record ID:** 370045TN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 2/28/2019 IMS: No

**Program Name:** MCALISTER INSTITUTE GROUP HOME - SOUTH  
Legal Name: MCALISTER INSTITUTE FOR TREATMENT & EDUCATION, INC.  
Address: 2315 BAR BIT ROAD  
City, State Zip: SPRING VALLEY, CA 91978  
Phone: (619) 442-0277 Fax: (619) 337-3610  
**Record ID:** 370045VN  
Service Type: DSS  
Target Population: 1.5  
Expiration Date: 5/31/2018 IMS: No

**Program Name:** AMITY FOUNDATION OF CALIFORNIA  
Legal Name: EPIDAUROS  
Address: 2260 WATSON WAY  
City, State Zip: VISTA, CA 92083  
Phone: (760) 599-1892 Fax: (760) 599-1884  
**Record ID:** 370059AN  
Service Type: RES  
Resident Capacity: 60  
Total Occupancy: 68  
Target Population: 1.2  
Expiration Date: 12/31/2018 IMS: No

**Program Name:** EAST COUNTY CENTER FOR CHANGE  
Legal Name: MENTAL HEALTH SYSTEMS, INC.  
Address: 545 NORTH MAGNOLIA AVENUE  
City, State Zip: EL CAJON, CA 92020-3608  
Phone: (619) 579-0947 Fax: (619) 558-6282  
**Record ID:** 370069BN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 2/28/2019 IMS: No

**Program Name:** NORTH COUNTY CENTER FOR CHANGE  
Legal Name: MENTAL HEALTH SYSTEMS, INC.  
Address: 504 WEST VISTA WAY  
City, State Zip: VISTA, CA 92083  
Phone: (760) 940-1836 Fax: (760) 940-1274  
**Record ID:** 370069CN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 2/28/2019 IMS: No

**Program Name:** NORTH INLAND REGIONAL RECOVERY CENTER  
Legal Name: MENTAL HEALTH SYSTEMS, INC.  
Address: 200 EAST WASHINGTON AVE., SUITE 100  
City, State Zip: ESCONDIDO, CA 92025-1806  
Phone: (760) 741-7708 Fax: (760) 741-5421  
**Record ID:** 370069DN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 2/28/2019 IMS: No

**Program Name:** TEEN RECOVERY PROGRAM - NORTH INLAND  
Legal Name: MENTAL HEALTH SYSTEMS, INC.  
Address: 340 RANCHEROS DRIVE, SUITE 166  
City, State Zip: SAN MARCOS, CA 92069  
Phone: (760) 744-3672 Fax: (760) 744-6182  
**Record ID:** 370069FN  
Service Type: NON  
Target Population: 1.5  
Expiration Date: 2/28/2019 IMS: No

**Program Name:** MID-COAST REGIONAL RECOVERY CENTER  
Legal Name: MENTAL HEALTH SYSTEMS, INC.  
Address: 3340 KEMPER STREET, SUITES 105 AND 207  
City, State Zip: SAN DIEGO, CA 92110  
Phone: (619) 523-8121 Fax: (619) 523-8121  
**Record ID:** 370069IN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 1/31/2019 IMS: No

**Program Name:** HARMONY WOMEN'S RECOVERY CENTER  
Legal Name: MENTAL HEALTH SYSTEMS, INC.  
Address: 3645 RUFFIN ROAD,  
SUITE 100  
City, State Zip: SAN DIEGO, CA 92123-1875  
Phone: (858) 384-6284 Fax: (858) 384-6453  
**Record ID:** 370069MN  
Service Type: NON  
Target Population: 1.3  
Expiration Date: 1/31/2019 IMS: No

**Program Name:** SOUTH COUNTY CENTER FOR CHANGE  
Legal Name: MENTAL HEALTH SYSTEMS, INC.  
Address: 1172 3RD AVENUE, SUITE D1  
City, State Zip: CHULA VISTA, CA 91911  
Phone: (858) 573-2600 Fax: (858) 573-5144  
**Record ID:** 370069QN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 3/31/2019 IMS: No

**Program Name:** FAMILY RECOVERY CENTER  
Legal Name: MENTAL HEALTH SYSTEMS, INC.  
Address: 1100 SPORTFISHER DRIVE  
City, State Zip: OCEANSIDE, CA 92054  
Phone: (858) 573-2600 Fax: (760) 439-4779  
**Record ID:** 370069TN  
Service Type: RES  
Resident Capacity: 55  
Total Occupancy: 90  
Target Population: 1.4  
Expiration Date: 5/31/2018 IMS: No

**Program Name:** ACTION CENTRAL  
Legal Name: MENTAL HEALTH SYSTEMS, INC.  
Address: 6244 EL CAJON BOULEVARD, SUITES 15, 16, 17 &18  
City, State Zip: SAN DIEGO, CA 92115-3918  
Phone: (619) 287-8225 Fax: (619) 287-4146  
**Record ID:** 370069XN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 6/30/2019 IMS: No

**Program Name:** SAN DIEGO CENTER FOR CHANGE  
Legal Name: MENTAL HEALTH SYSTEMS, INC.  
Address: 3340 KEMPER STREET, SUITE 101, 103 AND 104  
City, State Zip: SAN DIEGO, CA 92110  
Phone: (619) 758-1433 Fax: (619) 758-9823  
**Record ID:** 370069YN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 1/31/2018 IMS: No

**Program Name:** UPAC, ADULT AND ADOLESCENT ALCOHOL AND DRUG TREATMENT PROGRAMS  
**Legal Name:** UNION OF PAN ASIAN COMMUNITIES  
**Address:** 3288 EL CAJON BOULEVARD, SUITES 1A, 1B, 3, 5, 6, 10, 11, 12, AND 13  
**City, State Zip:** SAN DIEGO, CA 92104  
**Phone:** (619) 521-5720 **Fax:** (619) 521-5728  
**Record ID:** 370071AN  
**Service Type:** NON  
**Target Population:** 1.1  
**Expiration Date:** 12/31/2018 **IMS:** No

**Program Name:** DKA PARENTCARE FAMILY RECOVERY CENTER  
**Legal Name:** VISTA HILL FOUNDATION  
**Address:** 4990 WILLIAMS AVENUE  
**City, State Zip:** LA MESA, CA 91942  
**Phone:** (619) 698-1663 **Fax:** (619) 698-1665  
**Record ID:** 370072AN  
**Service Type:** NON  
**Target Population:** 1.1  
**Expiration Date:** 3/31/2019 **IMS:** No

**Program Name:** PARENTCARE CENTRAL FAMILY RECOVERY CENTER  
**Legal Name:** VISTA HILL FOUNDATION  
**Address:** 4125 ALPHA STREET  
**City, State Zip:** SAN DIEGO, CA 92113  
**Phone:** (619) 266-0166 **Fax:** (619) 698-1665  
**Record ID:** 370072CN  
**Service Type:** NON  
**Target Population:** 1.3  
**Expiration Date:** 8/31/2017 **IMS:** No

**Program Name:** VISTA HILL BRIDGES TEEN RECOVERY CENTER  
**Legal Name:** VISTA HILL FOUNDATION  
**Address:** 220 EUCLID AVENUE, SUITE 40 AND 50  
**City, State Zip:** SAN DIEGO, CA 92114  
**Phone:** (858) 518-2192 **Fax:** (858) 874-1849  
**Record ID:** 370072DN  
**Service Type:** NON  
**Target Population:** 1.5  
**Expiration Date:** 9/30/2017 **IMS:** No

**Program Name:** CASA RAPHAEL  
**Legal Name:** ALPHA PROJECT FOR THE HOMELESS  
**Address:** 975 AND 993 POSTAL WAY  
**City, State Zip:** VISTA, CA 92083  
**Phone:** (760) 630-9922 **Fax:** (760) 630-9996  
**Record ID:** 370073AN  
**Service Type:** RES  
**Resident Capacity:** 150  
**Total Occupancy:** 150  
**Target Population:** 1.2  
**Expiration Date:** 6/30/2019 **IMS:** No

**Program Name:** UCSD CO-OCCURRING DISORDERS TREATMENT AND RECOVERY PROGRAM  
**Legal Name:** UNIVERSITY OF CALIFORNIA, SAN DIEGO  
**Address:** 140 ARBOR DRIVE  
**City, State Zip:** SAN DIEGO, CA 92103  
**Phone:** (619) 543-7795 **Fax:** (619) 543-7013  
**Record ID:** 370077AN  
**Service Type:** NON  
**Target Population:** 1.1  
**Expiration Date:** 5/31/2019 **IMS:** No

**Program Name:** SAN DIEGO RESCUE MISSION MEN'S CENTER RECOVERY PROGRAM  
**Legal Name:** SAN DIEGO RESCUE MISSION, INC.  
**Address:** 120 ELM STREET, 3RD AND 4TH FLOOR  
**City, State Zip:** SAN DIEGO, CA 92101  
**Phone:** (619) 687-3720 **Fax:** (619) 704-2858  
**Record ID:** 370080CN  
**Service Type:** RES  
**Resident Capacity:** 188  
**Total Occupancy:** 188  
**Target Population:** 1.2  
**Expiration Date:** 1/31/2019 **IMS:** No

**Program Name:** NEW ENTRA CASA  
Legal Name: NEW ENTRA CASA CORPORATION  
Address: 3575 PERSHING AVENUE  
City, State Zip: SAN DIEGO, CA 92104  
Phone: (619) 294-4526 Fax: (619) 294-4526  
**Record ID:** 370083AN  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 7  
Target Population: 1.3  
Expiration Date: 4/30/2018 IMS: No

**Program Name:** NARCONON JLB RANCH  
Legal Name: NARCONON FRESH START  
Address: 35955 HIGHWAY 79  
City, State Zip: WARNER SPRINGS, CA 92086  
Phone: (760) 782-0471 Fax: (760) 782-0695  
**Record ID:** 370087BN  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 8  
Target Population: 1.1  
Expiration Date: 11/30/2018 IMS: No

**Program Name:** NARCONON SUNSHINE SUMMIT LODGE  
Legal Name: NARCONON FRESH START  
Address: 35025 HIGHWAY 79  
City, State Zip: WARNER SPRINGS, CA 92086  
Phone: (760) 418-0030 Fax: (888) 680-2730  
**Record ID:** 370087CN  
Service Type: RES-DETOX  
Resident Capacity: 30  
Total Occupancy: 45  
Target Population: 1.1  
Expiration Date: 8/31/2018 IMS: No

**Program Name:** ESCONDIDO COMMUNITY SOBERING SERVICES  
Legal Name: INTERFAITH COMMUNITY SERVICES, INC.  
Address: 1717, 1719 EAST WASHINGTON AVENUE  
City, State Zip: ESCONDIDO, CA 92027  
Phone: (760) 520-8306 Fax: (760) 294-6056  
**Record ID:** 370093BN  
Service Type: RES  
Resident Capacity: 8  
Total Occupancy: 8  
Target Population: 1.1  
Expiration Date: 7/31/2019 IMS: No

**Program Name:** THE LIGHTHOUSE COMMUNITY  
Legal Name: HEALTHCARE SERVICES, INC.  
Address: 3880 ROSECRANS STREET  
City, State Zip: SAN DIEGO, CA 92110  
Phone: (619) 515-0243 Fax: (619) 235-0678  
**Record ID:** 370094AP  
Service Type: RES-DETOX  
Resident Capacity: 98  
Total Occupancy: 98  
Target Population: 1.1  
Expiration Date: 6/30/2019 IMS: No

**Program Name:** CALVARY RANCH CHRISTIAN DRUG AND ALCOHOL RECOVERY FACILITY  
Legal Name: GOD'S HOUSE MINISTRIES, INCORPORATED  
Address: 13610 WILLOW ROAD  
City, State Zip: LAKESIDE, CA 92040  
Phone: (619) 561-2599 Fax: (619) 561-4673  
**Record ID:** 370098AN  
Service Type: RES  
Resident Capacity: 20  
Total Occupancy: 20  
Target Population: 1.2  
Expiration Date: 5/31/2018 IMS: No

**Program Name:** LASTING RECOVERY  
Legal Name: FARKAS & SAALINGER, PSYCHOLOGY CORP  
Address: 6046 CORNERSTONE COURT WEST, SUITES 103, 105, 107, 108, 110, 111, 112, 113, 114, 115, 127 & 128  
City, State Zip: SAN DIEGO, CA 92121  
Phone: (858) 453-4315 Fax: (858) 453-5690  
**Record ID:** 370101AP  
Service Type: NON  
Target Population: 1.8  
Expiration Date: 1/31/2019 IMS: No

**Program Name:** THE TRAINING CENTER  
Legal Name: TRAINING CENTER EPHESIANS 4:11-16  
Address: 525 GRAND AVENUE  
City, State Zip: SPRING VALLEY, CA 91977  
Phone: (619) 327-5400 Fax: (619) 327-5410  
**Record ID:** 370104AN  
Service Type: RES  
Resident Capacity: 56  
Total Occupancy: 56  
Target Population: 1.2  
Expiration Date: 11/30/2017 IMS: No

**Program Name:** REJUVE-NATIONS OUTPATIENTS FACILITY, INC.  
Legal Name: REJUVE-NATIONS OUTPATIENTS FACILITY, INC.  
Address: 4101 UNIVERSITY AVENUE, SUITES E204-E205  
City, State Zip: SAN DIEGO, CA 92195  
Phone: (619) 602-9405 Fax: (951) 657-7180  
**Record ID:** 370105AN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 12/31/2017 IMS: No

**Program Name:** PALOMAR FAMILY COUNSELING SERVICE, INC. DRUG AND ALCOHOL PROGRAM  
Legal Name: PALOMAR FAMILY COUNSELING SERVICE, INC.  
Address: 1002 EAST GRAND AVENUE  
City, State Zip: ESCONDIDO, CA 92025  
Phone: (760) 741-2660 Fax: (760) 741-2647  
**Record ID:** 370107AN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 9/30/2017 IMS: No

**Program Name:** CAPALINA CLINIC  
Legal Name: SAN DIEGO HEALTH ALLIANCE  
Address: 1560 CAPALINA ROAD  
City, State Zip: SAN MARCOS, CA 92069  
Phone: (760) 744-2104 Fax: (760) 744-1382  
**Record ID:** 370108AP  
Service Type: NON-DETOX  
Target Population: 1.1  
Expiration Date: 11/30/2018 IMS: No

**Program Name:** FASHION VALLEY CLINIC  
Legal Name: SAN DIEGO HEALTH ALLIANCE  
Address: 7545 METROPOLITAN DRIVE  
City, State Zip: SAN DIEGO, CA 92108  
Phone: (619) 718-9890 Fax: (619) 718-9897  
**Record ID:** 370108CP  
Service Type: NON-DETOX  
Target Population: 1.1  
Expiration Date: 8/31/2018 IMS: No

**Program Name:** EL CAJON TREATMENT CENTER  
Legal Name: SAN DIEGO HEALTH ALLIANCE  
Address: 234 N. MAGNOLIA AVE.  
City, State Zip: EL CAJON, CA 92020  
Phone: (619) 579-8378 Fax: (619) 579-8155  
**Record ID:** 370108DP  
Service Type: NON-DETOX  
Target Population: 1.1  
Expiration Date: 4/30/2019 IMS: No

**Program Name:** THIRD AVENUE CLINIC  
Legal Name: SAN DIEGO TREATMENT SERVICES, LLC  
Address: 1155 THIRD AVE.  
City, State Zip: CHULA VISTA, CA 91911  
Phone: (619) 498-8260 Fax: (619) 498-8265  
**Record ID:** 370109AP  
Service Type: NON-DETOX  
Target Population: 1.1  
Expiration Date: 5/31/2019 IMS: No

**Program Name:** ST. VINCENT DE PAUL VILLAGE RECOVERY SERVICES  
Legal Name: ST. VINCENT DE PAUL VILLAGE, INC.  
Address: 16 15TH STREET, PAUL MIRABILE CENTER BUILDING,  
GROUP ROOM 200 & 207 AND THERAPY ROOM 233 &234  
City, State Zip: SAN DIEGO, CA 92101  
Phone: (619) 233-8500 Fax: (619) 231-9542  
**Record ID:** 370110AN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 7/31/2018 IMS: No

**Program Name:** SAN DIEGO TREATMENT AND RECOVERY CENTER  
Legal Name: JC SERVICE AND ENTERPRISES, INC.  
Address: 6244 EL CAJON BOULEVARD, SUITE 26  
City, State Zip: SAN DIEGO, CA 92115  
Phone: (619) 559-8242  
**Record ID:** 370111AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 9/30/2017 IMS: No

**Program Name:** SOLEDAD HOUSE  
Legal Name: ABC SOBER LIVING., LLC  
Address: 5330 SOLEDAD MOUNTAIN ROAD  
City, State Zip: SAN DIEGO, CA 92109  
Phone: (858) 204-1304 Fax: (858) 274-8700  
**Record ID:** 370116AP  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 7  
Target Population: 1.3  
Expiration Date: 5/31/2019 IMS: No

**Program Name:** SOLEDAD HOUSE II  
Legal Name: ABC SOBER LIVING., LLC  
Address: 5214 SOLEDAD MOUNTAIN ROAD  
City, State Zip: SAN DIEGO, CA 92109  
Phone: (858) 204-1304 Fax: (858) 274-8700  
**Record ID:** 370116BP  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 7  
Target Population: 1.3  
Expiration Date: 8/31/2019 IMS: No

**Program Name:** SAN DIEGO AMERICAN INDIAN HEALTH CENTER  
Legal Name: SAN DIEGO AMERICAN INDIAN HEALTH CENTER  
Address: 2602 FIRST AVENUE, SUITE 100  
City, State Zip: SAN DIEGO, CA 92103  
Phone: (619) 234-2158 Ext:102 Fax: (619) 234-0505  
**Record ID:** 370120AN  
Service Type: NON  
Target Population: 1.5  
Expiration Date: 4/30/2019 IMS: No

**Program Name:** ATON CENTER  
Legal Name: ATON CENTER, INC.  
Address: 3250 COUNTRY ROSE CIRCLE  
City, State Zip: ENCINITAS, CA 92024  
Phone: (858) 759-5017 Fax: (858) 756-1686  
**Record ID:** 370122AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 7  
Target Population: 1.1  
Expiration Date: 11/30/2018 IMS: Yes

**Program Name:** ATON CENTER  
Legal Name: ATON CENTER, INC.  
Address: 3238 COUNTRY ROSE CIRCLE  
City, State Zip: ENCINITAS, CA 92024  
Phone: (858) 759-5017 Fax: (858) 759-5016  
**Record ID:** 370122CP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 8  
Target Population: 1.1  
Expiration Date: 3/31/2018 IMS: No

**Program Name:** ATON CENTER  
Legal Name: ATON CENTER, INC.  
Address: 3462 WESTERN SPRINGS ROAD  
City, State Zip: ENCINITAS, CA 92024  
Phone: (858) 759-5017 Fax: (858) 759-5016  
**Record ID:** 370122DP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 12/31/2017 IMS: No

**Program Name:** ATON CENTER  
Legal Name: ATON CENTER, INC.  
Address: 3262 COUNTRY ROSE CIRCLE  
City, State Zip: ENCINITAS, CA 92024  
Phone: (858) 759-5017 Fax: (858) 759-5016  
**Record ID:** 370122EP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 4/30/2018 IMS: No

**Program Name:** ATON CENTER  
Legal Name: ATON CENTER, INC.  
Address: 3225 COUNTRY ROSE CIRCLE  
City, State Zip: ENCINITAS, CA 92024  
Phone: (858) 759-5017 Fax: (858) 759-5016  
**Record ID:** 370122FP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 5/31/2019 IMS: Yes



**Program Name:** SAN DIEGO ADDICTION TREATMENT CENTER, INC.  
Legal Name: SAN DIEGO ADDICTION TREATMENT CENTER, INC.  
Address: 2456 E STREET  
City, State Zip: SAN DIEGO, CA 92102  
Phone: (619) 507-6510 Fax: (619) 269-9056  
**Record ID:** 370129AP  
Service Type: RES-DETOX  
Resident Capacity: 36  
Total Occupancy: 36  
Target Population: 1.1  
Expiration Date: 11/30/2018 IMS: No

**Program Name:** NEW HORIZON RECOVERY  
Legal Name: MARTINA COFFELT  
Address: 417 SANDALWOOD COURT  
City, State Zip: ENCINITAS, CA 92024  
Phone: (760) 805-4015 Fax: (760) 529-4403  
**Record ID:** 370130AP  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 8  
Target Population: 1.1  
Expiration Date: 3/31/2019 IMS: No

**Program Name:** WEST COAST RECOVERY CENTERS  
Legal Name: WEST COAST MEN'S, LLC  
Address: 516 SOUTH THE STRAND, UNIT B  
City, State Zip: OCEANSIDE, CA 92054  
Phone: (855) 927-2687 Fax: (760) 434-2238  
**Record ID:** 370135AP  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.2  
Expiration Date: 7/31/2018 IMS: No

**Program Name:** WEST COAST RECOVERY CENTERS  
Legal Name: WEST COAST MEN'S, LLC  
Address: 785 GRAND AVENUE  
SUITES 214, 216, & 220  
City, State Zip: CARLSBAD, CA 92008  
Phone: (442) 500-8236 Fax: (442) 500-8479  
**Record ID:** 370135BP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 11/30/2017 IMS: No

**Program Name:** PACIFIC BAY RECOVERY  
Legal Name: PACIFIC BAY RECOVERY INC  
Address: 1501 5TH AVENUE, SUITE 100,101 AND 201  
City, State Zip: SAN DIEGO, CA 92101  
Phone: (619) 456-0811 Fax: (619) 456-0832  
**Record ID:** 370136AP  
Service Type: NON  
Target Population: 1.8  
Expiration Date: 5/31/2018 IMS: No

**Program Name:** PACIFIC BAY RECOVERY  
Legal Name: PACIFIC BAY RECOVERY INC  
Address: 4095 JACKDAW STREET  
City, State Zip: SAN DIEGO, CA 92103  
Phone: (619) 542-9956 Fax: (619) 456-0832  
**Record ID:** 370136CP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 10/31/2018 IMS: No

**Program Name:** TRUE LIFE CENTER FOR WELLBEING, INC.  
Legal Name: TRUE LIFE CENTER FOR WELLBEING, INC.  
Address: 4520 EXECUTIVE DRIVE, SUITE 225  
City, State Zip: SAN DIEGO, CA 92121  
Phone: (858) 349-4116  
**Record ID:** 370137AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 4/30/2018 IMS: No

**Program Name:** APEX RECOVERY  
Legal Name: APEX RECOVERY, LLC  
Address: 4251 NABAL DRIVE  
City, State Zip: LA MESA, CA 91941  
Phone: (619) 756-6424 Fax: (619) 243-7211  
**Record ID:** 370138AP  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 7/31/2018 IMS: No

**Program Name:** APEX RECOVERY  
Legal Name: APEX RECOVERY, LLC  
Address: 9952 GRANDVIEW DRIVE  
City, State Zip: LA MESA, CA 91941  
Phone: (619) 756-6424 Fax: (619) 243-7211  
**Record ID:** 370138BP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 10/31/2017 IMS: No

**Program Name:** GENESIS RECOVERY, INC.  
Legal Name: GENESIS RECOVERY, INC.  
Address: 24352 FEATHERSTONE CANYON ROAD  
City, State Zip: LAKESIDE, CA 92040  
Phone: (619) 797-7319 Fax: (619) 367-9737  
**Record ID:** 370139AN  
Service Type: RES  
Resident Capacity: 24  
Total Occupancy: 31  
Target Population: 1.2  
Expiration Date: 9/30/2018 IMS: No

**Program Name:** GENESIS RECOVERY, INC. DAY PROGRAM  
Legal Name: GENESIS RECOVERY, INC.  
Address: 7373 UNIVERSITY AVE, SUITE 110  
City, State Zip: LA MESA, CA 91942  
Phone: (619) 797-7319 Fax: (619) 367-9737  
**Record ID:** 370139BN  
Service Type: NON  
Target Population: 1.2  
Expiration Date: 3/31/2019 IMS: No

**Program Name:** CONFIDENTIAL RECOVERY  
Legal Name: COMMUNITY BEHAVIORAL HEALTH SOLUTIONS, INC.  
Address: 7071 CONSOLIDATED WAY  
City, State Zip: SAN DIEGO, CA 92121  
Phone: (858) 449-3898  
**Record ID:** 370140AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 8/31/2018 IMS: No

**Program Name:** PRACTICAL RECOVERY IOP  
Legal Name: PRACTICAL RECOVERY PSYCHOLOGY GROUP, INC.  
Address: 8950 VILLA LA JOLLA DRIVE, SUITE B214  
City, State Zip: LA JOLLA, CA 92037-1708  
Phone: (858) 546-1100 Fax: (858) 455-0141  
**Record ID:** 370141AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 9/30/2018 IMS: No

**Program Name:** SOLUTIONS FOR RECOVERY  
Legal Name: FAMILY HEALTH CENTERS OF SAN DIEGO, INC.  
Address: 2136 EL CAJON BOULEVARD  
City, State Zip: SAN DIEGO, CA 92104  
Phone: (619) 515-2588 Fax: (619) 269-8349  
**Record ID:** 370142AN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 12/31/2018 IMS: No

**Program Name:** SOUTHERN CALIFORNIA RECOVERY CENTER - ENCINITAS  
Legal Name: DR RECOVERY ENCINITAS, LLC  
Address: 609 S. VULCAN AVENUE, SUITE 301  
City, State Zip: ENCINITAS, CA 92024  
Phone: (800) 410-6552 Fax: (949) 542-3878  
**Record ID:** 370143AP  
Service Type: NON  
Target Population: 1.2  
Expiration Date: 9/30/2018 IMS: No

**Program Name:** RECOVERY WORKS SAN DIEGO  
Legal Name: CLARK E. SMITH, M.D., A MEDICAL CORPORATION  
Address: 9820 WILLOW CREEK ROAD, #295  
City, State Zip: SAN DIEGO, CA 92131  
Phone: (858) 530-9112  
**Record ID:** 370144AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 3/31/2019 IMS: No

**Program Name:** FOUNDATIONS OF SAN DIEGO  
Legal Name: FOUNDATIONS SAN DIEGO, LLC  
Address: 3930 FOURTH AVENUE, SUITE 301  
City, State Zip: SAN DIEGO, CA 92103  
Phone: (619) 849-6011 Fax: (619) 230-5554  
**Record ID:** 370146AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 2/28/2019 IMS: No

**Program Name:** SHERIDAN GARDENS  
Legal Name: SIERRA ASSET MANAGEMENT, LLC  
Address: 2021 SHERIDAN ROAD  
City, State Zip: ENCINITAS, CA 92024  
Phone: (706) 230-1176 Fax: (949) 660-0632  
**Record ID:** 370147AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 7  
Target Population: 1.1  
Expiration Date: 4/30/2019 IMS: No

**Program Name:** PRESENT MOMENTS RECOVERY  
Legal Name: WINDRIVER RECOVERY, LLC  
Address: 1809 WINDRIVER STREET  
City, State Zip: SAN MARCOS, CA 92078  
Phone: (619) 363-4767 Fax: (619) 655-4732  
**Record ID:** 370148AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 7  
Target Population: 1.1  
Expiration Date: 4/30/2019 IMS: No

**Program Name:** PACIFIC TREATMENT SERVICES  
Legal Name: W. WOOTON, INC.  
Address: 333 SOUTH JUNIPER STREET, SUITE 114  
City, State Zip: ESCONDIDO, CA 92025  
Phone: (858) 610-0438  
**Record ID:** 370150AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 11/30/2017 IMS: No

**Program Name:** CROWNVIEW CO-OCCURRING INSTITUTE INCORPORATED  
Legal Name: CROWNVIEW CO-OCCURRING INSTITUTE, INCORPORATED  
Address: 2892 JEFFERSON STREET  
City, State Zip: CARLSBAD, CA 92008  
Phone: (760) 434-9500 Fax: (760) 434-3550  
**Record ID:** 370151AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 11/30/2017 IMS: No

**Program Name:** AFFINITY TREATMENT CENTERS  
Legal Name: CAMELOT AT AFFINITY TREATMENT CENTERS, INC.  
Address: 2035 ALTA VISTA DRIVE  
City, State Zip: VISTA, CA 92084  
Phone: (760) 917-1112 Fax: (760) 414-9127  
**Record ID:** 370152AP  
Service Type: RES  
Resident Capacity: 5  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 4/30/2018 IMS: No

**Program Name:** OCEAN RANCH RECOVERY  
Legal Name: SOCAL DETOX LLC  
Address: 20555 FORTUNA DEL SUR  
City, State Zip: ELFIN FOREST, CA 92029  
Phone: (888) 590-0777 Fax: (360) 323-7285  
**Record ID:** 370153AP  
Service Type: RES-DETOX  
Resident Capacity: 10  
Total Occupancy: 10  
Target Population: 1.1  
Expiration Date: 11/30/2017 IMS: No

**Program Name:** VILLA KALI MA  
Legal Name: KALI WEST LLC  
Address: 2912 MANAGUA PLACE  
City, State Zip: CARLSBAD, CA 92009  
Phone: (619) 246-8862 Fax: (760) 683-5157  
**Record ID:** 370154AP  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.3  
Expiration Date: 7/31/2018 IMS: No

**Program Name:** SOBER COLLEGE SAN DIEGO  
Legal Name: SAN DIEGO STUDENT RECOVERY, LLC  
Address: 5440 MOREHOUSE DRIVE, #4500  
City, State Zip: SAN DIEGO, CA 92121  
Phone: (310) 363-2415 Fax: (858) 750-3205  
**Record ID:** 370155AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 2/28/2018 IMS: No

**Program Name:** DIEGO PALMS RECOVERY  
Legal Name: DIEGO PALMS RECOVERY, INC.  
Address: 700 GARDEN VIEW COURT,  
SUITE 202  
City, State Zip: ENCINITAS, CA 92024  
Phone: (760) 479-6163  
**Record ID:** 370156AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 3/31/2018 IMS: No

**Program Name:** TRUE NORTH RECOVERY SERVICES  
Legal Name: TRUE NORTH BEHAVIORAL, APC  
Address: 543 ENCINITAS BOULEVARD,  
SUITE 109  
City, State Zip: ENCINITAS, CA 92024  
Phone: (760) 517-6544 Fax: (888) 850-3284  
**Record ID:** 370157AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 4/30/2018 IMS: No

**Program Name:** SOUTHERN CALIFORNIA RECOVERY CENTERS  
Legal Name: SOUTHERN CALIFORNIA RECOVERY CENTERS OCEANSIDE, LLC  
Address: 2850 PIO PICO DRIVE, SUITES A, B, C, & D  
City, State Zip: CARLSBAD, CA 92008  
Phone: (949) 542-3879 Fax: (760) 607-3038  
**Record ID:** 370158AP  
Service Type: NON  
Target Population: 1.2  
Expiration Date: 8/31/2018 IMS: No

**Program Name:** LA JOLLA RECOVERY  
Legal Name: LA JOLLA RECOVERY, INC.  
Address: 7301 GIRARD AVENUE, SUITE LL  
City, State Zip: LA JOLLA, CA 92037  
Phone: (858) 345-7926  
**Record ID:** 370159AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 8/31/2018 IMS: No

**Program Name:** PACIFIC PALMS RECOVERY  
Legal Name: PACIFIC PALMS RECOVERY, LLC  
Address: 2215 MESA DRIVE  
City, State Zip: OCEANSIDE, CA 92054  
Phone: (949) 228-4207 Fax: (949) 234-9634  
**Record ID:** 370160AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 8/31/2018 IMS: No

**Program Name:** BLVD CENTERS, INC.  
Legal Name: BLVD CENTERS INC.  
Address: 3785 6TH AVENUE,  
200  
City, State Zip: SAN DIEGO, CA 92103  
Phone: (619) 541-6078 Fax: (213) 262-2082  
**Record ID:** 370161AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 10/31/2018 IMS: No

**Program Name:** PARAGON RECOVERY  
Legal Name: PARAGON RECOVERY, LLC.  
Address: 1852 SANTA MARGARITA DRIVE  
City, State Zip: FALLBROOK, CA 92028  
Phone: (760) 731-1386  
**Record ID:** 370163AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 10/31/2018 IMS: No

**Program Name:** TALK THERAPY PSYCHOLOGY CENTER  
Legal Name: TALK THERAPY PSYCHOLOGY CENTER, CORP.  
Address: 5935 CORNERSTONE COURT WEST  
SUITE 125  
City, State Zip: SAN DIEGO, CA 92121  
Phone: (858) 205-2490  
**Record ID:** 370164AP  
Service Type: NON  
Target Population: 1.8  
Expiration Date: 10/31/2018 IMS: No

**Program Name:** LA JOLLA ADDICTION HEALING CENTER  
Legal Name: LA JOLLA ADDICTION HEALING CENTER  
Address: 7590 FAY AVENUE, SUITE 404  
City, State Zip: LA JOLLA, CA 92037  
Phone: (858) 454-4357  
**Record ID:** 370165AP  
Service Type: NON  
Target Population: 1.7  
Expiration Date: 12/31/2018 IMS: No

**Program Name:** FUTURES TREATING ADDICTIONS  
Legal Name: FUTURES RECOVERY, INC.  
Address: 1405 MISSOURI AVENUE  
City, State Zip: OCEANSIDE, CA 92054  
Phone: (800) 944-6441 Fax: (800) 944-6441  
**Record ID:** 370166AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 5/31/2019 IMS: No

**Program Name:** BETTY FORD CENTER - SAN DIEGO  
Legal Name: HAZELDEN BETTY FORD FOUNDATION  
Address: 11720 EL CAMINO REAL, SUITE 200  
City, State Zip: SAN DIEGO, CA 92130  
Phone: (858) 766-9980 Fax: (858) 259-0197  
**Record ID:** 370167AN  
Service Type: NON  
Target Population: 1.7  
Expiration Date: 5/31/2019 IMS: No

**Program Name:** CALIFORNIA VISTAS ADDICTION TREATMENT  
Legal Name: CALIFORNIA ADDICTION TREATMENT CENTER LLC  
Address: 3875 PEONY DRIVE  
City, State Zip: FALLBROOK, CA 92028  
Phone: (951) 764-3950 Fax: (909) 245-1090  
**Record ID:** 370168AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 6/30/2019 IMS: Yes

**Program Name:** IMMERSIVE RECOVERY  
Legal Name: CALIFORNIA COASTAL RECOVERY CENTERS, LLC  
Address: 1582 W. SAN MARCOS BLVD, SUITE 301  
City, State Zip: SAN MARCOS, CA 92069  
Phone: (858) 342-9151  
**Record ID:** 370169AP  
Service Type: NON  
Target Population: 1.7  
Expiration Date: 4/30/2019 IMS: No

**Program Name:** RESTORE DETOX CENTERS  
Legal Name: RESTORE TREATMENT CENTERS, LLC  
Address: 14099 SKY MOUNTAIN TRAIL  
City, State Zip: POWAY, CA 92064  
Phone: (949) 813-6151 Fax: (760) 216-6760  
**Record ID:** 370171AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 6/30/2019 IMS: Yes

**Program Name:** SHORELINE RANCH  
Legal Name: PURE LIFE RECOVERY, LLC.  
Address: 19915 FORTUNA DEL ESTE  
City, State Zip: ESCONDIDO, CA 92029  
Phone: (949) 346-2486 Fax: (949) 545-6267  
**Record ID:** 370174AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 6/30/2018 IMS: No

State of California, Department of Health Care Services  
Licensed Residential Facilities and/or  
Certified Alcohol and Drug Programs

As of 9/1/2017

San Francisco County

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**Program Name:** ACCEPTANCE PLACE  
Legal Name: BAKER PLACES, INC.  
Address: 1326 4TH AVENUE  
City, State Zip: SAN FRANCISCO, CA 94122  
Phone: (415) 682-2080 Fax: (415) 626-2398  
**Record ID:** 380001BN  
Service Type: RES  
Resident Capacity: 10  
Total Occupancy: 10  
Target Population: 1.2  
Expiration Date: 1/31/2018 IMS: No

**Program Name:** FERGUSON PLACE  
Legal Name: BAKER PLACES, INC.  
Address: 1249 SCOTT STREET  
City, State Zip: SAN FRANCISCO, CA 94115  
Phone: (415) 922-9104 Fax: (415) 922-1427  
**Record ID:** 380001CN  
Service Type: RES  
Resident Capacity: 12  
Total Occupancy: 12  
Target Population: 1.1  
Expiration Date: 1/31/2019 IMS: No

**Program Name:** JOE HEALY DETOXIFICATION PROGRAM  
Legal Name: BAKER PLACES, INC.  
Address: 101 GOUGH/120 PAGE STREET, 2ND AND 3RD FLOOR  
City, State Zip: SAN FRANCISCO, CA 94102  
Phone: (415) 553-4490  
**Record ID:** 380001IN  
Service Type: RES-DETOX  
Resident Capacity: 31  
Total Occupancy: 31  
Target Population: 1.1  
Expiration Date: 9/30/2018 IMS: No

**Program Name:** ARA FIRST STEP HOME  
Legal Name: ALCOHOLICS REHABILITATION ASSOCIATION OF SAN FRANCISCO, INC.  
Address: 1035 HAIGHT STREET  
City, State Zip: SAN FRANCISCO, CA 94117  
Phone: (415) 863-3661 Fax: (415) 863-3670  
**Record ID:** 380003AN  
Service Type: RES  
Resident Capacity: 45  
Total Occupancy: 45  
Target Population: 1.1  
Expiration Date: 2/28/2018 IMS: No

**Program Name:** FRIENDSHIP HOUSE  
Legal Name: THE FRIENDSHIP HOUSE ASSOCIATION OF AMERICAN INDIANS  
Address: 56 JULIAN AVENUE, 1ST, 2ND AND 3RD AND 4TH FLOORS  
City, State Zip: SAN FRANCISCO, CA 94103  
Phone: (415) 865-0964 Fax: (415) 865-5428  
**Record ID:** 380004AN  
Service Type: RES  
Resident Capacity: 80  
Total Occupancy: 80  
Target Population: 1.1  
Expiration Date: 10/31/2017 IMS: No



**Program Name:** GOLDEN GATE FOR SENIORS  
Legal Name: COMMUNITY AWARENESS & TREATMENT SERVICES, INC.  
Address: 637 SOUTH VAN NESS AVENUE  
City, State Zip: SAN FRANCISCO, CA 94110  
Phone: (415) 626-7553  
**Record ID:** 380005AN  
Service Type: RES  
Resident Capacity: 19  
Total Occupancy: 20  
Target Population: 1.1  
Expiration Date: 7/31/2018 IMS: No

**Program Name:** HARBOR LIGHT ALCOHOL SERVICES CENTER  
Legal Name: THE SALVATION ARMY  
Address: 1275 HARRISON STREET  
City, State Zip: SAN FRANCISCO, CA 94103  
Phone: (415) 503-3000  
**Record ID:** 380006AN  
Service Type: RES-DETOX  
Resident Capacity: 118  
Total Occupancy: 118  
Target Population: 1.1  
Expiration Date: 4/30/2018 IMS: No

**Program Name:** THE SALVATION ARMY - HARBOR HOUSE  
Legal Name: THE SALVATION ARMY  
Address: 407 NINTH STREET  
City, State Zip: SAN FRANCISCO, CA 94103  
Phone: (415) 503-3000 Fax: (415) 252-6159  
**Record ID:** 380006EN  
Service Type: RES  
Resident Capacity: 30  
Total Occupancy: 82  
Target Population: 1.1  
Expiration Date: 8/31/2018 IMS: No

**Program Name:** LATINO FAMILY ALCOHOLISM COUNSELING CENTER  
Legal Name: THE MISSION COUNCIL ON ALCOHOL ABUSE FOR THE SPANISH SPEAKING  
Address: 154-A CAPP STREET  
City, State Zip: SAN FRANCISCO, CA 94110  
Phone: (415) 826-6767 Fax: (415) 826-1408  
**Record ID:** 380008AN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 8/31/2017 IMS: No

**Program Name:** FAMILY DAY TREATMENT PROGRAM  
Legal Name: THE MISSION COUNCIL ON ALCOHOL ABUSE FOR THE SPANISH SPEAKING  
Address: 154-A CAPP STREET  
City, State Zip: SAN FRANCISCO, CA 94110  
Phone: (415) 826-0554 Fax: (415) 701-1868  
**Record ID:** 380008EN  
Service Type: NON  
Target Population: 1.7  
Expiration Date: 1/31/2019 IMS: No

**Program Name:** HENRY OHLHOFF HOUSE  
Legal Name: HENRY OHLHOFF HOUSE  
Address: 601 AND 625 STEINER STREET  
City, State Zip: SAN FRANCISCO, CA 94117  
Phone: (415) 621-4388 Fax: (415) 626-0170  
**Record ID:** 380013AN  
Service Type: RES  
Resident Capacity: 52  
Total Occupancy: 52  
Target Population: 1.1  
Expiration Date: 10/31/2017 IMS: No

**Program Name:** HENRY OHLHOFF OUTPATIENT PROGRAMS  
Legal Name: HENRY OHLHOFF HOUSE  
Address: 2191 MARKET STREET, SUITE A  
City, State Zip: SAN FRANCISCO, CA 94114  
Phone: (415) 575-1100 Fax: (415) 575-1106  
**Record ID:** 380013BN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 3/31/2018 IMS: No

**Program Name:** HEALTHRIGHT 360  
Legal Name: HEALTHRIGHT 360  
Address: 1735 MISSION STREET  
City, State Zip: SAN FRANCISCO, CA 94103  
Phone: (415) 970-7500 Fax: (415) 746-1968  
**Record ID:** 380016ACN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 11/30/2017 IMS: No

**Program Name:** HEALTHRIGHT 360  
Legal Name: HEALTHRIGHT 360  
Address: 1318 GATEVIEW STREET, TREASURE ISLAND UNITS A-F;  
1442 CHINOOK COURT, UNIT D  
City, State Zip: SAN FRANCISCO, CA 94130  
Phone: (415) 970-7500 Fax: (415) 437-6823  
**Record ID:** 380016ADN  
Service Type: RES  
Resident Capacity: 57  
Total Occupancy: 57  
Target Population: 1.1  
Expiration Date: 7/31/2018 IMS: No

**Program Name:** HEALTHRIGHT 360  
Legal Name: HEALTHRIGHT 360  
Address: 890 HAYES STREET  
City, State Zip: SAN FRANCISCO, CA 94117  
Phone: (415) 970-7500  
**Record ID:** 380016AFN  
Service Type: RES  
Resident Capacity: 115  
Total Occupancy: 115  
Target Population: 1.2  
Expiration Date: 4/30/2018 IMS: No

**Program Name:** HEALTHRIGHT 360  
Legal Name: HEALTHRIGHT 360  
Address: 214 HAIGHT STREET  
City, State Zip: SAN FRANCISCO, CA 94102  
Phone: (415) 762-3700 Fax: (415) 989-4910  
**Record ID:** 380016AHN  
Service Type: RES  
Resident Capacity: 64  
Total Occupancy: 64  
Target Population: 1.3  
Expiration Date: 3/31/2019 IMS: No

**Program Name:** HEALTHRIGHT 360  
Legal Name: HEALTHRIGHT 360  
Address: 1601 DONNER AVENUE #3  
City, State Zip: SAN FRANCISCO, CA 94124  
Phone: (415) 970-7500 Fax: (415) 970-7518  
**Record ID:** 380016AJN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 9/30/2017 IMS: No

**Program Name:** HEALTHRIGHT 360  
Legal Name: HEALTHRIGHT 360  
Address: 2261 AND 2263 BRYANT STREET  
City, State Zip: SAN FRANCISCO, CA 94110  
Phone: (415) 970-7500 Fax: (415) 000-0000  
**Record ID:** 380016AKN  
Service Type: RES  
Resident Capacity: 16  
Total Occupancy: 25  
Target Population: 1.4  
Expiration Date: 7/31/2019 IMS: No

**Program Name:** HEALTHRIGHT 360  
Legal Name: HEALTHRIGHT 360  
Address: 815 BUENA VISTA WEST  
City, State Zip: SAN FRANCISCO, CA 94117  
Phone: (415) 970-7500 Fax: (415) 437-6823  
**Record ID:** 380016ALN  
Service Type: RES-DETOX  
Resident Capacity: 108  
Total Occupancy: 108  
Target Population: 1.1  
Expiration Date: 6/30/2018 IMS: No

**Program Name:** YOUTH SERVICES OF SAN FRANCISCO  
Legal Name: HEALTHRIGHT 360  
Address: 2166 HAYES STREET, SUITE 302  
City, State Zip: SAN FRANCISCO, CA 94117  
Phone: (415) 776-1001 Fax: (415) 776-1066  
**Record ID:** 380016ANN  
Service Type: NON  
Target Population: 1.5  
Expiration Date: 1/31/2018 IMS: No

**Program Name:** ASIAN AMERICAN RESIDENTIAL RECOVERY SERVICES  
Legal Name: HEALTHRIGHT 360  
Address: 2024 HAYES STREET  
City, State Zip: SAN FRANCISCO, CA 94117  
Phone: (415) 750-5111  
**Record ID:** 380016AON  
Service Type: RES  
Resident Capacity: 26  
Total Occupancy: 26  
Target Population: 1.1  
Expiration Date: 2/28/2018 IMS: No

**Program Name:** AARS-PROJECT ADAPT  
Legal Name: HEALTHRIGHT 360  
Address: 2020 HAYES STREET  
City, State Zip: SAN FRANCISCO, CA 94117  
Phone: (415) 750-5125  
**Record ID:** 380016AQN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 9/30/2018 IMS: No

**Program Name:** LEE WOODWARD COUNSELING CENTER FOR WOMEN  
Legal Name: HEALTHRIGHT 360  
Address: 2166 HAYES STREET, SUITE 303 & 303-A  
City, State Zip: SAN FRANCISCO, CA 94117  
Phone: (415) 776-1001 Fax: (415) 776-1066  
**Record ID:** 380016ARN  
Service Type: NON  
Target Population: 1.3  
Expiration Date: 6/30/2018 IMS: No

**Program Name:** HEALTHRIGHT 360 - OUTPATIENT PROGRAM  
**Legal Name:** HEALTHRIGHT 360  
**Address:** 1563 MISSION STREET  
1ST AND 3RD FLOORS  
**City, State Zip:** SAN FRANCISCO, CA 94103  
**Phone:** (415) 762-3700 Ext:301 **Fax:** (415) 865-0119  
**Record ID:** 380016ASN  
**Service Type:** NON  
**Target Population:** 1.1  
**Expiration Date:** 2/28/2018 **IMS:** No

**Program Name:** FATHER ALFRED CENTER  
**Legal Name:** ST. ANTHONY FOUNDATION  
**Address:** 291 10TH STREET  
**City, State Zip:** SAN FRANCISCO, CA 94103  
**Phone:** (415) 592-2880 **Fax:** (415) 252-0537  
**Record ID:** 380017CN  
**Service Type:** RES  
**Resident Capacity:** 80  
**Total Occupancy:** 80  
**Target Population:** 1.2  
**Expiration Date:** 3/31/2018 **IMS:** No

**Program Name:** STEPPING STONE  
**Legal Name:** SAN FRANCISCO WOMEN'S REHABILITATION FOUNDATION, INCORPORATED  
**Address:** 255 10TH AVENUE  
**City, State Zip:** SAN FRANCISCO, CA 94118  
**Phone:** (415) 751-5921 **Fax:** (415) 751-5130  
**Record ID:** 380032AN  
**Service Type:** RES  
**Resident Capacity:** 14  
**Total Occupancy:** 14  
**Target Population:** 1.3  
**Expiration Date:** 8/31/2018 **IMS:** No

**Program Name:** GOOD SHEPHERD GRACENTER  
**Legal Name:** THE GOOD SHEPHERD GRACENTER OF SAN FRANCISCO  
**Address:** 250 AMHERST STREET  
**City, State Zip:** SAN FRANCISCO, CA 94134  
**Phone:** (415) 337-1938 **Fax:** (415) 586-0355  
**Record ID:** 380040BN  
**Service Type:** RES  
**Resident Capacity:** 13  
**Total Occupancy:** 13  
**Target Population:** 1.3  
**Expiration Date:** 6/30/2018 **IMS:** No

**Program Name:** JELANI HOUSE  
**Legal Name:** JELANI, INC.  
**Address:** 1601 QUESADA AVENUE  
**City, State Zip:** SAN FRANCISCO, CA 94124  
**Phone:** (415) 822-5977 **Fax:** (415) 822-5943  
**Record ID:** 380045AN  
**Service Type:** RES  
**Resident Capacity:** 16  
**Total Occupancy:** 42  
**Target Population:** 1.3  
**Expiration Date:** 6/30/2018 **IMS:** No

**Program Name:** JELANI, INC.'S FAMILY PROGRAM  
**Legal Name:** JELANI, INC.  
**Address:** 1638 AND 1640 KIRKWOOD STREET  
**City, State Zip:** SAN FRANCISCO, CA 94124  
**Phone:** (415) 671-1165 **Fax:** (415) 671-1043  
**Record ID:** 380045DN  
**Service Type:** RES  
**Resident Capacity:** 12  
**Total Occupancy:** 24  
**Target Population:** 1.1  
**Expiration Date:** 1/31/2019 **IMS:** No

**Program Name:** CASA QUETZAL RECOVERY HOME  
**Legal Name:** LATINO COMMISSION ON ALCOHOL AND  
DRUG ABUSE SERVICES OF SAN MATEO COUNTY, INC.  
**Address:** 635 BRUNSWICK STREET  
**City, State Zip:** SAN FRANCISCO, CA 94112  
**Phone:** (415) 337-4065  
**Record ID:** 380055AN  
**Service Type:** RES  
**Resident Capacity:** 9  
**Total Occupancy:** 9  
**Target Population:** 1.2  
**Expiration Date:** 10/31/2017 IMS: No

**Program Name:** AVIVA HOUSE  
**Legal Name:** LATINO COMMISSION ON ALCOHOL AND  
DRUG ABUSE SERVICES OF SAN MATEO COUNTY, INC.  
**Address:** 1724-1726 BRYANT STREET  
**City, State Zip:** SAN FRANCISCO, CA 94110  
**Phone:** (415) 558-9125 Fax: (650) 244-1447  
**Record ID:** 380055BN  
**Service Type:** RES  
**Resident Capacity:** 6  
**Total Occupancy:** 9  
**Target Population:** 1.3  
**Expiration Date:** 3/31/2018 IMS: No

**Program Name:** HORIZONS UNLIMITED OF SAN FRANCISCO, INC.  
**Legal Name:** HORIZONS UNLIMITED OF SAN FRANCISCO, INC.  
**Address:** 440 POTRERO AVENUE  
**City, State Zip:** SAN FRANCISCO, CA 94110  
**Phone:** (415) 487-6700 Fax: (415) 487-6724  
**Record ID:** 380059AN  
**Service Type:** NON  
**Target Population:** 1.5  
**Expiration Date:** 2/28/2019 IMS: No

**Program Name:** STIMULANT TREATMENT OUTPATIENT PROGRAM (STOP)  
**Legal Name:** UNIVERISTY OF CALIFORNIA, SAN FRANCISCO  
**Address:** 982 MISSION STREET  
**City, State Zip:** SAN FRANCISCO, CA 94103  
**Phone:** (415) 597-8038 Fax: (415) 597-8004  
**Record ID:** 380061AN  
**Service Type:** NON  
**Target Population:** 1.1  
**Expiration Date:** 5/31/2019 IMS: No

**Program Name:** EPIPHANY HOUSE  
**Legal Name:** MOUNT ST. JOSEPH - ST. ELIZABETH  
**Address:** 1615 BRODERICK STREET  
**City, State Zip:** SAN FRANCISCO, CA 94115  
**Phone:** (415) 409-6003 Fax: (415) 351-4051  
**Record ID:** 380081BN  
**Service Type:** RES  
**Resident Capacity:** 14  
**Total Occupancy:** 22  
**Target Population:** 1.4  
**Expiration Date:** 11/30/2017 IMS: No

**Program Name:** EPIPHANY RESIDENTIAL PROGRAM  
**Legal Name:** MOUNT ST. JOSEPH - ST. ELIZABETH  
**Address:** 100 MASONIC AVENUE  
**City, State Zip:** SAN FRANCISCO, CA 94118  
**Phone:** (415) 567-8370 Fax: (415) 292-5531  
**Record ID:** 380081CN  
**Service Type:** RES  
**Resident Capacity:** 14  
**Total Occupancy:** 26  
**Target Population:** 1.4  
**Expiration Date:** 11/30/2017 IMS: No

**Program Name:** HARM REDUCTION THERAPY CENTER  
Legal Name: THE HARM REDUCTION THERAPY CENTER  
Address: 45 FRANKLIN STREET, SUITE 320  
City, State Zip: SAN FRANCISCO, CA 94102  
Phone: (415) 252-0669 Fax: (415) 252-0669  
**Record ID:** 380082AN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 8/31/2017 IMS: No

**Program Name:** POST RELEASE EDUCATION PROGRAM (P.R.E.P.)  
Legal Name: SAN FRANCISCO SHERIFF'S DEPARTMENT  
Address: 70 OAK GROVE  
City, State Zip: SAN FRANCISCO, CA 94107  
Phone: (415) 575-6450 Fax: (415) 575-6452  
**Record ID:** 380083BN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 5/31/2019 IMS: No

**Program Name:** SUBSTANCE ABUSE PROGRAM  
Legal Name: CURRY SENIOR CENTER  
Address: 315 TURK STREET  
City, State Zip: SAN FRANCISCO, CA 94102  
Phone: (415) 885-2274 Fax: (415) 885-2344  
**Record ID:** 380091AN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 10/31/2019 IMS: No

**Program Name:** NATIVE AMERICAN HEALTH CENTER  
Legal Name: NATIVE AMERICAN HEALTH CENTER, INC.  
Address: 160 CAPP STREET, 2ND FLOOR  
City, State Zip: SAN FRANCISCO, CA 94110  
Phone: (415) 503-1046 Fax: (415) 503-7081  
**Record ID:** 380094AN  
Service Type: NON  
Target Population: 1.5  
Expiration Date: 5/31/2018 IMS: No

**Program Name:** THE STONEWALL PROJECT  
Legal Name: THE SAN FRANCISCO AIDS FOUNDATION  
Address: 1035 MARKET STREET, SUITE 400  
City, State Zip: SAN FRANCISCO, CA 94103  
Phone: (415) 487-3100 Fax: (415) 558-9657  
**Record ID:** 380096AN  
Service Type: NON  
Target Population: 1.2  
Expiration Date: 3/31/2018 IMS: No

**Program Name:** ASIAN AND PACIFIC ISLANDER WELLNESS CENTER, INC.  
Legal Name: ASIAN AND PACIFIC ISLANDER WELLNESS CENTER, INC.  
Address: 730 POLK STREET, 4TH FLOOR  
City, State Zip: SAN FRANCISCO, CA 94109  
Phone: (415) 292-3400 Fax: (415) 292-3404  
**Record ID:** 380098AN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 7/31/2019 IMS: No

**Program Name:** BAYVIEW HUNTERS POINT FOUNDATION YOUTH SERVICES PROGRAM  
Legal Name: BAYVIEW HUNTERS POINT FOUNDATION FOR COMMUNITY IMPROVEMENT  
Address: 5015 THIRD STREET  
City, State Zip: SAN FRANCISCO, CA 94124  
Phone: (415) 822-1585 Fax: (415) 822-6443  
**Record ID:** 380101DN  
Service Type: NON  
Target Population: 1.5  
Expiration Date: 11/30/2018 IMS: No

**Program Name:** BAYSIDE SAN FRANCISCO  
Legal Name: BAYSIDE MARIN, INC.  
Address: 450 SUTTER STREET, SUITE 300  
City, State Zip: SAN FRANCISCO, CA 94108  
Phone: (415) 721-2000  
**Record ID:** 380102AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 1/31/2018 IMS: No

**Program Name:** FOUNDATIONS SAN FRANCISCO  
Legal Name: FRN OUTPATIENT SAN FRANCISCO LLC  
Address: 55 FRANCISCO STREET, SUITE 405  
City, State Zip: SAN FRANCISCO, CA 94133  
Phone: (415) 293-1370 Fax: (415) 923-8899  
**Record ID:** 380104AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 10/31/2017 IMS: No

**Program Name:** UCSF ALLIANCE HEALTH PROJECT  
Legal Name: THE REGENTS OF THE UNIVERSITY OF CALIFORNIA  
Address: 1930 MARKET STREET  
City, State Zip: SAN FRANCISCO, CA 94102  
Phone: (415) 476-3902 Fax: (415) 476-3655  
**Record ID:** 380105AN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 7/31/2018 IMS: No

State of California, Department of Health Care Services  
Licensed Residential Facilities and/or  
Certified Alcohol and Drug Programs

As of 9/1/2017

San Joaquin County

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**Program Name:** RECOVERY HOUSE  
Legal Name: SAN JOAQUIN COUNTY BEHAVIORAL HEALTH SERVICES  
Address: 500 WEST HOSPITAL ROAD  
City, State Zip: FRENCH CAMP, CA 95231  
Phone: (209) 468-6857 Fax: (209) 468-6739  
**Record ID:** 390002AN  
Service Type: RES-DETOX  
Resident Capacity: 69  
Total Occupancy: 69  
Target Population: 1.1  
Expiration Date: 4/30/2018 IMS: No

**Program Name:** CHEMICAL DEPENDENCY COUNSELING CENTER  
Legal Name: SAN JOAQUIN COUNTY BEHAVIORAL HEALTH SERVICES/SUBSTANCE ABUSE SERVICES  
Address: 620 NORTH AURORA STREET  
SUITES 1, 3, 3A, AND S2-9  
City, State Zip: STOCKTON, CA 95202  
Phone: (209) 468-3720 Fax: (209) 468-8640  
**Record ID:** 390002DN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 9/30/2018 IMS: No

**Program Name:** FAMILY TIES  
Legal Name: SAN JOAQUIN COUNTY BEHAVIORAL HEALTH SERVICES/SUBSTANCE ABUSE SERVICES  
Address: 500 WEST HOSPITAL ROAD  
City, State Zip: FRENCH CAMP, CA 95231  
Phone: (209) 468-6208 Fax: (209) 468-7032  
**Record ID:** 390002EN  
Service Type: RES  
Resident Capacity: 28  
Total Occupancy: 53  
Target Population: 1.3  
Expiration Date: 1/31/2018 IMS: No

**Program Name:** THREE RIVERS INDIAN LODGE  
Legal Name: NATIVE DIRECTIONS, INC.  
Address: 13505 SOUTH UNION ROAD  
City, State Zip: MANTECA, CA 95336  
Phone: (209) 858-2421 Fax: (209) 858-4692  
**Record ID:** 390003AN  
Service Type: RES  
Resident Capacity: 20  
Total Occupancy: 20  
Target Population: 1.2  
Expiration Date: 5/31/2019 IMS: No

**Program Name:** NEW DIRECTIONS  
Legal Name: ALCOHOL AND DRUG AWARENESS PROGRAM  
Address: 1981 CHEROKEE ROAD  
City, State Zip: STOCKTON, CA 95205  
Phone: (209) 870-6506 Fax: (209) 982-1216  
**Record ID:** 390007BN  
Service Type: RES-DETOX  
Resident Capacity: 90  
Total Occupancy: 95  
Target Population: 1.1  
Expiration Date: 2/28/2018 IMS: No



**Program Name:** NEW DIRECTIONS  
Legal Name: ALCOHOL AND DRUG AWARENESS PROGRAM  
Address: 1981 CHEROKEE ROAD,  
OP MEETING ROOM  
City, State Zip: STOCKTON, CA 95205  
Phone: (209) 870-6506 Fax: (209) 870-6521  
**Record ID:** 390007CN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 2/28/2018 IMS: No

**Program Name:** SERVICE FIRST OUTPATIENT PROGRAM  
Legal Name: SERVICE FIRST OF NORTHERN CALIFORNIA  
Address: 1222 MONACO COURT, SUITE 28  
City, State Zip: STOCKTON, CA 95207  
Phone: (209) 644-6327 Fax: (209) 644-6327  
**Record ID:** 390017AN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 11/30/2017 IMS: No

**Program Name:** SERVICE FIRST OUTPATIENT PROGRAM  
Legal Name: SERVICE FIRST OF NORTHERN CALIFORNIA  
Address: 445 W. WEBER AVENUE, SUITE 129  
City, State Zip: STOCKTON, CA 95203  
Phone: (209) 644-4829  
**Record ID:** 390017BN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 3/31/2018 IMS: No

**Program Name:** VALLEY COMMUNITY COUNSELING SERVICES, INC.  
Legal Name: VALLEY COMMUNITY COUNSELING SERVICES, INC.  
Address: 129 E. CENTER STREET, SUITE 4  
City, State Zip: MANTECA, CA 95336  
Phone: (209) 823-1911 Fax: (209) 823-1931  
**Record ID:** 390029AN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 1/31/2019 IMS: No

**Program Name:** VALLEY COMMUNITY COUNSELING SERVICES  
Legal Name: VALLEY COMMUNITY COUNSELING SERVICES, INC.  
Address: 1300 WEST LODI AVENUE, SUITE G1+ G2  
City, State Zip: LODI, CA 95242  
Phone: (209) 334-2126 Fax: (209) 334-9340  
**Record ID:** 390029BN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 1/31/2019 IMS: No

**Program Name:** VALLEY COMMUNITY COUNSELING SERVICES, INC.  
Legal Name: VALLEY COMMUNITY COUNSELING SERVICES, INC.  
Address: 19 EAST 6TH STREET  
City, State Zip: TRACY, CA 95376  
Phone: (209) 835-8583 Fax: (209) 835-2910  
**Record ID:** 390029CN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 1/31/2019 IMS: No

**Program Name:** PACIFIC VALLEY RECOVERY CENTER, INCORPORATED  
Legal Name: PACIFIC VALLEY RECOVERY CENTER, INCORPORATED  
Address: 1125 N. HUNTER STREET, SUITE 14-A  
City, State Zip: STOCKTON, CA 95202  
Phone: (209) 817-5720 Fax: (209) 466-7627  
**Record ID:** 390030AN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 4/30/2019 IMS: No

**Program Name:** FRESH BEGINNING, INC.  
Legal Name: FRESH BEGINNING, INC.  
Address: 72 WEST 11TH STREET, SUITE A  
City, State Zip: TRACY, CA 95376  
Phone: (209) 830-7400 Fax: (209) 833-8386  
**Record ID:** 390031AN  
Service Type: NON  
Target Population: 1.5  
Expiration Date: 11/30/2017 IMS: No

**Program Name:** STOCKTON CIRCLE OF FRIENDS ADULT PROGRAM  
Legal Name: STOCKTON CIRCLE OF FRIENDS ADULT PROGRAMS  
Address: 3120 AND 3128 EAST ANITA STREET  
City, State Zip: STOCKTON, CA 95205  
Phone: (209) 451-0315 Fax: (209) 451-0602  
**Record ID:** 390032AN  
Service Type: RES  
Resident Capacity: 18  
Total Occupancy: 18  
Target Population: 1.2  
Expiration Date: 6/30/2019 IMS: No

State of California, Department of Health Care Services  
Licensed Residential Facilities and/or  
Certified Alcohol and Drug Programs

As of 9/1/2017

San Luis Obispo County

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**Program Name:** SAN LUIS OBISPO COUNTY DRUG AND ALCOHOL SERVICES  
**Legal Name:** SAN LUIS OBISPO COUNTY DRUG AND ALCOHOL SERVICES  
**Address:** 2180 JOHNSON AVENUE, ROOMS 101-148 AND BLUE ROOM  
**City, State Zip:** SAN LUIS OBISPO, CA 93401  
**Phone:** (805) 781-4275  
**Record ID:** 400003AN  
**Service Type:** NON  
**Target Population:** 1.1  
**Expiration Date:** 1/31/2018 IMS: No

**Program Name:** SAN LUIS OBISPO COUNTY DRUG AND ALCOHOL SERVICES  
**Legal Name:** SAN LUIS OBISPO COUNTY DRUG AND ALCOHOL SERVICES  
**Address:** 1523 LONGBRANCH AVENUE  
**City, State Zip:** GROVER BEACH, CA 93433  
**Phone:** (805) 473-7080 Fax: (805) 473-7188  
**Record ID:** 400003DN  
**Service Type:** NON  
**Target Population:** 1.1  
**Expiration Date:** 6/30/2018 IMS: No

**Program Name:** CENTRAL COAST FREEDOM CENTER  
**Legal Name:** ARTEMIS HILL RECOVERY INC.  
**Address:** 6005 CAPISTRANO AVENUE,  
SUITE C, D, E, F, G & H  
**City, State Zip:** ATASCADERO, CA 93422  
**Phone:** (805) 461-1519  
**Record ID:** 400005AP  
**Service Type:** NON  
**Target Population:** 1.1  
**Expiration Date:** 7/31/2019 IMS: No

**Program Name:** BRYAN'S HOUSE  
**Legal Name:** BRYAN'S HOUSE  
**Address:** 6480 NORTH STAR LANE  
**City, State Zip:** PASO ROBLES, CA 93446-7639  
**Phone:** (805) 591-9233 Fax: (805) 238-6309  
**Record ID:** 400008AP  
**Service Type:** RES  
**Resident Capacity:** 5  
**Total Occupancy:** 16  
**Target Population:** 1.12  
**Expiration Date:** 4/30/2018 IMS: No

**Program Name:** THE HAVEN AT PISMO  
**Legal Name:** TIKVA TREATMENT, LLC  
**Address:** 929 HIDDEN PINE LANE  
**City, State Zip:** ARROYO GRANDE, CA 93420  
**Phone:** (805) 202-3440  
**Record ID:** 400009AP  
**Service Type:** RES-DETOX  
**Resident Capacity:** 6  
**Total Occupancy:** 6  
**Target Population:** 1.1  
**Expiration Date:** 6/30/2018 IMS: No

**Program Name:** THE HAVEN AT PISMO  
Legal Name: TIKVA TREATMENT, LLC  
Address: 107 NELSON STREET,  
SUITE 102  
City, State Zip: ARROYO GRANDE, CA 93420  
Phone: (805) 202-3440  
**Record ID:** 400009BP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 6/30/2018 IMS: No

**Program Name:** THE HAVEN AT PISMO  
Legal Name: TIKVA TREATMENT, LLC  
Address: 2030 IDYLLWILD PLACE  
City, State Zip: ARROYO GRANDE, CA 93420  
Phone: (805) 202-3440  
**Record ID:** 400009CP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 6/30/2018 IMS: No

**Program Name:** THE HAVEN AT PISMO  
Legal Name: TIKVA TREATMENT, LLC  
Address: 944 VIA SOLANA  
City, State Zip: ARROYO GRANDE, CA 93420  
Phone: (805) 202-3440  
**Record ID:** 400009DP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 10  
Target Population: 1.1  
Expiration Date: 6/30/2018 IMS: No

State of California, Department of Health Care Services  
Licensed Residential Facilities and/or  
Certified Alcohol and Drug Programs

As of 9/1/2017

San Mateo County

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**Program Name:** PALM AVENUE SOCIAL MODEL DETOXIFICATION  
**Legal Name:** HORIZON SERVICES, INCORPORATED  
**Address:** 2251 PALM AVENUE  
**City, State Zip:** SAN MATEO, CA 94403  
**Phone:** (650) 513-6500 **Fax:** (650) 513-6506  
**Record ID:** 41003AN  
**Service Type:** RES-DETOX  
**Resident Capacity:** 22  
**Total Occupancy:** 22  
**Target Population:** 1.1  
**Expiration Date:** 2/28/2018 **IMS:** No

**Program Name:** BETTS HOUSE  
**Legal Name:** PROJECT NINETY  
**Address:** 23 AND 29 NORTH GRANT STREET  
**City, State Zip:** SAN MATEO, CA 94401  
**Phone:** (650) 579-7881 **Fax:** (650) 579-2640  
**Record ID:** 41005CN  
**Service Type:** RES  
**Resident Capacity:** 10  
**Total Occupancy:** 11  
**Target Population:** 1.2  
**Expiration Date:** 10/31/2017 **IMS:** No

**Program Name:** ELLIOTT CENTER  
**Legal Name:** PROJECT NINETY  
**Address:** 314 BADEN AVENUE  
**City, State Zip:** SOUTH SAN FRANCISCO, CA 94080  
**Phone:** (650) 579-7881 **Fax:** (650) 579-2640  
**Record ID:** 41005MN  
**Service Type:** RES  
**Resident Capacity:** 8  
**Total Occupancy:** 10  
**Target Population:** 1.2  
**Expiration Date:** 10/31/2018 **IMS:** No

**Program Name:** BRENNER HOUSE  
**Legal Name:** PROJECT NINETY  
**Address:** 535 BADEN AVENUE  
**City, State Zip:** SOUTH SAN FRANCISCO, CA 94080  
**Phone:** (650) 579-7881  
**Record ID:** 41005RN  
**Service Type:** RES  
**Resident Capacity:** 6  
**Total Occupancy:** 8  
**Target Population:** 1.2  
**Expiration Date:** 10/31/2018 **IMS:** No

**Program Name:** PROJECT NINETY  
**Legal Name:** PROJECT NINETY  
**Address:** 416 2ND AVENUE  
**City, State Zip:** SAN MATEO, CA 94401  
**Phone:** (650) 579-7157 **Ext:** 0 **Fax:** (650) 579-2640  
**Record ID:** 41005VN  
**Service Type:** NON  
**Target Population:** 1.1  
**Expiration Date:** 5/31/2019 **IMS:** No

**Program Name:** PROJECT NINETY  
Legal Name: PROJECT NINETY  
Address: 114 SOUTH DELAWARE STREET  
City, State Zip: SAN MATEO, CA 94401  
Phone: (650) 375-8103 Fax: (650) 579-2640  
**Record ID:** 410005YN  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.2  
Expiration Date: 7/31/2019 IMS: No

**Program Name:** PYRAMID ALTERNATIVES  
Legal Name: PYRAMID ALTERNATIVES COUNSELING AND EDUCATION, INC.  
Address: 480 MANOR PLAZA  
City, State Zip: PACIFICA, CA 94044  
Phone: (650) 355-8787 Fax: (650) 355-8780  
**Record ID:** 410006AN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 3/31/2019 IMS: No

**Program Name:** PYRAMID ALTERNATIVES  
Legal Name: PYRAMID ALTERNATIVES COUNSELING AND EDUCATION, INC.  
Address: 1590 EL CAMINO REAL, UNITS H AND J  
City, State Zip: SAN BRUNO, CA 94066  
Phone: (650) 355-8787 Fax: (650) 355-8780  
**Record ID:** 410006CN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 3/31/2019 IMS: No

**Program Name:** OUR COMMON GROUND EPA  
Legal Name: OUR COMMON GROUND, INC.  
Address: 2560 PULGAS AVENUE  
City, State Zip: EAST PALO ALTO, CA 94303  
Phone: (650) 325-6466 Fax: (650) 364-7987  
**Record ID:** 410012CN  
Service Type: RES  
Resident Capacity: 32  
Total Occupancy: 32  
Target Population: 1.1  
Expiration Date: 8/31/2018 IMS: No

**Program Name:** HOPE HOUSE  
Legal Name: SERVICES LEAGUE OF SAN MATEO COUNTY  
Address: 3787-A, 3787-B AND 3789 HOOVER STREET  
City, State Zip: REDWOOD CITY, CA 94063  
Phone: (650) 363-8735 Fax: (650) 363-8701  
**Record ID:** 410013AN  
Service Type: RES  
Resident Capacity: 16  
Total Occupancy: 20  
Target Population: 1.4  
Expiration Date: 5/31/2019 IMS: No

**Program Name:** CASA MARIA RECOVERY HOME  
Legal Name: LATINO COMMISSION ON ALCOHOL AND  
DRUG ABUSE SERVICES OF SAN MATEO COUNTY, INC.  
Address: 508 7TH AVENUE  
City, State Zip: SAN BRUNO, CA 94066-4522  
Phone: (650) 244-1444 Fax: (650) 244-1444  
**Record ID:** 410020AN  
Service Type: RES  
Resident Capacity: 9  
Total Occupancy: 9  
Target Population: 1.3  
Expiration Date: 4/30/2019 IMS: No

**Program Name:** CASA AZTLAN RECOVERY HOME  
**Legal Name:** LATINO COMMISSION ON ALCOHOL AND  
DRUG ABUSE SERVICES OF SAN MATEO COUNTY, INC.  
**Address:** 401 BRIARFIELD WAY  
**City, State Zip:** BELMONT, CA 94002  
**Phone:** (650) 355-7573  
**Record ID:** 410020DN  
**Service Type:** RES  
**Resident Capacity:** 9  
**Total Occupancy:** 9  
**Target Population:** 1.2  
**Expiration Date:** 4/30/2019 IMS: No

**Program Name:** LATINO COMMISSION-ENTRE FAMILIA OUTPATIENT  
**Legal Name:** LATINO COMMISSION ON ALCOHOL AND  
DRUG ABUSE SERVICES OF SAN MATEO COUNTY, INC.  
**Address:** 301 GRAND AVENUE, SUITE 301  
**City, State Zip:** SOUTH SAN FRANCISCO, CA 94080  
**Phone:** (650) 244-1444 Fax: (650) 244-1447  
**Record ID:** 410020IN  
**Service Type:** NON  
**Target Population:** 1.1  
**Expiration Date:** 11/30/2017 IMS: No

**Program Name:** SITIKE COUNSELING CENTER  
**Legal Name:** SITIKE  
**Address:** 306 SPRUCE AVENUE  
**City, State Zip:** SOUTH SAN FRANCISCO, CA 94080  
**Phone:** (650) 589-9305 Fax: (650) 589-9330  
**Record ID:** 410023AN  
**Service Type:** NON  
**Target Population:** 1.1  
**Expiration Date:** 10/31/2018 IMS: No

**Program Name:** EL CENTRO DE LIBERTAD/THE FREEDOM CENTER, INC.  
**Legal Name:** EL CENTRO DE LIBERTAD/THE FREEDOM CENTER, INC.  
**Address:** 500 ALLERTON STREET  
**City, State Zip:** REDWOOD CITY, CA 94063  
**Phone:** (650) 599-9955 Fax: (950) 599-9273  
**Record ID:** 410026CN  
**Service Type:** NON  
**Target Population:** 1.1  
**Expiration Date:** 2/28/2019 IMS: No

**Program Name:** EL CENTRO DE LIBERTAD/THE FREEDOM CENTER, INC.  
**Legal Name:** EL CENTRO DE LIBERTAD/THE FREEDOM CENTER, INC.  
**Address:** 225 SOUTH CABRILLO HIGHWAY, BUILDING D, SUITE # 105  
**City, State Zip:** HALF MOON BAY, CA 94019  
**Phone:** (650) 560-9995 Fax: (650) 599-9273  
**Record ID:** 410026DN  
**Service Type:** NON  
**Target Population:** 1.1  
**Expiration Date:** 1/31/2019 IMS: No

**Program Name:** WALKER HOUSE/ WILLIAMS HOUSE I AND II  
**Legal Name:** FREE AT LAST: COMMUNITY RECOVERY AND REHABILITATION SERVICES  
**Address:** 1085-A, 1085-B AND 1095 WEEKS STREET  
**City, State Zip:** EAST PALO ALTO, CA 94303  
**Phone:** (650) 462-6999 Fax: (650) 462-1055  
**Record ID:** 410027AN  
**Service Type:** RES  
**Resident Capacity:** 18  
**Total Occupancy:** 18  
**Target Population:** 1.2  
**Expiration Date:** 8/31/2019 IMS: No

**Program Name:** MALAIKA HOUSE  
Legal Name: FREE AT LAST: COMMUNITY RECOVERY AND REHABILITATION SERVICES  
Address: 819 & 823 JAMIE LANE  
City, State Zip: EAST PALO ALTO, CA 94303  
Phone: (650) 462-6999 Fax: (650) 462-1055  
**Record ID:** 410027BN  
Service Type: RES  
Resident Capacity: 10  
Total Occupancy: 14  
Target Population: 1.4  
Expiration Date: 8/31/2019 IMS: No

**Program Name:** FREE AT LAST  
Legal Name: FREE AT LAST: COMMUNITY RECOVERY AND REHABILITATION SERVICES  
Address: 1796 BAY ROAD  
City, State Zip: EAST PALO ALTO, CA 94303  
Phone: (650) 462-6999 Fax: (650) 462-1055  
**Record ID:** 410027IN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 4/30/2019 IMS: No

**Program Name:** ARCHWAY  
Legal Name: STARVISTA  
Address: 609 PRICE AVENUE, ROOMS 107, 201, 205, AND 206  
City, State Zip: REDWOOD CITY, CA 94063  
Phone: (650) 366-8433 Fax: (650) 366-8455  
**Record ID:** 410038AN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 1/31/2018 IMS: No

**Program Name:** INSIGHTS  
Legal Name: STARVISTA  
Address: 333 GELLERT BOULEVARD #206  
City, State Zip: DALY CITY, CA 94015  
Phone: (650) 755-0858 Fax: (650) 755-1754  
**Record ID:** 410038BN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 1/31/2018 IMS: No

**Program Name:** FIRST CHANCE SOUTH  
Legal Name: STARVISTA  
Address: 826 MAHLER ROAD  
City, State Zip: BURLINGAME, CA 94010  
Phone: (650) 595-8165 Fax: (650) 595-8167  
**Record ID:** 410038DN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 1/31/2018 IMS: No

**Program Name:** WOMEN'S ENRICHMENT CENTER  
Legal Name: STARVISTA  
Address: 335 QUARRY ROAD  
City, State Zip: SAN CARLOS, CA 94070  
Phone: (650) 591-3636 Fax: (650) 591-3600  
**Record ID:** 410038EN  
Service Type: NON  
Target Population: 1.3  
Expiration Date: 1/31/2018 IMS: No



**Program Name:** JERICHO PROJECT  
Legal Name: JERICHO PROJECT  
Address: 163 AND 193 DEL PRADO DRIVE  
City, State Zip: DALY CITY, CA 94015  
Phone: (650) 994-9832 Fax: (415) 467-7450  
**Record ID:** 410041BN  
Service Type: RES  
Resident Capacity: 24  
Total Occupancy: 24  
Target Population: 1.2  
Expiration Date: 3/31/2019 IMS: No

**Program Name:** JERICHO PROJECT  
Legal Name: JERICHO PROJECT  
Address: 470 VALLEY DRIVE  
City, State Zip: BRISBANE, CA 94005  
Phone: (415) 656-1700 Fax: (415) 715-0174  
**Record ID:** 410041DN  
Service Type: NON  
Target Population: 1.2  
Expiration Date: 10/31/2018 IMS: No

**Program Name:** OUTPATIENT DRUG AND ALCOHOL SERVICES FOR ASIANS (ODASA)  
Legal Name: HEALTHRIGHT 360  
Address: 6181 MISSION STREET  
City, State Zip: DALY CITY, CA 94014  
Phone: (415) 337-0140  
**Record ID:** 410043AN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 11/30/2018 IMS: No

**Program Name:** HEALTHRIGHT 360 - AARS YOUTH SERVICES OF SAN MATEO  
Legal Name: HEALTHRIGHT 360  
Address: 1115 MISSION ROAD  
City, State Zip: SOUTH SAN FRANCISCO, CA 94080  
Phone: (650) 243-4850 Fax: (650) 243-4851  
**Record ID:** 410043BN  
Service Type: NON  
Target Population: 1.5  
Expiration Date: 5/31/2018 IMS: No

**Program Name:** WRA, HILLSIDE HOUSE ONE  
Legal Name: HEALTHRIGHT 360  
Address: 27 NORTH HUMBOLDT STREET, UNIT A & UNIT B  
City, State Zip: SAN MATEO, CA 94401  
Phone: (415) 762-1559  
**Record ID:** 410043DN  
Service Type: RES  
Resident Capacity: 5  
Total Occupancy: 11  
Target Population: 1.4  
Expiration Date: 9/30/2017 IMS: No

**Program Name:** WRA, THE ELMS  
Legal Name: HEALTHRIGHT 360  
Address: 202 EAST BELLEVUE AVENUE  
City, State Zip: SAN MATEO, CA 94401  
Phone: (650) 348-6603  
**Record ID:** 410043EN  
Service Type: RES  
Resident Capacity: 15  
Total Occupancy: 16  
Target Population: 1.3  
Expiration Date: 2/28/2018 IMS: No

**Program Name:** WRA, LAUREL HOUSE  
Legal Name: HEALTHRIGHT 360  
Address: 900 LAUREL AVENUE  
City, State Zip: SAN MATEO, CA 94401  
Phone: (650) 347-8808  
**Record ID:** 410043FN  
Service Type: RES  
Resident Capacity: 12  
Total Occupancy: 13  
Target Population: 1.3  
Expiration Date: 2/28/2018 IMS: No

**Program Name:** HEALTHRIGHT 360  
Legal Name: HEALTHRIGHT 360  
Address: 2015 PIONEER COURT, SUITE B  
City, State Zip: SAN MATEO, CA 94403  
Phone: (415) 762-3700  
**Record ID:** 410043GN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 7/31/2018 IMS: No

State of California, Department of Health Care Services  
Licensed Residential Facilities and/or  
Certified Alcohol and Drug Programs

As of 9/1/2017

Santa Barbara County

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**Program Name:** RECOVERY POINT ACUTE CARE  
Legal Name: GOOD SAMARITAN SHELTER  
Address: 401 'B' W. MORRISON AVENUE  
City, State Zip: SANTA MARIA, CA 93458  
Phone: (805) 347-3338  
**Record ID:** 420010BN  
Service Type: RES-DETOX  
Resident Capacity: 12  
Total Occupancy: 12  
Target Population: 1.1  
Expiration Date: 10/31/2018 IMS: No

**Program Name:** ANOTHER ROAD DETOX PROGRAM  
Legal Name: GOOD SAMARITAN SHELTER  
Address: 113 SOUTH M STREET  
City, State Zip: LOMPOC, CA 93436  
Phone: (805) 736-0357 Ext:207 Fax: (805) 346-8656  
**Record ID:** 420010DN  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 10/31/2018 IMS: No

**Program Name:** TURNING POINT  
Legal Name: GOOD SAMARITAN SHELTER  
Address: 604 WEST OCEAN AVENUE  
City, State Zip: LOMPOC, CA 93436  
Phone: (805) 736-0357 Fax: (805) 737-0389  
**Record ID:** 420010EN  
Service Type: NON  
Target Population: 1.3  
Expiration Date: 11/30/2018 IMS: No

**Program Name:** RECOVERY POINT OUTPATIENT PROGRAM  
Legal Name: GOOD SAMARITAN SHELTER  
Address: 245 E. INGER DRIVE, SUITE 103B  
City, State Zip: SANTA MARIA, CA 93454  
Phone: (805) 346-8185 Fax: (805) 346-8656  
**Record ID:** 420010FN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 11/30/2018 IMS: No

**Program Name:** CASA DE FAMILIA TREATMENT CENTER  
Legal Name: GOOD SAMARITAN SHELTER  
Address: 403 'B' WEST MORRISON  
City, State Zip: SANTA MARIA, CA 93454  
Phone: (805) 354-0815  
**Record ID:** 420010GN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 5/31/2018 IMS: No

**Program Name:** LOMPOC RECOVERY CENTER  
Legal Name: GOOD SAMARITAN SHELTER  
Address: 104 SOUTH C STREET, SUITE A  
City, State Zip: LOMPOC, CA 93436  
Phone: (805) 332-3647  
**Record ID:** 420010HN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 9/30/2018 IMS: No

**Program Name:** SANTA BARBARA RESCUE MISSION - RECOVERY PROGRAM  
Legal Name: SANTA BARBARA RESCUE MISSION  
Address: 535 EAST YANONALI STREET, A  
City, State Zip: SANTA BARBARA, CA 93103  
Phone: (805) 966-1316 Fax: (805) 966-7495  
**Record ID:** 420016AN  
Service Type: RES  
Resident Capacity: 45  
Total Occupancy: 45  
Target Population: 1.2  
Expiration Date: 2/28/2019 IMS: No

**Program Name:** BETHEL HOUSE  
Legal Name: SANTA BARBARA RESCUE MISSION  
Address: 24 WEST ARRELLEGA STREET  
City, State Zip: SANTA BARBARA, CA 93101  
Phone: (805) 966-1316 Fax: (805) 879-8229  
**Record ID:** 420016BN  
Service Type: RES  
Resident Capacity: 24  
Total Occupancy: 25  
Target Population: 1.1  
Expiration Date: 2/28/2019 IMS: No

**Program Name:** RECOVERY SANTA BARBARA OUTPATIENT SERVICES  
Legal Name: SANTA BARBARA RESCUE MISSION  
Address: 535 EAST YANONALI STREET, B  
City, State Zip: SANTA BARBARA, CA 93103  
Phone: (805) 966-1316 Fax: (805) 966-7495  
**Record ID:** 420016CN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 3/31/2018 IMS: No

**Program Name:** COTTAGE RESIDENTIAL CENTER  
Legal Name: SANTA BARBARA COTTAGE HOSPITAL  
Address: 316 MONTECITO STREET  
City, State Zip: SANTA BARBARA, CA 93101  
Phone: (805) 569-7815 Fax: (805) 965-6242  
**Record ID:** 420017AN  
Service Type: RES  
Resident Capacity: 24  
Total Occupancy: 24  
Target Population: 1.1  
Expiration Date: 6/30/2019 IMS: No

**Program Name:** PROJECT RECOVERY - ADULT OUTPATIENT TREATMENT PROGRAM  
Legal Name: COUNCIL ON ALCOHOLISM AND DRUG ABUSE  
Address: 133 EAST HALEY STREET  
City, State Zip: SANTA BARBARA, CA 93101  
Phone: (805) 564-6057 Fax: (805) 963-8849  
**Record ID:** 420022AN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 5/31/2019 IMS: No

**Program Name:** DANIEL BRYANT YOUTH AND FAMILY TREATMENT CENTER  
Legal Name: COUNCIL ON ALCOHOLISM AND DRUG ABUSE  
Address: 1111 GARDEN STREET  
City, State Zip: SANTA BARBARA, CA 93101  
Phone: (805) 730-7575 Fax: (805) 730-7503  
**Record ID:** 420022BN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 5/31/2019 IMS: No

**Program Name:** PC1000  
Legal Name: COUNCIL ON ALCOHOLISM AND DRUG ABUSE  
Address: 232 EAST CANON PERDIDO STREET  
City, State Zip: SANTA BARBARA, CA 93101  
Phone: (805) 963-1433 Fax: (805) 963-4099  
**Record ID:** 420022DN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 5/31/2019 IMS: No

**Program Name:** PROJECT RECOVERY RESIDENTIAL DETOX PROGRAM  
Legal Name: COUNCIL ON ALCOHOLISM AND DRUG ABUSE  
Address: 1020 PLACIDO AVENUE  
City, State Zip: SANTA BARBARA, CA 93103  
Phone: (805) 963-1836 Fax: (805) 963-8849  
**Record ID:** 420022EN  
Service Type: RES-DETOX  
Resident Capacity: 12  
Total Occupancy: 12  
Target Population: 1.1  
Expiration Date: 12/31/2017 IMS: No

**Program Name:** CASA SERENA RESIDENTIAL RECOVERY PROGRAM  
Legal Name: CASA SERENA  
Address: 1515 BATH STREET  
City, State Zip: SANTA BARBARA, CA 93101  
Phone: (805) 564-8701 Fax: (805) 966-6695  
**Record ID:** 420024AN  
Service Type: RES  
Resident Capacity: 18  
Total Occupancy: 18  
Target Population: 1.3  
Expiration Date: 6/30/2019 IMS: No

**Program Name:** CASA SERENA RESIDENTIAL RECOVERY PROGRAM  
Legal Name: CASA SERENA  
Address: 147 OLIVER ROAD  
City, State Zip: SANTA BARBARA, CA 93108  
Phone: (805) 965-1625 Fax: (805) 966-6695  
**Record ID:** 420024CN  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 16  
Target Population: 1.4  
Expiration Date: 6/30/2019 IMS: No

**Program Name:** SANCTUARY CENTERS OF SANTA BARBARA, INC.  
Legal Name: SANCTUARY CENTERS OF SANTA BARBARA, INC.  
Address: 222 WEST VALERIO, REAR BUILDING  
City, State Zip: SANTA BARBARA, CA 93101  
Phone: (805) 569-2785 Fax: (805) 563-1977  
**Record ID:** 420026AN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 5/31/2019 IMS: No

**Program Name:** COAST VALLEY SUBSTANCE ABUSE TREATMENT CENTER  
Legal Name: COAST VALLEY WORSHIP CENTER  
Address: 1414 S. MILLER STREET, SUITE 11  
City, State Zip: SANTA MARIA, CA 93454  
Phone: (805) 739-1512 Fax: (805) 739-2855  
**Record ID:** 420030AN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 3/31/2019 IMS: No

**Program Name:** RECOVERY ROAD MEDICAL CENTER  
Legal Name: RECOVERY ROAD MEDICAL CENTER, INC.  
Address: 3891 STATE STREET, SUITE 205  
City, State Zip: SANTA BARBARA, CA 93105  
Phone: (805) 962-7800 Fax: (805) 962-9002  
**Record ID:** 420034AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 11/30/2018 IMS: No

**Program Name:** THE TIDES SANTA BARBARA  
Legal Name: THE TIDES SANTA BARBARA, LLC  
Address: 5277 AUSTIN ROAD  
City, State Zip: SANTA BARBARA, CA 93111  
Phone: (805) 203-6211 Fax: (888) 552-0299  
**Record ID:** 420035AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 10/31/2017 IMS: No

**Program Name:** THE OAKS - A RESIDENTIAL TREATMENT PROGRAM AT THE CHAMPION CENTER  
Legal Name: LOMPOC VALLEY MEDICAL CENTER  
Address: 303 SOUTH C STREET  
City, State Zip: LOMPOC, CA 93436  
Phone: (805) 737-3321 Fax: (805) 737-3304  
**Record ID:** 420036AP  
Service Type: RES  
Resident Capacity: 16  
Total Occupancy: 16  
Target Population: 1.1  
Expiration Date: 3/31/2019 IMS: No

**Program Name:** CHANGES  
Legal Name: AMERICAN RIVIERA LLC  
Address: 403 EAST MONTECITO STREET, SUITE A  
City, State Zip: SANTA BARBARA, CA 93101  
Phone: (805) 883-1155 Fax: (805) 883-1188  
**Record ID:** 420037AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 9/30/2017 IMS: No

**Program Name:** LADIES RECOVERY 4 LIFE RESIDENTIAL TREATMENT FACILITY  
Legal Name: LADIES RECOVERY 4 LIFE  
Address: 115 NORTH D STREET,  
UNIT A  
City, State Zip: LOMPOC, CA 93436-6911  
Phone: (805) 588-4410 Fax: (805) 819-0942  
**Record ID:** 420038AN  
Service Type: RES  
Resident Capacity: 14  
Total Occupancy: 14  
Target Population: 1.3  
Expiration Date: 2/28/2019 IMS: No

**Program Name:** KEYSTONE RECOVERY  
Legal Name: KEYSTONE RECOVERY NETWORK, LLC  
Address: 475 BARKER PASS ROAD  
UNITS A & B  
City, State Zip: MONTECITO, CA 93108  
Phone: (805) 363-5576  
**Record ID:** 420039AP  
Service Type: RES-DETOX  
Resident Capacity: 12  
Total Occupancy: 12  
Target Population: 1.8  
Expiration Date: 12/31/2018 IMS: No

**Program Name:** IRECOVER BEHAVIORAL HEALTH CLINICS  
Legal Name: IRECOVER BEHAVIORAL HEALTH CLINICS, LLC  
Address: 607 E. PLAZA DRIVE, C-102, C-201, C-202  
City, State Zip: SANTA MARIA, CA 93455  
Phone: (805) 631-5268  
**Record ID:** 420040AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 1/31/2019 IMS: No

State of California, Department of Health Care Services  
Licensed Residential Facilities and/or  
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As of 9/1/2017

Santa Clara County

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**Program Name:** LYRIC RECOVERY SERVICES, INC.  
**Legal Name:** LYRIC RECOVERY SERVICES, INC.  
**Address:** 1210 SOUTH BASCOM AVENUE, SUITE 205  
**City, State Zip:** SAN JOSE, CA 95128  
**Phone:** (408) 216-9826 **Fax:** (408) 982-3272  
**Record ID:** 430013AP  
**Service Type:** NON  
**Target Population:** 1.1  
**Expiration Date:** 12/31/2017 **IMS:** No

**Program Name:** PATHWAY HOUSE  
**Legal Name:** PATHWAY SOCIETY  
**Address:** 102 SOUTH 11TH STREET  
**City, State Zip:** SAN JOSE, CA 95112  
**Phone:** (408) 998-5191 **Fax:** (408) 506-1194  
**Record ID:** 430016AN  
**Service Type:** RES  
**Resident Capacity:** 65  
**Total Occupancy:** 65  
**Target Population:** 1.1  
**Expiration Date:** 12/31/2017 **IMS:** No

**Program Name:** PATHWAY OUTPATIENT CENTER  
**Legal Name:** PATHWAY SOCIETY  
**Address:** 1659 SCOTT BOULEVARD, SUITE 9, 220, AND 270  
**City, State Zip:** SANTA CLARA, CA 95050  
**Phone:** (408) 244-1834 **Fax:** (408) 244-5123  
**Record ID:** 430016BN  
**Service Type:** NON  
**Target Population:** 1.1  
**Expiration Date:** 5/31/2019 **IMS:** No

**Program Name:** PATHWAY SOCIETY  
**Legal Name:** PATHWAY SOCIETY  
**Address:** 16433 MONTEREY STREET, SUITE 140  
**City, State Zip:** MORGAN HILL, CA 95037  
**Phone:** (408) 782-6300 **Fax:** (408) 782-6363  
**Record ID:** 430016DN  
**Service Type:** NON  
**Target Population:** 1.1  
**Expiration Date:** 3/31/2018 **IMS:** No

**Program Name:** MARIPOSA LODGE  
**Legal Name:** PATHWAY SOCIETY  
**Address:** 9500 MALECH ROAD  
**City, State Zip:** SAN JOSE, CA 95151  
**Phone:** (408) 281-6542 **Fax:** (408) 463-0794  
**Record ID:** 430016FN  
**Service Type:** RES  
**Resident Capacity:** 64  
**Total Occupancy:** 64  
**Target Population:** 1.3  
**Expiration Date:** 9/30/2017 **IMS:** No



**Program Name:** HORIZON SOUTH  
Legal Name: HORIZON SERVICES, INCORPORATED  
Address: 650 SOUTH BASCOM AVENUE  
City, State Zip: SAN JOSE, CA 95128  
Phone: (408) 295-6675 Fax: (408) 295-8544  
**Record ID:** 430021AN  
Service Type: RES-DETOX  
Resident Capacity: 41  
Total Occupancy: 41  
Target Population: 1.2  
Expiration Date: 8/31/2018 IMS: No

**Program Name:** SUPPORT SYSTEMS HOMES, INC.  
Legal Name: SUPPORT SYSTEMS HOMES, INC.  
Address: 173 NORTH MORRISON AVENUE  
City, State Zip: SAN JOSE, CA 95126  
Phone: (408) 370-9688 Fax: (408) 370-3487  
**Record ID:** 430027GP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 5/31/2019 IMS: No

**Program Name:** SUPPORT SYSTEMS HOMES, INC.  
Legal Name: SUPPORT SYSTEMS HOMES, INC.  
Address: 264 NORTH MORRISON AVENUE  
City, State Zip: SAN JOSE, CA 95126  
Phone: (408) 370-9688 Fax: (408) 370-3487  
**Record ID:** 430027HP  
Service Type: RES  
Resident Capacity: 32  
Total Occupancy: 32  
Target Population: 1.1  
Expiration Date: 1/31/2019 IMS: No

**Program Name:** SUPPORT SYSTEMS HOMES, INC./ CADS, INC.  
Legal Name: SUPPORT SYSTEMS HOMES, INC.  
Address: 398 S. 12TH STREET  
City, State Zip: SAN JOSE, CA 95112  
Phone: (408) 370-9688 Fax: (408) 370-3487  
**Record ID:** 430027IP  
Service Type: RES  
Resident Capacity: 22  
Total Occupancy: 22  
Target Population: 1.2  
Expiration Date: 8/31/2017 IMS: No

**Program Name:** SUPPORT SYSTEMS HOMES, INC./ CADS, INC.  
Legal Name: SUPPORT SYSTEMS HOMES, INC.  
Address: 1271 & 1281 FLEMING AVENUE  
City, State Zip: SAN JOSE, CA 95127  
Phone: (408) 370-9688 Fax: (408) 370-3487  
**Record ID:** 430027JP  
Service Type: RES  
Resident Capacity: 27  
Total Occupancy: 27  
Target Population: 1.1  
Expiration Date: 10/31/2017 IMS: No

**Program Name:** THE CAMP - OUTPATIENT SERVICES  
Legal Name: THE CAMP RECOVERY CENTER, LLC  
Address: 256 EAST HAMILTON AVENUE, SUITE I  
City, State Zip: CAMPBELL, CA 95008  
Phone: (408) 866-8167  
**Record ID:** 430034AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 9/30/2017 IMS: No

**Program Name:** SUMMIT RANCH  
Legal Name: ADVENT GROUP MINISTRIES, INC.  
Address: 1200 WEST EDMUNDSON AVENUE  
City, State Zip: MORGAN HILL, CA 95037  
Phone: (408) 779-1492 Fax: (408) 604-0162  
**Record ID:** 430038CN  
Service Type: DSS  
Target Population: 1.5  
Expiration Date: 11/30/2018 IMS: No

**Program Name:** LAUREL HOME  
Legal Name: ADVENT GROUP MINISTRIES, INC.  
Address: 865 BLACK WALNUT COURT  
City, State Zip: MORGAN HILL, CA 95037  
Phone: (408) 779-5841 Fax: (408) 604-0162  
**Record ID:** 430038DN  
Service Type: DSS  
Target Population: 1.5  
Expiration Date: 11/30/2018 IMS: No

**Program Name:** GATEWAY HOME  
Legal Name: ADVENT GROUP MINISTRIES, INC.  
Address: 1960 CHURCH AVENUE  
City, State Zip: SAN MARTIN, CA 95046  
Phone: (408) 683-2099 Fax: (425) 686-0776  
**Record ID:** 430038EN  
Service Type: DSS  
Target Population: 1.1  
Expiration Date: 11/30/2018 IMS: No

**Program Name:** AMICUS HOUSE, INC.  
Legal Name: AMICUS HOUSE, INC.  
Address: 466 SOUTH BUENA VISTA AVENUE  
City, State Zip: SAN JOSE, CA 95126  
Phone: (408) 294-2277  
**Record ID:** 430041AP  
Service Type: RES  
Resident Capacity: 14  
Total Occupancy: 14  
Target Population: 1.1  
Expiration Date: 8/31/2018 IMS: No

**Program Name:** ASIAN AMERICANS FOR COMMUNITY INVOLVEMENT  
Legal Name: THE ASIAN AMERICANS FOR COMMUNITY INVOLVEMENT OF SANTA CLARA COUNTY, INC.  
Address: 2400 MOORPARK AVENUE, SUITES 210 AND300  
City, State Zip: SAN JOSE, CA 95128  
Phone: (408) 975-2730 Fax: (408) 975-2745  
**Record ID:** 430042AN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 1/31/2019 IMS: No

**Program Name:** CALWORKS DUAL DIAGNOSIS PROGRAM  
Legal Name: THE GARDNER FAMILY CARE CORPORATION  
Address: 160 EAST VIRGINIA STREET, SUITE 280  
City, State Zip: SAN JOSE, CA 95112  
Phone: (408) 287-6200 Fax: (408) 998-1535  
**Record ID:** 430045AN  
Service Type: NON  
Target Population: 1.8  
Expiration Date: 5/31/2019 IMS: No

**Program Name:** PROYECTO PRIMAVERA ADULT OUTPATIENT PROGRAM  
Legal Name: THE GARDNER FAMILY CARE CORPORATION  
Address: 614 TULLY ROAD  
City, State Zip: SAN JOSE, CA 95111  
Phone: (408) 287-6200 Ext:2190 Fax: (408) 977-1136  
**Record ID:** 430045BN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 5/31/2019 IMS: No

**Program Name:** INDIAN HEALTH CENTER OF SANTA CLARA VALLEY-OUTPATIENT  
ALCOHOL & OTHER DRUG PROGR  
Legal Name: INDIAN HEALTH CENTER OF SANTA CLARA VALLEY  
Address: 602 EAST SANTA CLARA STREET, SUITE 230  
City, State Zip: SAN JOSE, CA 95112  
Phone: (408) 350-2400 Fax: (408) 350-2411  
**Record ID:** 430047CN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 11/30/2018 IMS: No

**Program Name:** NEW LIFE RECOVERY CENTERS  
Legal Name: NEW LIFE RECOVERY CENTERS, INC.  
Address: 473 NORTH SAN PEDRO  
City, State Zip: SAN JOSE, CA 95110-2229  
Phone: (408) 297-1182 Fax: (408) 297-7450  
**Record ID:** 430053AP  
Service Type: RES-DETOX  
Resident Capacity: 18  
Total Occupancy: 18  
Target Population: 1.1  
Expiration Date: 4/30/2018 IMS: No

**Program Name:** NEW LIFE RECOVERY CENTERS, INC.  
Legal Name: NEW LIFE RECOVERY CENTERS, INC.  
Address: 1101 PARK AVENUE  
City, State Zip: SAN JOSE, CA 95126  
Phone: (408) 271-0199 Fax: (408) 297-7450  
**Record ID:** 430053BP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 5/31/2019 IMS: No

**Program Name:** NEW LIFE RECOVERY CENTERS, INC.  
Legal Name: NEW LIFE RECOVERY CENTERS, INC.  
Address: 166 CLAYTON AVENUE  
City, State Zip: SAN JOSE, CA 95110-2210  
Phone: (408) 975-0454 Fax: (408) 230-0395  
**Record ID:** 430053CP  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 8  
Target Population: 1.1  
Expiration Date: 1/31/2018 IMS: No

**Program Name:** HOUSE OF DAWN  
Legal Name: OPERATION DAWN  
Address: 5034 PAGE MILL DRIVE  
City, State Zip: SAN JOSE, CA 95111-4055  
Phone: (408) 362-0121  
**Record ID:** 430059AN  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 8  
Target Population: 1.2  
Expiration Date: 11/30/2018 IMS: No

**Program Name:** POSITIVE PROGRESSIONS RESIDENTIAL TREATMENT CENTERS, INC.  
Legal Name: POSITIVE PROGRESSIONS RESIDENTIAL TREATMENT CENTERS, INC  
Address: 1721 LOLLIE COURT  
City, State Zip: SAN JOSE, CA 95124  
Phone: (408) 476-4888  
**Record ID:** 430065AN  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 8/31/2019 IMS: No

**Program Name:** ADI-OUTPATIENT  
Legal Name: ADI- OP, INC.  
Address: 1900 CAMDEN AVENUE, SUITE 202 AND 205  
City, State Zip: SAN JOSE, CA 95124  
Phone: (408) 879-7581 Fax: (408) 879-7587  
**Record ID:** 430068AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 5/31/2018 IMS: No

**Program Name:** EMQ FAMILIESFIRST OUTPATIENT ADOLESCENT SUBSTANCE ABUSE  
Legal Name: FAMILIESFIRST, INC.  
Address: 251 LLEWELLYN AVENUE  
City, State Zip: CAMPBELL, CA 95008  
Phone: (408) 379-3796  
**Record ID:** 430070AN  
Service Type: NON  
Target Population: 1.5  
Expiration Date: 11/30/2017 IMS: No

**Program Name:** PARISI HOUSE ON THE HILL, INC.  
Legal Name: PARISI HOUSE ON THE HILL, INC.  
Address: 9505 MALECH ROAD  
City, State Zip: SAN JOSE, CA 95138  
Phone: (408) 281-6570 Fax: (408) 463-1116  
**Record ID:** 430071AN  
Service Type: RES  
Resident Capacity: 20  
Total Occupancy: 42  
Target Population: 1.3  
Expiration Date: 5/31/2019 IMS: No

**Program Name:** LIONROCK RECOVERY  
Legal Name: LIONROCK BEHAVIORAL HEALTH, INC.  
Address: 621 E CAMPBELL AVENUE #17  
City, State Zip: CAMPBELL, CA 95008  
Phone: (760) 994-4990 Fax: (866) 899-8670  
**Record ID:** 430074AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 8/31/2017 IMS: No

**Program Name:** GREENDALE HOUSE  
Legal Name: GREENDALE HOUSE LLC  
Address: 401 GREENDALE WAY  
City, State Zip: SAN JOSE, CA 95129  
Phone: (408) 455-2944 Fax: (408) 248-0972  
**Record ID:** 430076AP  
Service Type: RES  
Resident Capacity: 14  
Total Occupancy: 16  
Target Population: 1.2  
Expiration Date: 3/31/2018 IMS: No

**Program Name:** SUMMIT ESTATE RECOVERY CENTER  
Legal Name: SUMMIT ESTATE, INC.  
Address: 399 OLD MILL POND ROAD  
City, State Zip: LOS GATOS, CA 95033  
Phone: (650) 733-4711 Fax: (877) 230-5007  
**Record ID:** 430077AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 10/31/2017 IMS: No

**Program Name:** SUMMIT ESTATE OUTPATIENT  
Legal Name: SUMMIT ESTATE, INC.  
Address: 20640 3RD STREET  
City, State Zip: SARATOGA, CA 95070  
Phone: (408) 469-4734 Fax: (408) 469-4734  
**Record ID:** 430077BP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 2/28/2018 IMS: No

**Program Name:** CENTRAL TREATMENT & RECOVERY  
Legal Name: SANTA CLARA COUNTY, DEPARTMENT OF ALCOHOL AND DRUG SERVICES  
Address: 976 LENZEN AVENUE, 1ST FLOOR, SUITE 1900  
City, State Zip: SAN JOSE, CA 95126-2737  
Phone: (408) 792-5656 Fax: (408) 947-8719  
**Record ID:** 430078AN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 9/30/2018 IMS: No

**Program Name:** ASIAN AMERICAN RECOVERY SERVICES, A HEALTHRIGHT 360 PROGRAM  
Legal Name: HEALTHRIGHT 360  
Address: 1340 TULLY ROAD, SUITE 301 & 304  
City, State Zip: SAN JOSE, CA 95122-3056  
Phone: (408) 271-3900 Fax: (415) 865-0119  
**Record ID:** 430079AN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 9/30/2018 IMS: No

**Program Name:** GENESIS PROJECT  
Legal Name: TRUTH RECOVERY FOUNDATION, INC.  
Address: 810 PALM STREET  
City, State Zip: SAN JOSE, CA 95110  
Phone: (408) 500-6229  
**Record ID:** 430080AN  
Service Type: RES  
Resident Capacity: 16  
Total Occupancy: 16  
Target Population: 1.2  
Expiration Date: 4/30/2019 IMS: No

**Program Name:** BILL WILSON HOUSE  
Legal Name: BILL WILSON CENTER  
Address: 3490 THE ALAMEDA  
City, State Zip: SANTA CLARA, CA 95050-4333  
Phone: (408) 243-0222 Fax: (408) 246-5752  
**Record ID:** 430082AN  
Service Type: DSS  
Target Population: 1.5  
Expiration Date: 2/28/2018 IMS: No

**Program Name:** LOS GATOS DRUG AND ALCOHOL RECOVERY CENTER  
Legal Name: LOS GATOS MEDICAL CENTER, INC.  
Address: 16400 LARK AVENUE  
SUITE 350  
City, State Zip: LOS GATOS, CA 95032  
Phone: (408) 384-9717 Fax: (408) 358-2810  
**Record ID:** 430083AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 8/31/2018 IMS: No

**Program Name:** LOS GATOS DRUG AND ALCOHOL RECOVERY CENTER  
Legal Name: LOS GATOS MEDICAL CENTER, INC.  
Address: 16421 GREENWOOD LANE  
City, State Zip: MONTE SERENO, CA 95030  
Phone: (408) 384-9717 Fax: (408) 358-2810  
**Record ID:** 430083BP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 10/31/2018 IMS: No

**Program Name:** WELLNESS RETREAT RECOVERY CENTER  
Legal Name: WELLNESS RECOVERY RETREAT CENTER  
Address: 495 PIERCY ROAD  
City, State Zip: SAN JOSE, CA 95138  
Phone: (855) 762-3797  
**Record ID:** 430084AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 9/30/2018 IMS: No

**Program Name:** FUSION RECOVERY, INC.  
Legal Name: FUSION RECOVERY, INC.  
Address: 940 SARATOGA AVENUE,  
SUITE 240  
City, State Zip: SAN JOSE, CA 95129  
Phone: (408) 474-4840 Fax: (408) 260-5003  
**Record ID:** 430085AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 10/31/2018 IMS: No

**Program Name:** RED ROAD RECOVERY  
Legal Name: RED ROAD TREATMENT, INC.  
Address: 421 N. 13TH STREET  
City, State Zip: SAN JOSE, CA 95112  
Phone: (650) 703-9185  
**Record ID:** 430086AN  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 8  
Target Population: 1.1  
Expiration Date: 10/31/2018 IMS: No

**Program Name:** SERENITY GARDENS  
Legal Name: SERENITY GARDENS  
Address: 5830 COHASSET WAY  
City, State Zip: SAN JOSE, CA 95123  
Phone: (408) 219-4681  
**Record ID:** 430087AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 1/31/2019 IMS: No

**Program Name:** FAMILY AND CHILDREN SERVICES, A DIVISION OF CAMINAR  
Legal Name: CAMINAR  
Address: 2218 and 2226 N. 1ST STREET  
City, State Zip: SAN JOSE, CA 95131  
Phone: (408) 538-0880 Fax: (408) 943-8155  
**Record ID:** 430088BN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 5/31/2019 IMS: No

**Program Name:** FAMILY AND CHILDREN SERVICES, A DIVISION OF CAMINAR  
Legal Name: CAMINAR  
Address: 375 CAMBRIDGE AVE.  
City, State Zip: PALO ALTO, CA 94306  
Phone: (650) 326-6576 Fax: (650) 326-1340  
**Record ID:** 430088CN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 5/31/2019 IMS: No

**Program Name:** FAMILY AND CHILDREN SERVICES, A DIVISION OF CAMINAR  
Legal Name: CAMINAR  
Address: 950 W. JULIAN STREET  
City, State Zip: SAN JOSE, CA 95126  
Phone: (408) 292-9353 Fax: (408) 288-6201  
**Record ID:** 430088DN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 5/31/2019 IMS: No

State of California, Department of Health Care Services  
Licensed Residential Facilities and/or  
Certified Alcohol and Drug Programs

As of 9/1/2017

Santa Cruz County

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**Program Name:** ALTO COUNSELING CENTER-SOUTH  
**Legal Name:** ENCOMPASS COMMUNITY SERVICES  
**Address:** 585 AUTO CENTER DRIVE  
**City, State Zip:** WATSONVILLE, CA 95076  
**Phone:** (831) 728-2233 **Fax:** (831) 722-8311  
**Record ID:** 440001EN  
**Service Type:** NON  
**Target Population:** 1.1  
**Expiration Date:** 12/31/2018 **IMS:** No

**Program Name:** OUT-PATIENT CLIENT SERVICES  
**Legal Name:** JANUS OF SANTA CRUZ  
**Address:** 200 7TH AVENUE, SUITE 150  
**City, State Zip:** SANTA CRUZ, CA 95062  
**Phone:** (831) 462-1060 **Fax:** (831) 423-9015  
**Record ID:** 440003AN  
**Service Type:** NON  
**Target Population:** 1.1  
**Expiration Date:** 8/31/2018 **IMS:** No

**Program Name:** RESIDENTIAL TREATMENT CENTER & SPECIAL CARE UNIT  
**Legal Name:** JANUS OF SANTA CRUZ  
**Address:** 200 SEVENTH AVENUE  
**City, State Zip:** SANTA CRUZ, CA 95062  
**Phone:** (831) 462-1060  
**Record ID:** 440003BN  
**Service Type:** RES-DETOX  
**Resident Capacity:** 24  
**Total Occupancy:** 24  
**Target Population:** 1.1  
**Expiration Date:** 8/31/2018 **IMS:** No

**Program Name:** MONDANARO-BASKIN CENTER FOR WOMEN & CHILDREN  
**Legal Name:** JANUS OF SANTA CRUZ  
**Address:** 516 CHESTNUT STREET  
**City, State Zip:** SANTA CRUZ, CA 95060  
**Phone:** (831) 423-9015  
**Record ID:** 440003DN  
**Service Type:** RES  
**Resident Capacity:** 10  
**Total Occupancy:** 24  
**Target Population:** 1.4  
**Expiration Date:** 8/31/2018 **IMS:** No

**Program Name:** SANTA CRUZ RESIDENTIAL RECOVERY  
**Legal Name:** ENCOMPASS COMMUNITY SERVICES  
**Address:** 125 RIGG STREET  
**City, State Zip:** SANTA CRUZ, CA 95060  
**Phone:** (831) 423-3890  
**Record ID:** 440008AN  
**Service Type:** RES  
**Resident Capacity:** 30  
**Total Occupancy:** 30  
**Target Population:** 1.1  
**Expiration Date:** 6/30/2018 **IMS:** No



**Program Name:** ALTO COUNSELING CENTER - NORTH  
Legal Name: ENCOMPASS COMMUNITY SERVICES  
Address: 716 OCEAN STREET, SUITES 170, 200, 230  
City, State Zip: SANTA CRUZ, CA 95060-2126  
Phone: (831) 423-2003  
**Record ID:** 440008HN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 4/30/2018 IMS: No

**Program Name:** SI SE PUEDE  
Legal Name: ENCOMPASS COMMUNITY SERVICES  
Address: 161 MILES LANE  
City, State Zip: WATSONVILLE, CA 95076  
Phone: (831) 761-5422  
**Record ID:** 440008LN  
Service Type: RES  
Resident Capacity: 23  
Total Occupancy: 23  
Target Population: 1.2  
Expiration Date: 6/30/2018 IMS: No

**Program Name:** ELEVATE ADDICTION SERVICES-SANTA CRUZ  
Legal Name: HALCYON HORIZONS, INCORPORATED  
Address: 9C MAREA AVENUE  
City, State Zip: LA SELVA BEACH, CA 95076  
Phone: (831) 768-7190 Fax: (831) 768-4639  
**Record ID:** 440009CN  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 16  
Target Population: 1.1  
Expiration Date: 12/31/2018 IMS: No

**Program Name:** ELEVATE ADDICTION SERVICES-SANTA CRUZ  
Legal Name: HALCYON HORIZONS, INCORPORATED  
Address: 125 FUCHSIA COURT  
City, State Zip: FREEDOM, CA 95019  
Phone: (831) 768-7190 Fax: (831) 768-4639  
**Record ID:** 440009CN  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 10  
Target Population: 1.1  
Expiration Date: 12/31/2018 IMS: No

**Program Name:** ELEVATE ADDICTION SERVICES-SANTA CRUZ  
Legal Name: HALCYON HORIZONS, INCORPORATED  
Address: 262 GAFFEY ROAD, 80 VISTA VERDE CIRCLE, AND 65 KINGFISHER DRIVE  
City, State Zip: WATSONVILLE, CA 95076  
Phone: (831) 768-7190 Fax: (831) 768-4639  
**Record ID:** 440009CN  
Service Type: RES-DETOX  
Resident Capacity: 67  
Total Occupancy: 78  
Target Population: 1.1  
Expiration Date: 12/31/2018 IMS: No

**Program Name:** ELEVATE ADDICTION SERVICES-SANTA CRUZ OUTPATIENT  
Legal Name: HALCYON HORIZONS, INCORPORATED  
Address: 9057 SOQUEL DRIVE, BUILDING A, SUITE G  
City, State Zip: APTOS, CA 95003  
Phone: (831) 768-7190 Fax: (831) 768-0667  
**Record ID:** 440009DN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 12/31/2018 IMS: No

**Program Name:** NEW LIFE CENTER  
Legal Name: NEW LIFE COMMUNITY SERVICES, INC.  
Address: 707 AND 717 FAIR AVENUE  
City, State Zip: SANTA CRUZ, CA 95060  
Phone: (831) 427-1007  
**Record ID:** 440010AN  
Service Type: RES  
Resident Capacity: 38  
Total Occupancy: 52  
Target Population: 1.7  
Expiration Date: 4/30/2019 IMS: No

**Program Name:** CAMP RECOVERY CENTER  
Legal Name: THE CAMP RECOVERY CENTER, LLC  
Address: 3192 GLEN CANYON ROAD  
City, State Zip: SCOTTS VALLEY, CA 95066  
Phone: (831) 438-1868  
**Record ID:** 440011AP  
Service Type: RES-DETOX  
Resident Capacity: 56  
Total Occupancy: 60  
Target Population: 1.1  
Expiration Date: 9/30/2017 IMS: No

**Program Name:** THE CAMP RECOVERY CENTER-SECTION II  
Legal Name: THE CAMP RECOVERY CENTER, LLC  
Address: 3192 GLEN CANYON ROAD  
City, State Zip: SCOTTS VALLEY, CA 95066-4916  
Phone: (831) 438-1868  
**Record ID:** 440011BP  
Service Type: DSS  
Target Population: 1.5  
Expiration Date: 2/28/2019 IMS: No

**Program Name:** SOBRIETY WORKS  
Legal Name: RIKKI RAP, INC.  
Address: 8030 SOQUEL AVENUE,  
SUITE 103  
City, State Zip: SANTA CRUZ, CA 95062-2096  
Phone: (831) 476-1747 Fax: (831) 476-1125  
**Record ID:** 440014AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 3/31/2018 IMS: No

**Program Name:** COASTAL TURNING POINT  
Legal Name: COASTAL TURNING POINT INC  
Address: 129 AND 147 SOUTH RIVER STREET,  
SUITE 234A  
City, State Zip: SANTA CRUZ, CA 95060-4556  
Phone: (831) 234-2010 Fax: (831) 226-2123  
**Record ID:** 440018AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 4/30/2018 IMS: No

State of California, Department of Health Care Services  
Licensed Residential Facilities and/or  
Certified Alcohol and Drug Programs

As of 9/1/2017

Shasta County

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**Program Name:** EMPIRE RECOVERY CENTER  
Legal Name: EMPIRE HOTEL, EHARC, INC.  
Address: 1237 CALIFORNIA STREET  
City, State Zip: REDDING, CA 96001  
Phone: (530) 243-7470 Fax: (530) 243-7477  
**Record ID:** 450001AN  
Service Type: RES-DETOX  
Resident Capacity: 42  
Total Occupancy: 42  
Target Population: 1.1  
Expiration Date: 5/31/2019 IMS: No

**Program Name:** EMPIRE OUTPATIENT SERVICES  
Legal Name: EMPIRE HOTEL, EHARC, INC.  
Address: 1616 WEST STREET  
City, State Zip: REDDING, CA 96001  
Phone: (530) 244-7074 Fax: (530) 244-7065  
**Record ID:** 450001CN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 8/31/2018 IMS: No

**Program Name:** CHEMICAL DEPENDENCY INTENSIVE OUTPATIENT PROGRAM  
Legal Name: THOMAS J. ANDREWS, M.D., INC.  
Address: 2885 CHURN CREEK ROAD, SUITE A  
City, State Zip: REDDING, CA 96002  
Phone: (530) 221-7474 Fax: (530) 226-6329  
**Record ID:** 450011AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 5/31/2019 IMS: No

**Program Name:** ANDERSON OUTPATIENT PROGRAM  
Legal Name: RIGHT ROAD RECOVERY PROGRAMS, INC.  
Address: 2110 FERRY STREET  
City, State Zip: ANDERSON, CA 96007  
Phone: (530) 365-8523  
**Record ID:** 450012AN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 5/31/2019 IMS: No

**Program Name:** VOTC, INC. RESIDENTIAL TREATMENT PROGRAM  
Legal Name: VOTC, INC.  
Address: 3640, 3642, 3644, 3646, 3650, 3652 EL PORTAL DRIVE AND 3647 RICARDO AVENUE  
City, State Zip: REDDING, CA 96002  
Phone: (530) 722-1114 Fax: (530) 722-1115  
**Record ID:** 450020AN  
Service Type: RES  
Resident Capacity: 24  
Total Occupancy: 36  
Target Population: 1.3  
Expiration Date: 9/30/2018 IMS: No

**Program Name:** VOTC, INC.  
Legal Name: VOTC, INC.  
Address: 3617 RICARDO AVENUE  
SUITE #1 & 9  
City, State Zip: REDDING, CA 96002  
Phone: (530) 722-1114 Fax: (530) 722-1115  
**Record ID:** 450020BN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 10/31/2018 IMS: No

**Program Name:** VISIONS OF THE CROSS  
Legal Name: VOTC, INC.  
Address: 2066 PLACER STREET  
City, State Zip: REDDING, CA 96001  
Phone: (530) 722-1114  
**Record ID:** 450020CN  
Service Type: RES  
Resident Capacity: 18  
Total Occupancy: 18  
Target Population: 1.2  
Expiration Date: 3/31/2018 IMS: No

**Program Name:** VISIONS OF THE CROSS  
Legal Name: VOTC, INC.  
Address: 3617 RICARDO AVENUE, #6, 7 & 8  
City, State Zip: REDDING, CA 96002  
Phone: (530) 722-1114 Fax: (530) 722-1115  
**Record ID:** 450020DN  
Service Type: RES  
Resident Capacity: 10  
Total Occupancy: 16  
Target Population: 1.4  
Expiration Date: 11/30/2017 IMS: No

State of California, Department of Health Care Services  
Licensed Residential Facilities and/or  
Certified Alcohol and Drug Programs

As of 9/1/2017

Sierra County

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**Program Name:** SIERRA COUNTY HUMAN SERVICES  
**Legal Name:** SIERRA COUNTY HUMAN SERVICES  
**Address:** 704 MILL STREET  
**City, State Zip:** LOYALTON, CA 96118  
**Phone:** (530) 993-6748 **Fax:** (530) 993-6759  
**Record ID:** 460001AN  
**Service Type:** NON  
**Target Population:** 1.1  
**Expiration Date:** 5/31/2019 **IMS:** No

State of California, Department of Health Care Services  
Licensed Residential Facilities and/or  
Certified Alcohol and Drug Programs

As of 9/1/2017

Siskiyou County

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**Program Name:** SISKIYOU COUNTY BEHAVIORAL HEALTH  
**Legal Name:** SISKIYOU COUNTY HEALTH & HUMAN SERVICES AGENCY  
**Address:** 2060 CAMPUS DRIVE  
**City, State Zip:** YREKA, CA 96097-9538  
**Phone:** (530) 841-4890      **Fax:** (530) 841-4881  
**Record ID:** 470002AN  
**Service Type:** NON  
**Target Population:** 1.1  
**Expiration Date:** 4/30/2019      **IMS:** No

**Program Name:** KARUK HEALTH CLINIC  
**Legal Name:** KARUK TRIBE  
**Address:** 1515 SOUTH OREGON STREET  
**City, State Zip:** YREKA, CA 96097  
**Phone:** (530) 842-9200      **Fax:** (530) 841-5150  
**Record ID:** 470003AN  
**Service Type:** NON  
**Target Population:** 1.1  
**Expiration Date:** 6/30/2018      **IMS:** No

State of California, Department of Health Care Services  
Licensed Residential Facilities and/or  
Certified Alcohol and Drug Programs

As of 9/1/2017

Solano County

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**Program Name:** SOUTHERN SOLANO ALCOHOL COUNCIL  
**Legal Name:** BI-BETT  
**Address:** 419 PENNSYLVANIA STREET  
**City, State Zip:** VALLEJO, CA 94590  
**Phone:** (707) 643-2715 **Fax:** (707) 643-8536  
**Record ID:** 480002BN  
**Service Type:** RES-DETOX  
**Resident Capacity:** 9  
**Total Occupancy:** 9  
**Target Population:** 1.1  
**Expiration Date:** 12/31/2017 **IMS:** No

**Program Name:** SHAMIA RECOVERY CENTER  
**Legal Name:** BI-BETT  
**Address:** 126, 126-1/2, AND 128 OHIO STREET  
**City, State Zip:** VALLEJO, CA 94590  
**Phone:** (707) 644-2577 **Fax:** (707) 644-2577  
**Record ID:** 480002CN  
**Service Type:** RES  
**Resident Capacity:** 16  
**Total Occupancy:** 16  
**Target Population:** 1.1  
**Expiration Date:** 11/30/2017 **IMS:** No

**Program Name:** RECOVERY CONNECTION  
**Legal Name:** BI-BETT  
**Address:** 604 BROADWAY STREET  
**City, State Zip:** VALLEJO, CA 94590  
**Phone:** (707) 643-2748 **Fax:** (707) 558-8047  
**Record ID:** 480002GN  
**Service Type:** NON  
**Target Population:** 1.1  
**Expiration Date:** 5/31/2019 **IMS:** No

**Program Name:** GENESIS HOUSE  
**Legal Name:** GENESIS HOUSE, INC.  
**Address:** 1149 WARREN AVENUE  
**City, State Zip:** VALLEJO, CA 94591  
**Phone:** (707) 552-5295  
**Record ID:** 480005AN  
**Service Type:** RES  
**Resident Capacity:** 19  
**Total Occupancy:** 19  
**Target Population:** 1.1  
**Expiration Date:** 6/30/2019 **IMS:** No

**Program Name:** GENESIS HOUSE II  
**Legal Name:** GENESIS HOUSE, INC.  
**Address:** 133 RENIDA STREET  
**City, State Zip:** VALLEJO, CA 94591  
**Phone:** (707) 552-5295  
**Record ID:** 480005BN  
**Service Type:** RES  
**Resident Capacity:** 12  
**Total Occupancy:** 12  
**Target Population:** 1.2  
**Expiration Date:** 6/30/2019 **IMS:** No

**Program Name:** THE HOUSE OF ACTS/SUBSTANCE ABUSE PROGRAM  
Legal Name: THE HOUSE OF ACTS/SUBSTANCE ABUSE PROGRAM  
Address: 627 GRANT STREET  
City, State Zip: VALLEJO, CA 94590-7228  
Phone: (707) 553-1042 Fax: (707) 553-8146  
**Record ID:** 480010AN  
Service Type: RES  
Resident Capacity: 10  
Total Occupancy: 10  
Target Population: 1.2  
Expiration Date: 2/28/2019 IMS: No

**Program Name:** THE HOUSE OF ACTS II  
Legal Name: THE HOUSE OF ACTS/SUBSTANCE ABUSE PROGRAM  
Address: 115 TERI COURT  
City, State Zip: VALLEJO, CA 94589  
Phone: (707) 552-3462 Fax: (707) 553-8146  
**Record ID:** 480010BN  
Service Type: RES  
Resident Capacity: 10  
Total Occupancy: 10  
Target Population: 1.2  
Expiration Date: 6/30/2018 IMS: No

**Program Name:** THE HOUSE OF ACTS ALCOHOL & SUBSTANCE ABUSE TREATMENT PROGRAM  
Legal Name: THE HOUSE OF ACTS/SUBSTANCE ABUSE PROGRAM  
Address: 844 5TH STREET  
City, State Zip: VALLEJO, CA 94589  
Phone: (707) 552-2071 Fax: (707) 553-8146  
**Record ID:** 480010DN  
Service Type: RES  
Resident Capacity: 8  
Total Occupancy: 8  
Target Population: 1.3  
Expiration Date: 8/31/2018 IMS: No

**Program Name:** ARCHWAY RECOVERY SERVICES, INC.  
Legal Name: ARCHWAY RECOVERY SERVICES, INC.  
Address: 1525 UNION AVENUE  
City, State Zip: FAIRFIELD, CA 94533  
Phone: (707) 435-1804 Fax: (707) 435-9807  
**Record ID:** 480022AN  
Service Type: RES-DETOX  
Resident Capacity: 13  
Total Occupancy: 13  
Target Population: 1.2  
Expiration Date: 3/31/2019 IMS: No

**Program Name:** ANKA BEHAVIORAL HEALTH, INC.  
Legal Name: ANKA BEHAVIORAL HEALTH, INCORPORATED  
Address: 251 GEORGIA STREET  
City, State Zip: VALLEJO, CA 94590  
Phone: (707) 558-8195 Fax: (707) 558-8196  
**Record ID:** 480023AN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 5/31/2019 IMS: No

**Program Name:** A WISE RETREAT  
Legal Name: JBLOCKSHIN & ASSOCIATES LLC,  
Address: 4749 GEORGIA ST  
City, State Zip: VALLEJO, CA 94591  
Phone: (707) 712-7733  
**Record ID:** 480035AP  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.3  
Expiration Date: 10/31/2018 IMS: No



State of California, Department of Health Care Services  
Licensed Residential Facilities and/or  
Certified Alcohol and Drug Programs

As of 9/1/2017

Sonoma County

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**Program Name:** CAMPOBELLO CHEMICAL DEPENDENCY RECOVERY CENTER  
**Legal Name:** CAMPOBELLO CHEMICAL DEPENDENCY RECOVERY CENTER, INC.  
**Address:** 3250 GUERNEVILLE ROAD  
**City, State Zip:** SANTA ROSA, CA 95401  
**Phone:** (707) 579-4066 **Fax:** (707) 579-1603  
**Record ID:** 490002AP  
**Service Type:** RES-DETOX  
**Resident Capacity:** 25  
**Total Occupancy:** 25  
**Target Population:** 1.1  
**Expiration Date:** 8/31/2018 **IMS:** No

**Program Name:** WOMEN'S RECOVERY SERVICES, A UNIQUE PLACE  
**Legal Name:** WOMEN'S RECOVERY SERVICES, A UNIQUE PLACE  
**Address:** 98, 112, 122, AND 140 HENDLEY STREET  
**City, State Zip:** SANTA ROSA, CA 95404  
**Phone:** (707) 527-0412 **Fax:** (707) 527-6048  
**Record ID:** 490004EN  
**Service Type:** RES  
**Resident Capacity:** 20  
**Total Occupancy:** 32  
**Target Population:** 1.4  
**Expiration Date:** 2/28/2018 **IMS:** No

**Program Name:** OUTPATIENT TREATMENT PROGRAM  
**Legal Name:** DRUG ABUSE ALTERNATIVES CENTER  
**Address:** 2403 PROFESSIONAL DRIVE, SUITE 101  
**City, State Zip:** SANTA ROSA, CA 95403  
**Phone:** (707) 571-2233 **Fax:** (707) 571-2238  
**Record ID:** 490009BN  
**Service Type:** NON  
**Target Population:** 1.1  
**Expiration Date:** 12/31/2017 **IMS:** No

**Program Name:** PERINATAL DAY TREATMENT  
**Legal Name:** DRUG ABUSE ALTERNATIVES CENTER  
**Address:** 2400 COUNTY CENTER DRIVE SUITE B  
**City, State Zip:** SANTA ROSA, CA 95403  
**Phone:** (707) 566-0170 **Fax:** (707) 526-3155  
**Record ID:** 490009EN  
**Service Type:** NON  
**Target Population:** 1.4  
**Expiration Date:** 4/30/2018 **IMS:** No

**Program Name:** DRUG ABUSE ALTERNATIVES CENTER - DRUG COURT  
**Legal Name:** DRUG ABUSE ALTERNATIVES CENTER  
**Address:** 2400 COUNTY CENTER DRIVE, SUITE B  
**City, State Zip:** SANTA ROSA, CA 95403  
**Phone:** (707) 566-0170 **Fax:** (707) 568-5445  
**Record ID:** 490009LN  
**Service Type:** NON  
**Target Population:** 1.1  
**Expiration Date:** 5/31/2018 **IMS:** No

**Program Name:** TURNING POINT - ARROWOOD  
Legal Name: DRUG ABUSE ALTERNATIVES CENTER  
Address: 440 ARROWOOD DRIVE  
City, State Zip: SANTA ROSA, CA 95407  
Phone: (707) 571-2233 Fax: (707) 284-2955  
**Record ID:** 490009RN  
Service Type: RES  
Resident Capacity: 112  
Total Occupancy: 112  
Target Population: 1.1  
Expiration Date: 5/31/2019 IMS: No

**Program Name:** TURNING POINT ORENDA DETOX  
Legal Name: DRUG ABUSE ALTERNATIVES CENTER  
Address: 1430 NEOTOMAS AVENUE  
City, State Zip: SANTA ROSA, CA 95405  
Phone: (707) 565-7460 Fax: (707) 565-7488  
**Record ID:** 490009SN  
Service Type: RES-DETOX  
Resident Capacity: 30  
Total Occupancy: 30  
Target Population: 1.1  
Expiration Date: 7/31/2018 IMS: No

**Program Name:** ATHENA HOUSE  
Legal Name: CALIFORNIA HUMAN DEVELOPMENT CORPORATION  
Address: 3555 SONOMA HIGHWAY  
City, State Zip: SANTA ROSA, CA 95409  
Phone: (707) 526-3150 Fax: (707) 526-3250  
**Record ID:** 490010AN  
Service Type: RES  
Resident Capacity: 40  
Total Occupancy: 44  
Target Population: 1.3  
Expiration Date: 6/30/2019 IMS: No

**Program Name:** CALIFORNIA HUMAN DEVELOPMENT CORPORATION  
EARLY INTERVENTION AND OUT-PATIENT TREA  
Legal Name: CALIFORNIA HUMAN DEVELOPMENT CORPORATION  
Address: 3315 AIRWAY DRIVE  
City, State Zip: SANTA ROSA, CA 95403  
Phone: (707) 523-2242  
**Record ID:** 490010EN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 9/30/2017 IMS: No

**Program Name:** AZURE ACRES  
Legal Name: THE CAMP RECOVERY CENTER, LLC  
Address: 2264 GREEN HILL ROAD  
City, State Zip: SEBASTOPOL, CA 95472  
Phone: (707) 823-3385  
**Record ID:** 490021AP  
Service Type: RES  
Resident Capacity: 28  
Total Occupancy: 28  
Target Population: 1.1  
Expiration Date: 12/31/2017 IMS: No

**Program Name:** AZURE ACRES IOP  
Legal Name: THE CAMP RECOVERY CENTER, LLC  
Address: 420 MENDOCINO AVENUE, SUITE 101  
City, State Zip: SANTA ROSA, CA 95401  
Phone: (707) 823-3385 Fax: (707) 823-7519  
**Record ID:** 490021BP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 1/31/2018 IMS: No

**Program Name:** MOUNTAIN VISTA FARM  
Legal Name: NEW VISTAS RECOVERY, INC.  
Address: 3020 WARM SPRINGS ROAD  
City, State Zip: GLEN ELLEN, CA 95442  
Phone: (707) 996-6716 Fax: (707) 996-6647  
**Record ID:** 490025AP  
Service Type: RES-DETOX  
Resident Capacity: 30  
Total Occupancy: 31  
Target Population: 1.1  
Expiration Date: 4/30/2018 IMS: No

**Program Name:** SONOMA COUNTY INDIAN HEALTH PROJECT/BEHAVIOR HEALTH  
Legal Name: SONOMA COUNTY INDIAN HEALTH PROJECT, INC.  
Address: 144 STONY POINT ROAD, 2ND FLOOR  
City, State Zip: SANTA ROSA, CA 95401  
Phone: (707) 521-4550 Fax: (707) 544-1092  
**Record ID:** 490032AN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 4/30/2019 IMS: No

**Program Name:** OLYMPIA HOUSE  
Legal Name: SONOMA RECOVERY SERVICES, LLC  
Address: 11207 VALLEY FORD ROAD  
City, State Zip: PETALUMA, CA 94952  
Phone: (415) 795-7609  
**Record ID:** 490036AP  
Service Type: RES-DETOX  
Resident Capacity: 32  
Total Occupancy: 32  
Target Population: 1.1  
Expiration Date: 8/31/2018 IMS: No

**Program Name:** MUIR WOOD ADOLESCENT & FAMILY SERVICES  
Legal Name: MUIR WOOD, LLC  
Address: 1733 SKILLMAN LANE  
City, State Zip: PETALUMA, CA 94952  
Phone: (310) 903-1155 Fax: (707) 555-5401  
**Record ID:** 490038AP  
Service Type: DSS  
Target Population: 1.5  
Expiration Date: 8/31/2019 IMS: No

**Program Name:** SACRED SPACE HEALING AND RETREAT CENTERS  
Legal Name: SACRED SPACE HEALING AND RETREAT CENTERS INTERNATIONAL  
Address: 627 CHERRY CREEK ROAD  
City, State Zip: CLOVERDALE, CA 95425  
Phone: (707) 894-0673 Fax: (800) 914-6360  
**Record ID:** 490039AP  
Service Type: RES-DETOX  
Resident Capacity: 4  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 8/31/2018 IMS: No

**Program Name:** CHI RECOVERY  
Legal Name: CHI RECOVERY, INC.  
Address: 105 MORRIS STREET, SUITES 214,218, 222, 192, 196, 204 AND 200  
City, State Zip: SEBASTOPOL, CA 95472  
Phone: (707) 824-0222 Fax: (707) 824-0222  
**Record ID:** 490040AP  
Service Type: NON-DETOX  
Target Population: 1.1  
Expiration Date: 4/30/2019 IMS: No

**Program Name:** PURA VIDA RECOVERY SERVICES  
**Legal Name:** PURA VIDA RECOVERY SERVICES, LLC  
**Address:** 130 STONY POINT ROAD, SUITE D  
**City, State Zip:** SANTA ROSA, CA 95401  
**Phone:** (707) 338-5927  
**Record ID:** 490041AP  
**Service Type:** NON  
**Target Population:** 1.1  
**Expiration Date:** 4/30/2019                      **IMS:**    No

State of California, Department of Health Care Services  
Licensed Residential Facilities and/or  
Certified Alcohol and Drug Programs

As of 9/1/2017

Stanislaus County

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**Program Name:** STANISLAUS RECOVERY CENTER  
**Legal Name:** STANISLAUS COUNTY BEHAVIORAL HEALTH AND RECOVERY SERVICES  
**Address:** 1904 RICHLAND AVENUE,  
ADULT TREATMENT BUILDING  
**City, State Zip:** CERES, CA 95307  
**Phone:** (209) 541-2121 **Fax:** (209) 541-2083  
**Record ID:** 500002EN  
**Service Type:** RES-DETOX  
**Resident Capacity:** 44  
**Total Occupancy:** 44  
**Target Population:** 1.1  
**Expiration Date:** 7/31/2019 **IMS:** No

**Program Name:** NEW HOPE RECOVERY  
**Legal Name:** GENE RADINO  
**Address:** 823 EAST ORANGEBURG AVENUE  
**City, State Zip:** MODESTO, CA 95350  
**Phone:** (209) 527-9797 **Fax:** (209) 527-9825  
**Record ID:** 500004AP  
**Service Type:** RES-DETOX  
**Resident Capacity:** 40  
**Total Occupancy:** 40  
**Target Population:** 1.1  
**Expiration Date:** 9/30/2018 **IMS:** No

**Program Name:** RECOVERY SYSTEMS ASSOCIATES  
**Legal Name:** GENE RADINO  
**Address:** 823 EAST ORANGEBURG AVENUE  
**City, State Zip:** MODESTO, CA 95350  
**Phone:** (209) 527-2046 **Fax:** (209) 527-9825  
**Record ID:** 500004BP  
**Service Type:** NON  
**Target Population:** 1.1  
**Expiration Date:** 7/31/2019 **IMS:** No

**Program Name:** NIRVANA DRUG AND ALCOHOL TREATMENT INSTITUTE  
**Legal Name:** NIRVANA DRUG AND ALCOHOL TREATMENT PROGRAM  
**Address:** 1100 KANSAS AVENUE, SUITE B-C  
**City, State Zip:** MODESTO, CA 95351  
**Phone:** (209) 579-1151 **Fax:** (209) 579-9605  
**Record ID:** 500009CN  
**Service Type:** NON  
**Target Population:** 1.1  
**Expiration Date:** 7/31/2018 **IMS:** No

**Program Name:** NIRVANA DRUG AND ALCOHOL TREATMENT PROGRAM  
**Legal Name:** NIRVANA DRUG AND ALCOHOL TREATMENT PROGRAM  
**Address:** 1028 RENO AVENUE  
**City, State Zip:** MODESTO, CA 95351  
**Phone:** (209) 579-1103 **Fax:** (209) 578-1085  
**Record ID:** 500009EN  
**Service Type:** RES-DETOX  
**Resident Capacity:** 30  
**Total Occupancy:** 30  
**Target Population:** 1.1  
**Expiration Date:** 11/30/2018 **IMS:** No

**Program Name:** NIRVANA DRUG AND ALCOHOL WOMEN OF HOPE  
Legal Name: NIRVANA DRUG AND ALCOHOL TREATMENT PROGRAM  
Address: 1116 & 1116 1/2 ALICE STREET &  
130 NELLIE STREET  
City, State Zip: MODESTO, CA 95350-5929  
Phone: (209) 578-3132 Fax: (209) 578-3498  
**Record ID:** 500009GN  
Service Type: RES-DETOX  
Resident Capacity: 16  
Total Occupancy: 16  
Target Population: 1.3  
Expiration Date: 4/30/2018 IMS: No

**Program Name:** NIRVANA DRUG AND ALCOHOL TREATMENT PROGRAM  
Legal Name: NIRVANA DRUG AND ALCOHOL TREATMENT PROGRAM  
Address: 1040 RENO AVENUE  
City, State Zip: MODESTO, CA 95351  
Phone: (209) 579-1103 Fax: (209) 578-1085  
**Record ID:** 500009IN  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.2  
Expiration Date: 10/31/2017 IMS: No

**Program Name:** NIRVANA DRUG AND ALCOHOL TREATMENT INSTITUTE  
Legal Name: NIRVANA DRUG AND ALCOHOL TREATMENT PROGRAM  
Address: 1100 KANSAS AVENUE, SUITE D  
City, State Zip: MODESTO, CA 95351  
Phone: (209) 579-1151 Fax: (209) 579-9605  
**Record ID:** 500009JN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 9/30/2019 IMS: No

**Program Name:** THE LAST RESORT  
Legal Name: ADOLESCENCE'S LAST RESORT  
Address: 218 EAST ORANGEBURG AVENUE  
City, State Zip: MODESTO, CA 95350  
Phone: (209) 523-6900 Fax: (209) 523-6909  
**Record ID:** 500010AN  
Service Type: DSS  
Target Population: 1.5  
Expiration Date: 2/28/2019 IMS: No

**Program Name:** THE LAST RESORT  
Legal Name: ADOLESCENCE'S LAST RESORT  
Address: 3125 MCHENRY AVENUE, SUITE D  
City, State Zip: MODESTO, CA 95350  
Phone: (209) 523-6910 Fax: (209) 523-6912  
**Record ID:** 500010BN  
Service Type: NON  
Target Population: 1.5  
Expiration Date: 12/31/2018 IMS: No

**Program Name:** BREAKTHROUGHS OUTPATIENT TREATMENT  
Legal Name: DOROTHY FRANKLIN  
Address: 2125 WYLIE DRIVE, SUITE 3  
City, State Zip: MODESTO, CA 95355  
Phone: (209) 529-1855  
**Record ID:** 500024AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 8/31/2017 IMS: No

**Program Name:** ADDICTION FREE RECOVERY SERVICES  
Legal Name: OPIE GROUP, INC.  
Address: 2937 VENEMEN AVENUE  
UNIT A 105  
City, State Zip: MODESTO, CA 95356  
Phone: (209) 579-3301 Fax: (209) 579-3311  
**Record ID:** 500027AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 10/31/2017 IMS: No

**Program Name:** ADDICTION FREE RECOVERY SERVICES  
Legal Name: OPIE GROUP, INC.  
Address: 5404 KIERNAN AVENUE  
City, State Zip: SALIDA, CA 95368  
Phone: (209) 579-3301 Fax: (209) 579-3311  
**Record ID:** 500027BP  
Service Type: RES-DETOX  
Resident Capacity: 15  
Total Occupancy: 15  
Target Population: 1.1  
Expiration Date: 1/31/2018 IMS: No

**Program Name:** MARTIN'S AGAPE OUTPATIENT PROGRAM  
Legal Name: PAULA JEAN MARTIN  
Address: 2908 FOURTH STREET  
City, State Zip: CERES, CA 95307  
Phone: (209) 566-8626  
**Record ID:** 500028AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 6/30/2019 IMS: No

State of California, Department of Health Care Services  
Licensed Residential Facilities and/or  
Certified Alcohol and Drug Programs

As of 9/1/2017

Sutter County

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**Program Name:** OPTIONS FOR CHANGE SUBSTANCE ABUSE PROGRAM  
**Legal Name:** SUTTER-YUBA BEHAVIORAL HEALTH  
**Address:** 1965 LIVE OAK BOULEVARD  
**City, State Zip:** YUBA CITY, CA 95991-8828  
**Phone:** (530) 822-7200 **Fax:** (530) 822-7108  
**Record ID:** 510002BN  
**Service Type:** NON  
**Target Population:** 1.1  
**Expiration Date:** 6/30/2019 **IMS:** No

**Program Name:** FIRST STEPS PERINATAL DAY TREATMENT PROGRAM  
**Legal Name:** SUTTER-YUBA BEHAVIORAL HEALTH  
**Address:** 1251 EAST ONSTOTT ROAD  
**City, State Zip:** YUBA CITY, CA 95991-2439  
**Phone:** (530) 822-7263 **Fax:** (530) 822-7267  
**Record ID:** 510002CN  
**Service Type:** NON  
**Target Population:** 1.1  
**Expiration Date:** 11/30/2018 **IMS:** No

**Program Name:** FEATHER RIVER MEN'S CENTER  
**Legal Name:** FEATHER RIVER MEN'S CENTER  
**Address:** 2465 BIRCH STREET  
**City, State Zip:** LIVE OAK, CA 95953-2609  
**Phone:** (530) 695-8006  
**Record ID:** 510006AN  
**Service Type:** RES  
**Resident Capacity:** 12  
**Total Occupancy:** 14  
**Target Population:** 1.2  
**Expiration Date:** 11/30/2017 **IMS:** No



State of California, Department of Health Care Services  
Licensed Residential Facilities and/or  
Certified Alcohol and Drug Programs

As of 9/1/2017

Tehama County

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**Program Name:** TEHAMA COUNTY HEALTH SERVICES AGENCY DRUG AND ALCOHOL DIVISION  
**Legal Name:** TEHAMA COUNTY HEALTH SERVICES AGENCY  
**Address:** 1850 WALNUT STREET, BUILDING G  
**City, State Zip:** RED BLUFF, CA 96080  
**Phone:** (530) 527-7893 **Fax:** (530) 527-0766  
**Record ID:** 520002AN  
**Service Type:** NON  
**Target Population:** 1.1  
**Expiration Date:** 4/30/2019 **IMS:** No

**Program Name:** TEHAMA COUNTY HEALTH SERVICES AGENCY DRUG AND  
ALCOHOL DIVISION - SOUTH COUNTY  
**Legal Name:** TEHAMA COUNTY HEALTH SERVICES AGENCY  
**Address:** 275 SOLANO STREET  
**City, State Zip:** CORNING, CA 96021  
**Phone:** (530) 824-4890 **Fax:** (530) 824-8443  
**Record ID:** 520002BN  
**Service Type:** NON  
**Target Population:** 1.1  
**Expiration Date:** 5/31/2019 **IMS:** No

State of California, Department of Health Care Services  
Licensed Residential Facilities and/or  
Certified Alcohol and Drug Programs

As of 9/1/2017

Trinity County

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**Program Name:** TRINITY COUNTY ALCOHOL AND OTHER DRUG SERVICES  
**Legal Name:** TRINITY COUNTY ALCOHOL AND OTHER DRUG SERVICES  
**Address:** 1450 MAIN STREET  
**City, State Zip:** WEAVERVILLE, CA 96093  
**Phone:** (530) 623-1362      **Fax:** (530) 623-4448  
**Record ID:** 530001AN  
**Service Type:** NON  
**Target Population:** 1.1  
**Expiration Date:** 2/28/2019      **IMS:** No

State of California, Department of Health Care Services  
Licensed Residential Facilities and/or  
Certified Alcohol and Drug Programs

As of 9/1/2017

Tulare County

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**Program Name:** PAAR CENTER WEST  
Legal Name: PORTERVILLE HALFWAY HOUSE  
Address: 182 WEST BELLEVIEW AVENUE  
City, State Zip: PORTERVILLE, CA 93257  
Phone: (559) 781-0107  
**Record ID:** 540001CN  
Service Type: RES  
Resident Capacity: 12  
Total Occupancy: 14  
Target Population: 1.3  
Expiration Date: 7/31/2019 IMS: No

**Program Name:** THE PAAR CENTER  
Legal Name: PORTERVILLE HALFWAY HOUSE  
Address: 509 NORTH EL GRANITO STREET  
City, State Zip: PORTERVILLE, CA 93257  
Phone: (559) 781-0107 Fax: (559) 781-7521  
**Record ID:** 540001FN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 2/28/2019 IMS: No

**Program Name:** THE PAAR CENTER  
Legal Name: PORTERVILLE HALFWAY HOUSE  
Address: 218, 232 AND 237 W. BELLEVIEW AVENUE; 509 N. EL GRANITO  
City, State Zip: PORTERVILLE, CA 93257  
Phone: (559) 781-0107 Fax: (559) 781-7521  
**Record ID:** 540001HN  
Service Type: RES-DETOX  
Resident Capacity: 45  
Total Occupancy: 48  
Target Population: 1.2  
Expiration Date: 11/30/2018 IMS: No

**Program Name:** TULARE COUNTY HEALTH AND HUMAN SERVICES AGENCY - FAMILY CARE DIVISION  
Legal Name: TULARE COUNTY HEALTH AND HUMAN SERVICES AGENCY  
Address: 942 S. SANTA FE STREET  
City, State Zip: VISALIA, CA 93292  
Phone: (559) 636-4000 Fax: (559) 624-1067  
**Record ID:** 540002HN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 2/28/2019 IMS: No

**Program Name:** TULARE COUNTY HEALTH AND HUMAN SERVICES AGENCY - FAMILY CARE DIVISION  
Legal Name: TULARE COUNTY HEALTH AND HUMAN SERVICES AGENCY  
Address: 1055 WEST HENDERSON AVENUE, SUITE 2  
City, State Zip: PORTERVILLE, CA 93257  
Phone: (559) 788-1200 Fax: (559) 624-1067  
**Record ID:** 540002IN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 2/28/2019 IMS: No

**Program Name:** TURNING POINT YOUTH SERVICES  
Legal Name: TURNING POINT OF CENTRAL CALIFORNIA, INC.  
Address: 220 NORTH LOCUST STREET  
City, State Zip: VISALIA, CA 93291  
Phone: (559) 627-1385 Fax: (559) 636-2105  
**Record ID:** 540005BN  
Service Type: NON  
Target Population: 1.5  
Expiration Date: 6/30/2019 IMS: No

**Program Name:** TURNING POINT VISALIA RE-ENTRY CENTER  
Legal Name: TURNING POINT OF CENTRAL CALIFORNIA, INC.  
Address: 1845 SOUTH COURT STREET,  
DORMS 1, 2, 3, 4, 5 AND 6  
City, State Zip: VISALIA, CA 93277  
Phone: (559) 732-5550 Fax: (559) 732-5574  
**Record ID:** 540005DN  
Service Type: RES  
Resident Capacity: 32  
Total Occupancy: 32  
Target Population: 1.2  
Expiration Date: 3/31/2018 IMS: No

**Program Name:** COURAGE TO CHANGE, INC.  
Legal Name: COURAGE TO CHANGE  
Address: 1230 N. ANDERSON ROAD  
City, State Zip: EXETER, CA 93221  
Phone: (559) 594-4855 Fax: (559) 594-0086  
**Record ID:** 540014BN  
Service Type: NON  
Target Population: 1.5  
Expiration Date: 7/31/2019 IMS: No

**Program Name:** RECOVERY RESOURCES  
Legal Name: RICK AND JERRI THOMPSON, D.B.A., RECOVERY RESOURCES  
Address: 4040 S. DEMAREE ROAD, SUITE A  
City, State Zip: VISALIA, CA 93277  
Phone: (559) 625-8176 Fax: (559) 625-8179  
**Record ID:** 540020AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 4/30/2019 IMS: No

**Program Name:** ALTERNATIVE SERVICES  
Legal Name: ALTERNATIVE SERVICES, INC.  
Address: 215 NORTH D STREET  
City, State Zip: PORTERVILLE, CA 93257  
Phone: (559) 783-2402 Fax: (559) 782-4681  
**Record ID:** 540024AP  
Service Type: NON  
Target Population: 1.5  
Expiration Date: 2/28/2018 IMS: No

**Program Name:** ALTERNATIVE SERVICES  
Legal Name: ALTERNATIVE SERVICES, INC.  
Address: 2380 W. WHITENDALE AVENUE  
City, State Zip: VISALIA, CA 93227  
Phone: (559) 651-8090 Fax: (559) 651-8099  
**Record ID:** 540024DP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 5/31/2018 IMS: No

**Program Name:** ALTERNATIVE SERVICES  
Legal Name: ALTERNATIVE SERVICES, INC.  
Address: 125 SOUTH M STREET  
City, State Zip: TULARE, CA 93274  
Phone: (559) 685-8283  
**Record ID:** 540024EP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 5/31/2018 IMS: No

**Program Name:** SRS RECOVERY SERVICES  
Legal Name: SRS RECOVERY SERVICES, LLC  
Address: 250 NORTH MAIN STREET  
City, State Zip: PORTERVILLE, CA 93257  
Phone: (559) 789-9881 Fax: (559) 789-9877  
**Record ID:** 540028BP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 12/31/2017 IMS: No

**Program Name:** NEW HOPE  
Legal Name: CENTRAL VALLEY RECOVERY SERVICES, INC.  
Address: 212 NORTH STEVENSON STREET  
City, State Zip: VISALIA, CA 93291  
Phone: (559) 625-2995 Fax: (559) 625-3808  
**Record ID:** 540031AN  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.3  
Expiration Date: 6/30/2018 IMS: No

**Program Name:** PINE RECOVERY CENTER  
Legal Name: CENTRAL VALLEY RECOVERY SERVICES, INC.  
Address: 120 WEST SCHOOL AVENUE  
City, State Zip: VISALIA, CA 93291  
Phone: (559) 625-4100 Fax: (559) 625-3808  
**Record ID:** 540031BN  
Service Type: RES-DETOX  
Resident Capacity: 27  
Total Occupancy: 27  
Target Population: 1.2  
Expiration Date: 8/31/2019 IMS: No

**Program Name:** NEW VISIONS FOR WOMEN  
Legal Name: CENTRAL VALLEY RECOVERY SERVICES, INC.  
Address: 1425-A and B EAST WALNUT AVENUE  
City, State Zip: VISALIA, CA 93277-6432  
Phone: (559) 625-4072 Fax: (559) 625-3808  
**Record ID:** 540031CN  
Service Type: RES-DETOX  
Resident Capacity: 23  
Total Occupancy: 23  
Target Population: 1.3  
Expiration Date: 5/31/2018 IMS: No

**Program Name:** MOTHERING HEIGHTS  
Legal Name: CENTRAL VALLEY RECOVERY SERVICES, INC.  
Address: 705 SOUTH COURT STREET  
City, State Zip: VISALIA, CA 93277  
Phone: (559) 625-2995 Fax: (559) 625-3808  
**Record ID:** 540031DN  
Service Type: RES  
Resident Capacity: 10  
Total Occupancy: 23  
Target Population: 1.4  
Expiration Date: 10/31/2017 IMS: No

**Program Name:** NEW HEIGHTS  
Legal Name: CENTRAL VALLEY RECOVERY SERVICES, INC.  
Address: 1731 W. WALNUT AVENUE  
City, State Zip: VISALIA, CA 93277  
Phone: (559) 732-4885 Fax: (559) 625-3808  
**Record ID:** 540031EN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 8/31/2018 IMS: No

**Program Name:** ROBERTSON RECOVERY  
Legal Name: CENTRAL VALLEY RECOVERY SERVICES, INC.  
Address: 3107 EAST KAWEAH AVENUE  
City, State Zip: VISALIA, CA 93292  
Phone: (559) 754-2705 Fax: (559) 802-3097  
**Record ID:** 540031GN  
Service Type: RES-DETOX  
Resident Capacity: 28  
Total Occupancy: 29  
Target Population: 1.2  
Expiration Date: 8/31/2018 IMS: No

**Program Name:** ASTON'S NEW HOPE RECOVERY  
Legal Name: ASTON'S NEW HOPE RECOVERY  
Address: 2415 N. OAK GROVE COURT  
City, State Zip: VISALIA, CA 93291  
Phone: (559) 799-7156 Fax: (559) 636-1324  
**Record ID:** 540037AP  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 9/30/2018 IMS: No

State of California, Department of Health Care Services  
Licensed Residential Facilities and/or  
Certified Alcohol and Drug Programs

As of 9/1/2017

Tuolumne County

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**Program Name:** THE RANCH  
**Legal Name:** MAYNORD'S CHEMICAL DEPENDENCY RECOVERY CENTER  
**Address:** 19320 CHEROKEE ROAD  
**City, State Zip:** TUOLUMNE, CA 95379  
**Phone:** (209) 928-3737 **Fax:** (209) 928-1152  
**Record ID:** 550001AP  
**Service Type:** RES-DETOX  
**Resident Capacity:** 36  
**Total Occupancy:** 37  
**Target Population:** 1.1  
**Expiration Date:** 12/31/2017 **IMS:** No

State of California, Department of Health Care Services  
Licensed Residential Facilities and/or  
Certified Alcohol and Drug Programs

As of 9/1/2017

Ventura County

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**Program Name:** VENTURA COUNTY BEHAVIORAL HEALTH DEPARTMENT  
ALCOHOL & DRUG PROGRAM-SIMI VALLEY CTR  
Legal Name: VENTURA COUNTY BEHAVIORAL HEALTH DEPARTMENT ALCOHOL AND DRUG PROGRAMS  
Address: 3150 EAST LOS ANGELES AVENUE  
City, State Zip: SIMI VALLEY, CA 93063  
Phone: (805) 577-1724  
**Record ID:** 560003AN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 11/30/2017 IMS: No

**Program Name:** VENTURA COUNTY BEHAVIORAL HEALTH DEPARTMENT  
ALCOHOL & DRUG PROGRAM-VENTURA CTR  
Legal Name: VENTURA COUNTY BEHAVIORAL HEALTH DEPARTMENT ALCOHOL & DRUG PROGRAMS  
Address: 24 EAST MAIN STREET  
City, State Zip: VENTURA, CA 93001  
Phone: (805) 652-6919 Fax: (805) 652-0868  
**Record ID:** 560003BN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 11/30/2017 IMS: No

**Program Name:** OXNARD CENTER  
Legal Name: VENTURA COUNTY BEHAVIORAL HEALTH DEPARTMENT ALCOHOL & DRUG PROGRAMS  
Address: 1911 WILLIAMS DRIVE  
City, State Zip: OXNARD, CA 93036  
Phone: (805) 981-9200  
**Record ID:** 560003CN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 10/31/2018 IMS: No

**Program Name:** A NEW START FOR MOMS  
Legal Name: VENTURA COUNTY BEHAVIORAL HEALTH DEPARTMENT ALCOHOL & DRUG PROGRAMS  
Address: 1911 WILLIAMS DRIVE, SUITE 140  
City, State Zip: OXNARD, CA 93036  
Phone: (805) 981-9250  
**Record ID:** 560003DN  
Service Type: NON  
Target Population: 1.3  
Expiration Date: 10/31/2018 IMS: No

**Program Name:** FILLMORE ADP CENTER  
Legal Name: VENTURA COUNTY BEHAVIORAL HEALTH DEPARTMENT ALCOHOL & DRUG PROGRAMS  
Address: 828 WEST VENTURA STREET, SUITE 250  
City, State Zip: FILLMORE, CA 93015  
Phone: (805) 524-8644  
**Record ID:** 560003GN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 11/30/2017 IMS: No

**Program Name:** KHEPERA HOUSE  
Legal Name: KHEPERA HOUSE  
Address: 108 WEST HARRISON AVENUE  
City, State Zip: VENTURA, CA 93001  
Phone: (805) 653-2596  
**Record ID:** 560004DN  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.2  
Expiration Date: 9/30/2018 IMS: No



**Program Name:** KHEPERA HOUSE  
Legal Name: KHEPERA HOUSE  
Address: 277 A AND B WEST HARRISON AVENUE  
City, State Zip: VENTURA, CA 93001  
Phone: (805) 648-9762  
**Record ID:** 560004EN  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.2  
Expiration Date: 9/30/2018 IMS: No

**Program Name:** KHEPERA HOUSE  
Legal Name: KHEPERA HOUSE  
Address: 125-A, 125-B, 125-C & 125-D WEST HARRISON STREET  
City, State Zip: VENTURA, CA 93001  
Phone: (805) 653-2596 Fax: (805) 648-9762  
**Record ID:** 560004JN  
Service Type: RES  
Resident Capacity: 24  
Total Occupancy: 24  
Target Population: 1.2  
Expiration Date: 5/31/2019 IMS: No

**Program Name:** ACTION FAMILY COUNSELING CENTERS - SIMI VALLEY  
Legal Name: ACTION FAMILY COUNSELING, INC.  
Address: 4380 APRICOT ROAD  
City, State Zip: SIMI VALLEY, CA 93063  
Phone: (805) 584-3258 Fax: (661) 297-9701  
**Record ID:** 560026AP  
Service Type: NON  
Target Population: 1.5  
Expiration Date: 11/30/2018 IMS: No

**Program Name:** ACTION FAMILY COUNSELING, INC. ADULT RESIDENTIAL TREATMENT - PIRU  
Legal Name: ACTION FAMILY COUNSELING, INC.  
Address: 691 MAIN STREET  
City, State Zip: PIRU, CA 93040  
Phone: (805) 521-1250 Fax: (850) 521-1425  
**Record ID:** 560026DP  
Service Type: RES  
Resident Capacity: 22  
Total Occupancy: 22  
Target Population: 1.1  
Expiration Date: 9/30/2018 IMS: No

**Program Name:** INTERVENTION INSTITUTE  
Legal Name: LAURIE SANDERS  
Address: 973 S. WESTLAKE BLVD, SUITE 103  
City, State Zip: THOUSAND OAKS, CA 91361  
Phone: (805) 379-3611 Fax: (805) 446-4470  
**Record ID:** 560027AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 6/30/2019 IMS: No

**Program Name:** ALTERNATIVE ACTION PROGRAMS  
Legal Name: DENNIS M. GIROUX & ASSOCIATES, INC.  
Address: 314 WEST FOURTH STREET  
City, State Zip: OXNARD, CA 93030  
Phone: (805) 988-1112 Fax: (805) 988-4883  
**Record ID:** 560028AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 8/31/2018 IMS: No

**Program Name:** GENESIS PROGRAMS, INC.  
Legal Name: GENESIS PROGRAMS, INC.  
Address: 1732 PALMA DRIVE, SUITE 208  
City, State Zip: VENTURA, CA 93003  
Phone: (805) 650-3094 Fax: (805) 650-3097  
**Record ID:** 560032AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 6/30/2018 IMS: No

**Program Name:** GENESIS PROGRAMS, INC.  
Legal Name: GENESIS PROGRAMS, INC.  
Address: 145 HODENCAMP ROAD, SUITE 207  
City, State Zip: THOUSAND OAKS, CA 91360  
Phone: (805) 497-6169 Fax: (805) 497-6179  
**Record ID:** 560032BP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 6/30/2018 IMS: No

**Program Name:** PASSAGES VENTURA  
Legal Name: PASSAGES SILVER STRAND LLC  
Address: 224 EAST CLARA STREET  
City, State Zip: PORT HUENEME, CA 93041  
Phone: (805) 283-4737 Fax: (805) 488-0001  
**Record ID:** 560036AP  
Service Type: RES-DETOX  
Resident Capacity: 90  
Total Occupancy: 90  
Target Population: 1.1  
Expiration Date: 3/31/2019 IMS: No

**Program Name:** PASSAGES VENTURA  
Legal Name: PASSAGES SILVER STRAND LLC  
Address: 241 MARKET STREET  
City, State Zip: PORT HUENEME, CA 93041  
Phone: (805) 283-4737 Fax: (805) 488-9000  
**Record ID:** 560036BP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 10/31/2017 IMS: No

**Program Name:** LA VENTANA TREATMENT PROGRAMS  
Legal Name: RYLIST, INC.  
Address: 1408 E THOUSAND OAKS BOULEVARD, SUITE 100  
City, State Zip: THOUSAND OAKS, CA 91362  
Phone: (805) 644-5745 Fax: (818) 975-5076  
**Record ID:** 560038BP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 11/30/2017 IMS: No

**Program Name:** LA VENTANA TREATMENT PROGRAMS  
Legal Name: RYLIST, INC  
Address: 385 N. CONEJO SCHOOL ROAD  
City, State Zip: THOUSAND OAKS, CA 91362  
Phone: (805) 379-0565  
**Record ID:** 560038DP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 9/30/2018 IMS: No

**Program Name:** LA VENTANA TREATMENT PROGRAMS  
Legal Name: RYLIST, INC.  
Address: 395 N. CONEJO SCHOOL ROAD  
City, State Zip: THOUSAND OAKS, CA 91362  
Phone: (805) 659-2309 Fax: (818) 975-5076  
**Record ID:** 560038FP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 4/30/2018 IMS: No

**Program Name:** LA VENTANA TREATMENT PROGRAMS  
Legal Name: RYLIST, INC  
Address: 1154 CARDIFF CIRCLE  
City, State Zip: THOUSAND OAKS, CA 91362  
Phone: (805) 379-4883  
**Record ID:** 560038GP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 4/30/2019 IMS: No

**Program Name:** LA VENTANA TREATMENT PROGRAMS  
Legal Name: RYLIST, INC.  
Address: 1771 COUNTRY OAKS LANE  
City, State Zip: THOUSAND OAKS, CA 91362  
Phone: (805) 370-5440 Fax: (805) 371-4038  
**Record ID:** 560038HP  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 8/31/2019 IMS: No

**Program Name:** PSYCHOLOGICAL SERVICES FOR FAMILIES  
Legal Name: PSYCHOLOGICAL SERVICES FOR FAMILIES  
Address: 410 NORTH A STREET  
City, State Zip: OXNARD, CA 93030  
Phone: (805) 701-1040 Fax: (805) 487-2255  
**Record ID:** 560039AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 8/31/2017 IMS: No

**Program Name:** A WILDWOOD RECOVERY  
Legal Name: A WILDWOOD RECOVERY  
Address: 360 CAMINO DE CELESTE  
City, State Zip: THOUSAND OAKS, CA 91360  
Phone: (805) 493-5741 Fax: (805) 493-5047  
**Record ID:** 560040AP  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 8/31/2019 IMS: No

**Program Name:** A WILDWOOD RECOVERY IOP  
Legal Name: A WILDWOOD RECOVERY  
Address: 166 N. MOORPARK ROAD, SUITE 304  
City, State Zip: THOUSAND OAKS, CA 91360  
Phone: (805) 493-5741 Fax: (805) 493-5047  
**Record ID:** 560040BP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 11/30/2017 IMS: No

**Program Name:** COMMUNITY RECOVERY CENTER  
Legal Name: VENTURA RECOVERY CENTER, INC.  
Address: 166 SIESTA AVENUE  
City, State Zip: THOUSAND OAKS, CA 91360  
Phone: (805) 499-8383 Fax: (805) 494-4898  
**Record ID:** 560041AP  
Service Type: RES-DETOX  
Resident Capacity: 10  
Total Occupancy: 10  
Target Population: 1.1  
Expiration Date: 8/31/2018 IMS: No

**Program Name:** THE LAKE HOUSE  
Legal Name: SHERWOOD CORPORATE HOUSING LLC  
Address: 890 LAKE SHERWOOD DRIVE  
City, State Zip: LAKE SHERWOOD, CA 91361  
Phone: (805) 371-8870  
**Record ID:** 560042AP  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 10/31/2017 IMS: No

**Program Name:** ENGAGE RECOVERY, INC.  
Legal Name: ENGAGE RECOVERY, INC.  
Address: 650 HAMPSHIRE ROAD SUITES 104, 204, 212  
City, State Zip: WESTLAKE VILLAGE, CA 91361  
Phone: (805) 497-0605 Fax: (805) 371-4862  
**Record ID:** 560043AP  
Service Type: NON  
Target Population: 1.5  
Expiration Date: 4/30/2018 IMS: No

**Program Name:** VANTAGE POINT RECOVERY  
Legal Name: GATE OF RECOVERY INC.  
Address: 123 HODENCAMP ROAD,  
SUITES 100, 103, 107, 205 & 210  
City, State Zip: THOUSAND OAKS, CA 91360  
Phone: (805) 777-7595 Fax: (805) 777-9249  
**Record ID:** 560045AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 3/31/2018 IMS: No

**Program Name:** PCI - WESTLAKE CENTERS - IOP  
Legal Name: MIRIAM HAMIDEH, PH.D, CLINICAL PSYCHOLOGIST, INC  
Address: 5743 CORSA AVENUE, SUITE 223  
City, State Zip: WESTLAKE VILLAGE, CA 91362  
Phone: (747) 222-7464  
**Record ID:** 560046AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 1/31/2019 IMS: No

**Program Name:** DESTINATIONS TO RECOVERY  
Legal Name: DESTINATIONS TO RECOVERY, LLC  
Address: 1304 E. MAIN STREET  
City, State Zip: VENTURA, CA 93001  
Phone: (818) 737-2221 Fax: (805) 256-3287  
**Record ID:** 560047AP  
Service Type: NON  
Target Population: 1.13  
Expiration Date: 6/30/2019 IMS: No

**Program Name:** NARCONON OJAI  
Legal Name: NARCONON PACIFIC COAST  
Address: 9950 SULPHUR MOUNTAIN ROAD  
City, State Zip: OJAI, CA 93023  
Phone: (805) 798-8021  
**Record ID:** 560048AN  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 8  
Target Population: 1.1  
Expiration Date: 8/31/2019 IMS: No

**Program Name:** PURE RECOVERY  
Legal Name: PURE RECOVERY CALIFORNIA, INC.  
Address: 5427 REEF WAY  
City, State Zip: OXNARD, CA 93035  
Phone: (805) 263-6296  
**Record ID:** 560049AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 8/31/2019 IMS: No

**Program Name:** PURE RECOVERY  
Legal Name: PURE RECOVERY CALIFORNIA, INC.  
Address: 4310 TRADEWINDS DRIVE, SUITE 300  
City, State Zip: OXNARD, CA 93035  
Phone: (805) 263-6296  
**Record ID:** 560049BP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 10/31/2018 IMS: No

**Program Name:** PURE RECOVERY  
Legal Name: PURE RECOVERY CALIFORNIA, INC.  
Address: 3957 W. HEMLOCK STREET  
City, State Zip: OXNARD, CA 93035  
Phone: (805) 263-6296  
**Record ID:** 560049CP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 2/28/2019 IMS: No

**Program Name:** TRIBE INTEGRATIVE RECOVERY  
Legal Name: NITOR, INC.  
Address: 1317 DEL NORTE ROAD, SUITE 200  
City, State Zip: CAMARILLO, CA 93010  
Phone: (805) 991-7561 Fax: (805) 832-6786  
**Record ID:** 560050AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 1/31/2018 IMS: No

**Program Name:** "SET FREE" DRUG & ALCOHOL TREATMENT CENTERS OF AMERICA  
Legal Name: "SET FREE" DRUG & ALCOHOL TREATMENT CENTERS OF AMERICA  
Address: 3069 CISCO COURT  
City, State Zip: SIMI VALLEY, CA 93063  
Phone: (805) 404-9390  
**Record ID:** 560051AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 5/31/2018 IMS: No

**Program Name:** CHANGING TIDES TREATMENT CENTER  
Legal Name: CHANGING TIDES TREATMENT, LLC  
Address: 117 SANTA CRUZ AVENUE  
City, State Zip: OXNARD, CA 93035  
Phone: (805) 254-0619  
**Record ID:** 560052AP  
Service Type: RES-DETOX  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 8/31/2018 IMS: No

**Program Name:** CHANGING TIDES TREATMENT CENTER  
Legal Name: CHANGING TIDES TREATMENT, LLC  
Address: 2021 SPERRY AVENUE,  
18  
City, State Zip: VENTURA, CA 93003  
Phone: (844) 883-3869  
**Record ID:** 560052BP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 8/31/2018 IMS: No

**Program Name:** VENTURA RECOVERY CENTER  
Legal Name: SIESTA HOUSE, LLC  
Address: 2985 E. HILLCREST DRIVE,  
105 & 106  
City, State Zip: THOUSAND OAKS, CA 91362  
Phone: (800) 247-6111  
**Record ID:** 560053AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 9/30/2018 IMS: No

**Program Name:** PROTOTYPES WOMEN'S CENTER-VENTURA  
Legal Name: HEALTHRIGHT 360  
Address: 2150 N. VICTORIA AVENUE  
City, State Zip: OXNARD, CA 93036  
Phone: (805) 382-6296 Fax: (805) 382-9487  
**Record ID:** 560054AN  
Service Type: RES-DETOX  
Resident Capacity: 56  
Total Occupancy: 85  
Target Population: 1.4  
Expiration Date: 9/30/2017 IMS: No

**Program Name:** A HEALING PLACE - THE ESTATES  
Legal Name: PARADIGM RECOVERY GROUP, LLC  
Address: 601 E. DAILY DRIVE, SUITE 205  
City, State Zip: CAMARILLO, CA 93010  
Phone: (844) 388-4100 Fax: (805) 914-0632  
**Record ID:** 560055AP  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 7/31/2019 IMS: No

**Program Name:** A HEALING PLACE - THE ESTATES  
Legal Name: PARADIGM RECOVERY GROUP, LLC  
Address: 192 RAMONA PLACE  
City, State Zip: CAMARILLO, CA 93010  
Phone: (818) 618-0404 Fax: (805) 914-0632  
**Record ID:** 560055BP  
Service Type: RES  
Resident Capacity: 6  
Total Occupancy: 6  
Target Population: 1.1  
Expiration Date: 7/31/2019 IMS: No

State of California, Department of Health Care Services  
Licensed Residential Facilities and/or  
Certified Alcohol and Drug Programs

As of 9/1/2017

Yolo County

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**Program Name:** CACHE CREEK LODGE  
Legal Name: CACHE CREEK LODGE, INC.  
Address: 421, 435, AND 441 ASPEN STREET  
City, State Zip: WOODLAND, CA 95695-2665  
Phone: (530) 662-5727 Fax: (530) 892-1831  
**Record ID:** 570004BN  
Service Type: RES  
Resident Capacity: 40  
Total Occupancy: 40  
Target Population: 1.2  
Expiration Date: 7/31/2019 IMS: No

**Program Name:** WALTER'S HOUSE  
Legal Name: YOLO WAYFARER CENTER (CHRISTIAN MISSION)  
Address: 285 4TH STREET  
City, State Zip: WOODLAND, CA 95695  
Phone: (530) 662-2699 Fax: (530) 662-6918  
**Record ID:** 570008AN  
Service Type: RES  
Resident Capacity: 44  
Total Occupancy: 44  
Target Population: 1.1  
Expiration Date: 8/31/2019 IMS: No

**Program Name:** FOURTH AND HOPE OUTPATIENT PROGRAM  
Legal Name: YOLO WAYFARER CENTER (CHRISTIAN MISSION)  
Address: 207 FOURTH STREET  
City, State Zip: WOODLAND, CA 95695-3501  
Phone: (530) 867-5010 Fax: (530) 661-2494  
**Record ID:** 570008BN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 1/31/2019 IMS: No

**Program Name:** PROGRESS HOUSE YOLO COUNTY WOMEN AND CHILDREN'S FACILITY  
Legal Name: PROGRESS HOUSE, INC.  
Address: 15450 COUNTY ROAD 99, BUILDING A AND 15430 COUNTY ROAD 99, BUILDING B  
City, State Zip: WOODLAND, CA 95695-9339  
Phone: (530) 626-9240 Fax: (530) 668-8528  
**Record ID:** 570009AN  
Service Type: RES  
Resident Capacity: 12  
Total Occupancy: 27  
Target Population: 1.1  
Expiration Date: 6/30/2018 IMS: No

State of California, Department of Health Care Services  
Licensed Residential Facilities and/or  
Certified Alcohol and Drug Programs

As of 9/1/2017

Yuba County

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**Program Name:** PATHWAYS  
Legal Name: MIDVALLEY RECOVERY FACILITIES, INCORPORATED  
Address: 2 9TH STREET  
City, State Zip: MARYSVILLE, CA 95901-5362  
Phone: (530) 742-6670 Fax: (530) 674-4544  
**Record ID:** 580001BN  
Service Type: RES-DETOX  
Resident Capacity: 22  
Total Occupancy: 23  
Target Population: 1.1  
Expiration Date: 12/31/2017 IMS: No

**Program Name:** PATHWAYS  
Legal Name: MIDVALLEY RECOVERY FACILITIES, INCORPORATED  
Address: 2 9TH STREET  
City, State Zip: MARYSVILLE, CA 95901-5362  
Phone: (530) 742-6670 Fax: (530) 674-4544  
**Record ID:** 580001DN  
Service Type: NON  
Target Population: 1.1  
Expiration Date: 12/31/2017 IMS: No

**Program Name:** FOR OUR RECOVERING FAMILIES  
Legal Name: COUNTY OF YUBA PROBATION FOR OUR RECOVERING (F.O.R) FAMILIES  
Address: 8 7TH STREET  
City, State Zip: MARYSVILLE, CA 95901  
Phone: (530) 749-5124 Fax: (530) 743-7364  
**Record ID:** 580002AN  
Service Type: NON  
Target Population: 1.13  
Expiration Date: 6/30/2019 IMS: No