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DIRECTORY OF CONTINUING CARE
AND
RETIREMENT COMMUNITIES
IN
SOUTH CAROLINA



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AUG 15 1989
STATE DOCUMENTS

Joint Legislative Committee on Aging
212 Blatt Building, P.O. Box 11867
Columbia, SC 29211
(803) 734-2995

Representative Patrick B. Harris, Chairman

INTRODUCTION

The 1989 Directory of Continuing Care and Retirement Communities in South Carolina is the third publication of the Joint Legislative Committee on Aging that addresses the increasing housing needs of South Carolina's elderly population by compiling a listing and the location of available facilities.

In 1982 the Committee developed a directory at the request of the S.C. Commission on Aging entitled Housing for Senior Citizens in South Carolina. Available housing information was obtained by sending survey forms to the regional Area Agencies on Aging, S.C. Association of Housing Authority Directors, church-related facilities and other facilities identified for the elderly.

In 1987 the Committee published the Directory of Life Care and Retirement Communities in South Carolina that identified communities according to services provided. Life care communities were defined as providing nursing home services on the premises or having contractual agreements with area nursing homes.

The 1989 Directory of Continuing Care and Retirement Communities in South Carolina was developed to aid senior citizens in selecting retirement housing. Surveys were distributed to retirement communities identified through an extensive mailing list provided by the S.C. Retirement Communities Association as well as those communities contained in previous Committee publications. The communities identified whether they considered themselves a continuing care facility or an independent living retirement community.

All information included in the Directory was obtained with the excellent cooperation of the facilities from the surveys and has not been verified by the Committee. We suggest that for additional information, you may contact the retirement communities directly.

On behalf of the Committee, I extend our services in assisting your decision concerning your new home. We are here to serve your needs and appreciate the opportunity to provide you with valuable information.

Representative Patrick B. Harris
Chairman

June 1989



SOUTH CAROLINA
COUNTY OUTLINE MAP

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DUE WEST RETIREMENT CENTER Abbeville County
Anderson Street
P.O. Box 307
Due West, S.C. 29639
(803) 379-2570
Dr. Betty W. Berrios, Director

TYPE OF FACILITY: RETIREMENT & CONTINUING CARE COMMUNITY

- Residential capacity: 80
- 72 detached houses, apartments, duplexes, & private rooms
- 35% of residents from other states

SERVICES AVAILABLE:

<u>Recreation:</u>	<u>Health-Related:</u>	
<input type="checkbox"/> clubhouse	<input checked="" type="checkbox"/> assisted living plan	<input type="checkbox"/> security patrol
<input type="checkbox"/> fishing	<input type="checkbox"/> medical center	<input type="checkbox"/> security gate
<input type="checkbox"/> garden plot	<input type="checkbox"/> nurse on staff	<input checked="" type="checkbox"/> transportation service
<input type="checkbox"/> golf on site	<input type="checkbox"/> nursing home on site	<input type="checkbox"/> homeowners' assoc.
<input type="checkbox"/> greenhouse	<input type="checkbox"/> nursing home privileges	<input checked="" type="checkbox"/> entrance fee/deposit donation required
<input type="checkbox"/> marina	<input checked="" type="checkbox"/> 24-hour front desk	<input type="checkbox"/> fee simple ownership
<input type="checkbox"/> pool		<input checked="" type="checkbox"/> maintenance fee
<input type="checkbox"/> social director	<u>Other:</u>	<input type="checkbox"/> rental agreements available
<input type="checkbox"/> spa/hydrotherapy pool	<input type="checkbox"/> emergency telephone communications	<input type="checkbox"/> income requirements
<input type="checkbox"/> tennis	<input type="checkbox"/> congregate meal plan	<input checked="" type="checkbox"/> age eligibility requirements
<input type="checkbox"/> visitor tours	<input type="checkbox"/> neighborhood watch program	
<input checked="" type="checkbox"/> walking path	<input checked="" type="checkbox"/> handicapped accom.	
<input type="checkbox"/> woodworking shop		

CONTRACTUAL INFORMATION:

- | | <u>YES</u> | <u>NO</u> |
|---|---------------|---------------|
| 1. Is there a contractual agreement? | <u>X</u> | <u> </u> |
| 2. Is the retirement community government subsidized? | <u> </u> | <u>X</u> |
| 3. Is the retirement community church related? Which denomination? <u>Assoc. Ref. Pres.</u> | <u>X</u> | <u> </u> |
| 4. Does the contract specify services included in the monthly charge and those requiring additional charge? | <u>X</u> | <u> </u> |
| 5. Is the refund method outlined in contract? | <u>X</u> | <u> </u> |
| 6. How is information on the financial soundness of the community shared with residents? <u>Annual audit is public information.</u> | <u> </u> | <u> </u> |
| 7. What is the policy regarding residents who become insolvent?
<u>Admission Committee screens to avoid this and have had no incident of it</u> | <u> </u> | <u> </u> |
| 8. What is the resident's financial responsibility should he/she be transferred to a nursing facility? <u>Contract calls for them to assume such costs. Insurance & Medicare are required for admission</u> | <u> </u> | <u> </u> |
| 9. What is the length of time the living unit will be maintained in the event of temporary nursing home placement? <u>2 weeks at no cost</u> | <u> </u> | <u> </u> |

INTEREST POINTS:

-Miles to nearest hospital	<u>13</u>	-Miles to nearest grocery	<u>.5</u>
-Miles to nearest major airport	<u>55</u>	-Miles to Blue Ridge Mtns.	<u>15</u>
-Miles to nearest shopping mall	<u>12</u>	-Miles to Atlantic Ocean	<u>200</u>

CROFT HOUSE, INC.
356 York Street, North East
Aiken, SC 29801
(803) 648-0771
Elaine Whitaker, Administrator

Aiken County

TYPE OF FACILITY: RETIREMENT COMMUNITY

- Residential capacity: 64
- 60 high rise
- 10% of residents from other states

SERVICES AVAILABLE:

Recreation:

- clubhouse
- fishing
- garden plot
- golf on site
- greenhouse
- marina
- pool
- social director
- spa/hydrotherapy
- pool
- tennis
- visitor tours
- walking path
- woodworking shop

Health-Related:

- assisted living plan
- medical center
- nurse on staff
- nursing home on site
- nursing home privileges
- 24-hour front desk

Other:

- emergency telephone
- communications
- congregate meal plan
- neighborhood watch program
- handicapped accom.

- security patrol
- security gate
- transportation service
- homeowners' assoc.
- entrance fee/deposit donation required
- fee simple ownership
- maintenance fee
- rental agreements available
- income requirements
- age eligibility requirements

CONTRACTUAL INFORMATION:

- | | <u>YES</u> | <u>NO</u> |
|---|------------|-----------|
| 1. Is there a contractual agreement? | <u>X</u> | _____ |
| 2. Is the retirement community government subsidized? | <u>X</u> | _____ |
| 3. Is the retirement community church related? Which denomination? _____ | _____ | <u>X</u> |
| 4. Does the contract specify services included in the monthly charge and those requiring additional charge? _____ | _____ | <u>X</u> |
| 5. Is the refund method outlined in contract? | <u>X</u> | _____ |
| 6. How is information on the financial soundness of the community shared with residents? <u>Resident Meetings</u> | | |
| 7. What is the policy regarding residents who become insolvent? | | |

Contact responsible person

8. What is the resident's financial responsibility should he/she be transferred to a nursing facility? None

9. What is the length of time the living unit will be maintained in the event of temporary nursing home placement? 90 days

INTEREST POINTS:

- | | | | |
|---------------------------------|------------|----------------------------|------------|
| -Miles to nearest hospital | <u>3.5</u> | -Miles to nearest grocery | <u>.2</u> |
| -Miles to nearest major airport | <u>25</u> | -Miles to Blue Ridge Mtns. | <u>250</u> |
| -Miles to nearest shopping mall | <u>2</u> | -Miles to Atlantic Ocean | <u>200</u> |

**KALMIA LANDING
205 Landing Drive
Aiken, S.C. 29801
(803) 649-5391**

Aiken County

Dorothy McLaughlin, Exec. Director

TYPE OF FACILITY: RETIREMENT COMMUNITY

- Residential capacity: 149
- 149 villas, patio homes, & 3-floor condominium building
- % of residents from other states

SERVICES AVAILABLE:

<u>Recreation:</u>	<u>Health-Related:</u>	
<input checked="" type="checkbox"/> clubhouse	<input type="checkbox"/> assisted living plan	<input type="checkbox"/> security patrol
<input type="checkbox"/> fishing	<input type="checkbox"/> medical center	<input checked="" type="checkbox"/> security gate
<input checked="" type="checkbox"/> garden plot	<input type="checkbox"/> nurse on staff	<input checked="" type="checkbox"/> transportation service
<input type="checkbox"/> golf on site	<input type="checkbox"/> nursing home on site	<input checked="" type="checkbox"/> homeowners' assoc. entrance fee/deposit donation required
<input type="checkbox"/> greenhouse	<input type="checkbox"/> nursing home privileges	<input type="checkbox"/> fee simple ownership
<input type="checkbox"/> marina	<input type="checkbox"/> 24-hour front desk	<input type="checkbox"/> maintenance fee
<input checked="" type="checkbox"/> pool		<input type="checkbox"/> rental agreements available
<input type="checkbox"/> social director	<u>Other:</u>	<input type="checkbox"/> income requirements
<input type="checkbox"/> spa/hydrotherapy pool	<input checked="" type="checkbox"/> emergency telephone communications	<input type="checkbox"/> age eligibility requirements
<input checked="" type="checkbox"/> tennis	<input type="checkbox"/> congregate meal plan	
<input checked="" type="checkbox"/> visitor tours	<input type="checkbox"/> neighborhood watch program	
<input type="checkbox"/> walking path	<input type="checkbox"/> handicapped accom.	
<input type="checkbox"/> woodworking shop		

CONTRACTUAL INFORMATION:

- | | <u>YES</u> | <u>NO</u> |
|---|-------------------------------------|-------------------------------------|
| 1. Is there a contractual agreement? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 2. Is the retirement community government subsidized? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 3. Is the retirement community church related? Which denomination? _____ | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 4. Does the contract specify services included in the monthly charge and those requiring additional charge? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 5. Is the refund method outlined in contract? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 6. How is information on the financial soundness of the community shared with residents? <u>Yes</u> | | |
| 7. What is the policy regarding residents who become insolvent? | | |
| <u>n/a</u> | | |
| 8. What is the resident's financial responsibility should he/she be transferred to a nursing facility? <u>n/a</u> | | |
| 9. What is the length of time the living unit will be maintained in the event of temporary nursing home placement? <u>n/a</u> | | |

INTEREST POINTS:

-Miles to nearest hospital	<u>.5</u>	-Miles to nearest grocery	<u>.5</u>
-Miles to nearest major airport	<u>15</u>	-Miles to Blue Ridge Mtns.	
-Miles to nearest shopping mall	<u>1</u>	-Miles to Atlantic Ocean	<u>3hrs.</u>

LAUREL CREEK **Aiken County**
1001 South Laurel Creek Drive
Aiken, SC 29801
(803) 642-6336
Jo Whitson, President

TYPE OF FACILITY: RETIREMENT & CONTINUING CARE COMMUNITY

- Residential capacity: 400-500
- 264 detached houses, apartments, duplexes, & villas
- % of residents from other states
 (Construction to begin Fall 1989)

SERVICES AVAILABLE:

- | | | |
|--------------------------------|---|---|
| <u>Recreation:</u> | <u>Health-Related:</u> | |
| <u>X</u> clubhouse | <u>X</u> assisted living plan | <u>X</u> security patrol |
| <u>X</u> fishing | <u>X</u> medical center | <u>X</u> security gate |
| <u>X</u> garden plot | <u>X</u> nurse on staff | <u>X</u> transportation service |
| <u> </u> golf on site | <u>X</u> nursing home on site | <u> </u> homeowners' assoc. entrance fee/deposit donation required |
| <u>X</u> greenhouse | <u>X</u> nursing home privileges | <u>X</u> fee simple ownership |
| <u> </u> marina | <u>X</u> 24-hour front desk | <u>X</u> maintenance fee |
| <u>X</u> pool | | <u> </u> rental agreements available |
| <u>X</u> social director | <u>Other:</u> | <u> </u> income requirements |
| <u>X</u> spa/hydrotherapy pool | <u>X</u> emergency telephone communications | <u>X</u> age eligibility requirements |
| <u>X</u> tennis | <u>X</u> congregate meal plan | |
| <u>X</u> visitor tours | <u>X</u> neighborhood watch program | |
| <u>X</u> walking path | <u>X</u> handicapped accom. | |
| <u> </u> woodworking shop | | |

CONTRACTUAL INFORMATION:

- | | <u>YES</u> | <u>NO</u> |
|--|------------|-----------|
| 1. Is there a contractual agreement? | <u>X</u> | <u> </u> |
| 2. Is the retirement community government subsidized? | <u> </u> | <u>X</u> |
| 3. Is the retirement community church related? Which denomination? _____ | <u> </u> | <u>X</u> |
| 4. Does the contract specify services included in the monthly charge and those requiring additional charge? _____ | <u>X</u> | <u> </u> |
| 5. Is the refund method outlined in contract? | <u>X</u> | <u> </u> |
| 6. How is information on the financial soundness of the community shared with residents? _____ | | |
| 7. What is the policy regarding residents who become insolvent? _____ | | |
| | | |
| 8. What is the resident's financial responsibility should he/she be transferred to a nursing facility? _____ | | |
| | | |
| 9. What is the length of time the living unit will be maintained in the event of temporary nursing home placement? _____ | | |

INTEREST POINTS:

- | | | | |
|---------------------------------|------------|----------------------------|------------|
| -Miles to nearest hospital | <u>7</u> | -Miles to nearest grocery | <u>25</u> |
| -Miles to nearest major airport | <u>24</u> | -Miles to Blue Ridge Mtns. | <u>125</u> |
| -Miles to nearest shopping mall | <u>1.1</u> | -Miles to Atlantic Ocean | <u>125</u> |

**THE LEDGES
Sikes Hill
North Augusta, S.C. 29841
(803) 279-1776
Angela Houser, Resident Manager**

Aiken County

TYPE OF FACILITY: RETIREMENT COMMUNITY

- Residential capacity: 84
- 84 high rise
- % of residents from other states

SERVICES AVAILABLE:

Recreation:

- clubhouse
- fishing
- garden plot
- X golf on site
- greenhouse
- marina
- pool
- social director
- spa/hydrotherapy
- pool
- tennis
- visitor tours
- walking path
- woodworking shop

Health-Related:

- assisted living plan
- medical center
- nurse on staff
- nursing home on site
- nursing home privileges
- 24-hour front desk

Other:

- emergency telephone
- communications
- congregate meal plan
- neighborhood watch
- program
- X handicapped accom.

- security patrol
- security gate
- transportation
- service
- homeowners' assoc.
- entrance fee/deposit
- donation required
- fee simple ownership
- maintenance fee
- rental agreements
- available
- income requirements
- X age eligibility
- requirements

CONTRACTUAL INFORMATION:

- | | <u>YES</u> | <u>NO</u> |
|---|------------|------------|
| 1. Is there a contractual agreement? | <u>X</u> | <u> </u> |
| 2. Is the retirement community government subsidized? | <u>X</u> | <u> </u> |
| 3. Is the retirement community church related? Which denomination? _____ | <u> </u> | <u>X</u> |
| 4. Does the contract specify services included in the monthly charge and those requiring additional charge? | <u>X</u> | <u> </u> |
| 5. Is the refund method outlined in contract? | <u>X</u> | <u> </u> |
| 6. How is information on the financial soundness of the community shared with residents? <u>n/a</u> | <u> </u> | <u> </u> |
| 7. What is the policy regarding residents who become insolvent?
<u>must move</u> | <u> </u> | <u> </u> |
| 8. What is the resident's financial responsibility should he/she be transferred to a nursing facility? <u>None unless damages are left.</u> | <u> </u> | <u> </u> |
| 9. What is the length of time the living unit will be maintained in the event of temporary nursing home placement? <u>30 days</u> | <u> </u> | <u> </u> |

INTEREST POINTS:

- | | | | |
|---------------------------------|-----------|----------------------------|------------|
| -Miles to nearest hospital | <u>10</u> | -Miles to nearest grocery | <u>2</u> |
| -Miles to nearest major airport | <u>20</u> | -Miles to Blue Ridge Mtns. | <u> </u> |
| -Miles to nearest shopping mall | <u>2</u> | -Miles to Atlantic Ocean | <u> </u> |

TRINITY PLACE OF AIKEN **Aiken County**
 213 Laurens Ave.
 224 Barnwell Ave., N.W.
 Aiken, S.C. 29811
 (803) 648-9993
Ted Hammond, Exec. Director

TYPE OF FACILITY: RETIREMENT COMMUNITY

- Residential capacity: 154
- 77 high rise & apartments
- % of residents from other states

SERVICES AVAILABLE:

<u>Recreation:</u>	<u>Health-Related:</u>	
<u> </u> clubhouse	<u>X</u> assisted living plan	<u>X</u> security patrol
<u> </u> fishing	<u> </u> medical center	<u> </u> security gate
<u> </u> garden plot	<u>X</u> nurse on staff	<u>X</u> transportation
<u> </u> golf on site	<u> </u> nursing home on site	service
<u> </u> greenhouse	<u> </u> nursing home privileges	<u> </u> homeowners' assoc.
<u> </u> marina	<u>X</u> 24-hour front desk	<u>X</u> entrance fee/deposit
<u> </u> pool		donation required
<u>X</u> social director	<u>Other:</u>	<u> </u> fee simple ownership
<u>X</u> spa/hydrotherapy	<u>X</u> emergency telephone	<u> </u> maintenance fee
pool	communications	<u>X</u> rental agreements
<u> </u> tennis	<u>X</u> congregate meal plan	available
<u> </u> visitor tours	<u> </u> neighborhood watch	<u> </u> income requirements
<u> </u> walking path	program	<u>X</u> age eligibility
<u>X</u> woodworking shop	<u>X</u> handicapped accom.	requirements

CONTRACTUAL INFORMATION:

- | | <u>YES</u> | <u>NO</u> |
|--|------------|-----------|
| 1. Is there a contractual agreement? | <u>X</u> | <u> </u> |
| 2. Is the retirement community government subsidized? | <u> </u> | <u>X</u> |
| 3. Is the retirement community church related? Which denomination? <u>Presbyterian</u> | <u>X</u> | <u> </u> |
| 4. Does the contract specify services included in the monthly charge and those requiring additional charge? | <u>X</u> | <u> </u> |
| 5. Is the refund method outlined in contract? | <u>X</u> | <u> </u> |
| 6. How is information on the financial soundness of the community shared with residents? <u>Open book policy</u> | | |
| 7. What is the policy regarding residents who become insolvent? | | |

- They must move - ours is a "rental" facility.
8. What is the resident's financial responsibility should he/she be transferred to a nursing facility? Since ours are primarily a
- rental lease - upon transfer, no financial responsibility to us.
9. What is the length of time the living unit will be maintained in the event of temporary nursing home placement? Negotiable

INTEREST POINTS:

-Miles to nearest hospital	<u> 4 </u>	-Miles to nearest grocery	<u> .5 </u>
-Miles to nearest major airport	<u> 25 </u>	-Miles to Blue Ridge Mtns.	<u> 200 </u>
-Miles to nearest shopping mall	<u> 2 </u>	-Miles to Atlantic Ocean	<u> 135 </u>

WOODSIDE PLANTATION
1361 Silver Bluff Road
P.O. Box 327
Aiken, SC 29801
(803) 692-6646
Ruby Romaine, Director

Aiken County

TYPE OF FACILITY: RETIREMENT COMMUNITY

- Residential capacity: 3500
- 400 detached houses
- 45% of residents from other states

SERVICES AVAILABLE:

Recreation:	Health-Related:	
<input checked="" type="checkbox"/> clubhouse	<input type="checkbox"/> assisted living plan	<input checked="" type="checkbox"/> security patrol
<input checked="" type="checkbox"/> fishing	<input type="checkbox"/> medical center	<input checked="" type="checkbox"/> security gate
<input type="checkbox"/> garden plot	<input type="checkbox"/> nurse on staff	<input type="checkbox"/> transportation service
<input checked="" type="checkbox"/> golf on site	<input type="checkbox"/> nursing home on site	<input checked="" type="checkbox"/> homeowners' assoc.
<input type="checkbox"/> greenhouse	<input type="checkbox"/> nursing home privileges	<input type="checkbox"/> entrance fee/deposit donation required
<input type="checkbox"/> marina	<input type="checkbox"/> 24-hour front desk	<input checked="" type="checkbox"/> fee simple ownership
<input checked="" type="checkbox"/> pool		<input type="checkbox"/> maintenance fee
<input type="checkbox"/> social director	Other:	<input type="checkbox"/> rental agreements available
<input type="checkbox"/> spa/hydrotherapy pool	<input type="checkbox"/> emergency telephone communications	<input type="checkbox"/> income requirements
<input checked="" type="checkbox"/> tennis	<input type="checkbox"/> congregate meal plan	<input type="checkbox"/> age eligibility requirements
<input checked="" type="checkbox"/> visitor tours	<input type="checkbox"/> neighborhood watch program	
<input checked="" type="checkbox"/> walking path	<input type="checkbox"/> handicapped accom.	
<input type="checkbox"/> woodworking shop		

CONTRACTUAL INFORMATION:

- | | <u>YES</u> | <u>NO</u> |
|---|---------------|---------------|
| 1. Is there a contractual agreement? | <u>X</u> | <u> </u> |
| 2. Is the retirement community government subsidized? | <u>X</u> | <u> </u> |
| 3. Is the retirement community church related? Which denomination? _____ | <u> </u> | <u>X</u> |
| 4. Does the contract specify services included in the monthly charge and those requiring additional charge? | <u>X</u> | <u> </u> |
| 5. Is the refund method outlined in contract? | <u>X</u> | <u> </u> |
| 6. How is information on the financial soundness of the community shared with residents? <u>Brochures & newsletter</u> | | |
| 7. What is the policy regarding residents who become insolvent? | | |
| <u>N/A</u> | | |
| 8. What is the resident's financial responsibility should he/she be transferred to a nursing facility? <u>N/A</u> | | |
| _____ | | |
| 9. What is the length of time the living unit will be maintained in the event of temporary nursing home placement? <u>N/A</u> | | |
| _____ | | |

INTEREST POINTS:

-Miles to nearest hospital	<u>7</u>	-Miles to nearest grocery	<u>2</u>
-Miles to nearest major airport	<u>124</u>	-Miles to Blue Ridge Mtns.	<u>150</u>
-Miles to nearest shopping mall	<u>2</u>	-Miles to Atlantic Ocean	<u>150</u>

ANDERSON PLACE
311 Simpson Road
Anderson, SC 29621
(803) 261-3875

Anderson County

Arlis Hinson, Administrator

TYPE OF FACILITY: RETIREMENT & CONTINUING CARE COMMUNITY

- Residential capacity:
- 70 cluster homes & 44 nursing home beds
- 35% of residents from other states

SERVICES AVAILABLE:

Recreation:

- clubhouse
- fishing
- garden plot
- golf on site
- greenhouse
- marina
- pool

- social director
- spa/hydrotherapy pool
- tennis
- visitor tours
- walking path
- woodworking shop

Health-Related:

- assisted living plan
- medical center
- nurse on staff
- nursing home on site
- nursing home privileges
- 24-hour front desk

Other:

- emergency telephone communications
- congregate meal plan
- neighborhood watch program
- handicapped accom.

- security patrol
- security gate
- transportation service
- homeowners' assoc.
- entrance fee/deposit donation required
- fee simple ownership
- maintenance fee
- rental agreements available
- income requirements
- age eligibility requirements

CONTRACTUAL INFORMATION:

- | | <u>YES</u> | <u>NO</u> |
|---|---------------|---------------|
| 1. Is there a contractual agreement? | <u>X</u> | <u> </u> |
| 2. Is the retirement community government subsidized? | <u> </u> | <u>X</u> |
| 3. Is the retirement community church related? Which denomination? _____ | <u> </u> | <u>X</u> |
| 4. Does the contract specify services included in the monthly charge and those requiring additional charge? _____ | <u> </u> | <u>X</u> |
| 5. Is the refund method outlined in contract? | <u> </u> | <u>X</u> |
| 6. How is information on the financial soundness of the community shared with residents? <u>At time of entrance</u> | <u> </u> | <u> </u> |
| 7. What is the policy regarding residents who become insolvent? | <u> </u> | <u> </u> |

N/A

8. What is the resident's financial responsibility should he/she be transferred to a nursing facility? Depending on contract liable for daily rate
9. What is the length of time the living unit will be maintained in the event of temporary nursing home placement? Generally 30 days

INTEREST POINTS:

- | | | | |
|---------------------------------|-----------|----------------------------|------------|
| -Miles to nearest hospital | <u>1</u> | -Miles to nearest grocery | <u>.2</u> |
| -Miles to nearest major airport | <u>20</u> | -Miles to Blue Ridge Mtns. | <u>100</u> |
| -Miles to nearest shopping mall | <u>2</u> | -Miles to Atlantic Ocean | <u>200</u> |

KENSINGTON - CALHOUN
402 North Main Street
Anderson, SC 29621
(803) 226-4426

Anderson County

Laura Aanenson, Exec. Director

TYPE OF FACILITY: RETIREMENT & CONTINUING CARE COMMUNITY

- Residential capacity: 100
- 100 high rise
- % of residents from other states

SERVICES AVAILABLE:

- | | | |
|----------------------------|-----------------------------------|--------------------------------|
| <u>Recreation:</u> | <u>Health-Related:</u> | |
| <u> </u> clubhouse | <u>X</u> assisted living plan | <u>X</u> security patrol |
| <u>X</u> fishing | <u>X</u> medical center | <u> </u> security gate |
| <u>X</u> garden plot | <u> </u> nurse on staff | <u>X</u> transportation |
| <u> </u> golf on site | <u> </u> nursing home on site | service |
| <u> </u> greenhouse | <u> </u> nursing home privileges | <u> </u> homeowners' assoc. |
| <u> </u> marina | <u>X</u> 24-hour front desk | <u> </u> entrance fee/deposit |
| <u> </u> pool | | donation required |
| <u>X</u> social director | <u>Other:</u> | <u> </u> fee simple ownership |
| <u> </u> spa/hydrotherapy | <u>X</u> emergency telephone | <u> </u> maintenance fee |
| <u> </u> pool | communications | <u>X</u> rental agreements |
| <u> </u> tennis | <u>X</u> congregate meal plan | available |
| <u>X</u> visitor tours | <u> </u> neighborhood watch | <u> </u> income requirements |
| <u> </u> walking path | program | <u> </u> age eligibility |
| <u> </u> woodworking shop | <u>X</u> handicapped accom. | requirements |

CONTRACTUAL INFORMATION:

- | | <u>YES</u> | <u>NO</u> |
|---|---------------|---------------|
| 1. Is there a contractual agreement? | <u> X </u> | <u> </u> |
| 2. Is the retirement community government subsidized? | <u> </u> | <u> X </u> |
| 3. Is the retirement community church related? Which denomination? _____ | <u> </u> | <u> X </u> |
| 4. Does the contract specify services included in the monthly charge and those requiring additional charge? <u> </u> | <u> X </u> | <u> </u> |
| 5. Is the refund method outlined in contract? | <u> X </u> | <u> </u> |
| 6. How is information on the financial soundness of the community shared with residents? <u>Resident Council meetings</u> | | |
| 7. What is the policy regarding residents who become insolvent? | | |

Discharge

8. What is the resident's financial responsibility should he/she be transferred to a nursing facility? n/a
9. What is the length of time the living unit will be maintained in the event of temporary nursing home placement? Until resident requests termination of agreement.

INTEREST POINTS:

- | | | | |
|---------------------------------|--------------|----------------------------|--------------|
| -Miles to nearest hospital | <u> 1 </u> | -Miles to nearest grocery | <u> 1 </u> |
| -Miles to nearest major airport | <u> 35 </u> | -Miles to Blue Ridge Mtns. | <u> 60 </u> |
| -Miles to nearest shopping mall | <u> 2 </u> | -Miles to Atlantic Ocean | <u> 200 </u> |

WALNUT CREEK COMMUNITY
206 Sunshine Way
Easley, S.C. 29640
(803) 269-9389

Anderson County

John E. Bradley, Resident Owner

TYPE OF FACILITY: RETIREMENT COMMUNITY

- Residential capacity: 70
- 70 individual owner manufactured homes
- 20% of residents from other states

SERVICES AVAILABLE:

- | | | |
|--|---|---|
| <u>Recreation:</u> | <u>Health-Related:</u> | |
| <input checked="" type="checkbox"/> clubhouse | <input type="checkbox"/> assisted living plan | <input type="checkbox"/> security patrol |
| <input checked="" type="checkbox"/> fishing | <input type="checkbox"/> medical center | <input type="checkbox"/> security gate |
| <input type="checkbox"/> garden plot | <input type="checkbox"/> nurse on staff | <input type="checkbox"/> transportation service |
| <input type="checkbox"/> golf on site | <input type="checkbox"/> nursing home on site | <input type="checkbox"/> homeowners' assoc. |
| <input type="checkbox"/> greenhouse | <input type="checkbox"/> nursing home privileges | <input type="checkbox"/> entrance fee/deposit |
| <input type="checkbox"/> marina | <input type="checkbox"/> 24-hour front desk | <input type="checkbox"/> donation required |
| <input checked="" type="checkbox"/> pool | | <input type="checkbox"/> fee simple ownership |
| <input type="checkbox"/> social director | <u>Other:</u> | <input type="checkbox"/> maintenance fee |
| <input type="checkbox"/> spa/hydrotherapy | <input type="checkbox"/> emergency telephone | <input checked="" type="checkbox"/> rental agreements available |
| <input type="checkbox"/> pool | <input type="checkbox"/> communications | <input type="checkbox"/> income requirements |
| <input type="checkbox"/> tennis | <input type="checkbox"/> congregate meal plan | <input type="checkbox"/> age eligibility requirements |
| <input type="checkbox"/> visitor tours | <input type="checkbox"/> neighborhood watch program | |
| <input checked="" type="checkbox"/> walking path | <input type="checkbox"/> handicapped accom. | |
| <input type="checkbox"/> woodworking shop | | |

CONTRACTUAL INFORMATION:

- | | <u>YES</u> | <u>NO</u> |
|---|---------------|---------------|
| 1. Is there a contractual agreement? | <u>X</u> | <u> </u> |
| 2. Is the retirement community government subsidized? | <u> </u> | <u>X</u> |
| 3. Is the retirement community church related? Which denomination? _____ | <u> </u> | <u>X</u> |
| 4. Does the contract specify services included in the monthly charge and those requiring additional charge? | <u>X</u> | <u> </u> |
| 5. Is the refund method outlined in contract? | <u> </u> | <u>X</u> |
| 6. How is information on the financial soundness of the community shared with residents? <u>No, residents make no investment.</u> | | |
| 7. What is the policy regarding residents who become insolvent? | | |
| <u>No</u> | | |
| 8. What is the resident's financial responsibility should he/she be transferred to a nursing facility? <u>To sell or move unit from lot.</u> | | |
| <u>Most homes are set up and sold to other active adults.</u> | | |
| 9. What is the length of time the living unit will be maintained in the event of temporary nursing home placement? <u>as long as rent is paid</u> | | |

INTEREST POINTS:

- | | | | |
|---------------------------------|---------------|----------------------------|------------|
| -Miles to nearest hospital | <u> </u> | -Miles to nearest grocery | <u>3</u> |
| -Miles to nearest major airport | <u> </u> | -Miles to Blue Ridge Mtns. | <u>10</u> |
| -Miles to nearest shopping mall | <u> </u> | -Miles to Atlantic Ocean | <u>235</u> |

THE CYPRESS
P.O. Box 1607
Hilton Head, SC 29925
(803) 681-6789
Lee Walton Arberg, General Manager

Beaufort County

TYPE OF FACILITY: CONTINUING CARE COMMUNITY

- Residential capacity: 500
- 250 detached houses and apartments
- 20% of residents from other states

SERVICES AVAILABLE:

- | | | |
|--|--|--|
| <u>Recreation:</u> | <u>Health-Related:</u> | |
| <input checked="" type="checkbox"/> clubhouse | <input checked="" type="checkbox"/> assisted living plan | <input checked="" type="checkbox"/> security patrol |
| <input checked="" type="checkbox"/> fishing | <input checked="" type="checkbox"/> medical center | <input checked="" type="checkbox"/> security gate |
| <input checked="" type="checkbox"/> garden plot | <input checked="" type="checkbox"/> nurse on staff | <input checked="" type="checkbox"/> transportation service |
| <input checked="" type="checkbox"/> golf on site | <input checked="" type="checkbox"/> nursing home on site | <input checked="" type="checkbox"/> homeowners' assoc. |
| <input type="checkbox"/> greenhouse | <input type="checkbox"/> nursing home privileges | <input type="checkbox"/> entrance fee/deposit |
| <input type="checkbox"/> marina | <input checked="" type="checkbox"/> 24-hour front desk | <input type="checkbox"/> donation required |
| <input checked="" type="checkbox"/> pool | | <input checked="" type="checkbox"/> fee simple ownership |
| <input checked="" type="checkbox"/> social director | <u>Other:</u> | <input checked="" type="checkbox"/> maintenance fee |
| <input type="checkbox"/> spa/hydrotherapy | <input checked="" type="checkbox"/> emergency telephone communications | <input type="checkbox"/> rental agreements available |
| <input type="checkbox"/> pool | <input checked="" type="checkbox"/> congregate meal plan | <input checked="" type="checkbox"/> income requirements |
| <input type="checkbox"/> tennis | <input type="checkbox"/> neighborhood watch program | <input checked="" type="checkbox"/> age eligibility requirements |
| <input type="checkbox"/> visitor tours | <input checked="" type="checkbox"/> handicapped accom. | |
| <input checked="" type="checkbox"/> walking path | | |
| <input checked="" type="checkbox"/> woodworking shop | | |

CONTRACTUAL INFORMATION:

- | | <u>YES</u> | <u>NO</u> |
|--|---------------|---------------|
| 1. Is there a contractual agreement? | <u>X</u> | <u> </u> |
| 2. Is the retirement community government subsidized? | <u> </u> | <u>X</u> |
| 3. Is the retirement community church related? Which denomination? _____ | <u> </u> | <u>X</u> |
| 4. Does the contract specify services included in the monthly charge and those requiring additional charge? _____ | <u>X</u> | <u> </u> |
| 5. Is the refund method outlined in contract? | <u>X</u> | <u> </u> |
| 6. How is information on the financial soundness of the community shared with residents? _____ | | |
| 7. What is the policy regarding residents who become insolvent? _____ | | |
| <hr/> | | |
| 8. What is the resident's financial responsibility should he/she be transferred to a nursing facility? _____ | | |
| <hr/> | | |
| 9. What is the length of time the living unit will be maintained in the event of temporary nursing home placement? _____ | | |

INTEREST POINTS:

- | | |
|---------------------------------------|----------------------------------|
| -Miles to nearest hospital _____ | -Miles to nearest grocery _____ |
| -Miles to nearest major airport _____ | -Miles to Blue Ridge Mtns. _____ |
| -Miles to nearest shopping mall _____ | -Miles to Atlantic Ocean _____ |

ROSE HILL PLANTATION
Highway #278
One Rose Hill Drive
Bluffton, S.C. 29910
(803) 757-2320

Beaufort County

Vickie Gray, Administrative Assistant

TYPE OF FACILITY: RETIREMENT COMMUNITY

- Residential capacity: 1700
- 1700 detached houses, duplexes, & single family lots
- 80% of residents from other states

SERVICES AVAILABLE:

- | | | |
|---|---|--|
| <p><u>Recreation:</u></p> <p><input checked="" type="checkbox"/> clubhouse</p> <p><input checked="" type="checkbox"/> fishing</p> <p><input type="checkbox"/> garden plot</p> <p><input checked="" type="checkbox"/> golf on site</p> <p><input type="checkbox"/> greenhouse</p> <p><input type="checkbox"/> marina</p> <p><input checked="" type="checkbox"/> pool</p> <p><input type="checkbox"/> social director</p> <p><input type="checkbox"/> spa/hydrotherapy pool</p> <p><input checked="" type="checkbox"/> tennis</p> <p><input type="checkbox"/> visitor tours</p> <p><input type="checkbox"/> walking path</p> <p><input type="checkbox"/> woodworking shop</p> | <p><u>Health-Related:</u></p> <p><input type="checkbox"/> assisted living plan</p> <p><input type="checkbox"/> medical center</p> <p><input type="checkbox"/> nurse on staff</p> <p><input type="checkbox"/> nursing home on site</p> <p><input type="checkbox"/> nursing home privileges</p> <p><input type="checkbox"/> 24-hour front desk</p> <p><u>Other:</u></p> <p><input type="checkbox"/> emergency telephone communications</p> <p><input type="checkbox"/> congregate meal plan</p> <p><input type="checkbox"/> neighborhood watch program</p> <p><input type="checkbox"/> handicapped accom.</p> | <p><input checked="" type="checkbox"/> security patrol</p> <p><input checked="" type="checkbox"/> security gate</p> <p><input type="checkbox"/> transportation service</p> <p><input checked="" type="checkbox"/> homeowners' assoc.</p> <p><input type="checkbox"/> entrance fee/deposit donation required</p> <p><input checked="" type="checkbox"/> fee simple ownership</p> <p><input type="checkbox"/> maintenance fee</p> <p><input type="checkbox"/> rental agreements available</p> <p><input type="checkbox"/> income requirements</p> <p><input type="checkbox"/> age eligibility requirements</p> |
|---|---|--|

CONTRACTUAL INFORMATION:

- | | <u>YES</u> | <u>NO</u> |
|---|--------------------------|-------------------------------------|
| 1. Is there a contractual agreement? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 2. Is the retirement community government subsidized? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 3. Is the retirement community church related? Which denomination? _____ | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 4. Does the contract specify services included in the monthly charge and those requiring additional charge? | <input type="checkbox"/> | <u>N/A</u> |
| 5. Is the refund method outlined in contract? | <input type="checkbox"/> | <u>N/A</u> |
| 6. How is information on the financial soundness of the community shared with residents? <u>Financial statements are available.</u> | | |
| 7. What is the policy regarding residents who become insolvent? | | |
| <u>N/A - Single family fee simple ownership</u> | | |
| 8. What is the resident's financial responsibility should he/she be transferred to a nursing facility? <u>N/A</u> | | |
| 9. What is the length of time the living unit will be maintained in the event of temporary nursing home placement? <u>N/A</u> | | |

INTEREST POINTS:

- | | | | |
|---------------------------------|-----------|----------------------------|------------|
| -Miles to nearest hospital | <u>10</u> | -Miles to nearest grocery | <u>5</u> |
| -Miles to nearest major airport | <u>25</u> | -Miles to Blue Ridge Mtns. | <u>200</u> |
| -Miles to nearest shopping mall | <u>12</u> | -Miles to Atlantic Ocean | <u>10</u> |

**THE SEABROOK
OF HILTON HEAD
300 Woodhaven Drive
Hilton Head Island, SC 29928
(803) 842-3747
John M. Fall, Exec. Director**

Beaufort County

TYPE OF FACILITY: RETIREMENT & CONTINUING CARE COMMUNITY

- Residential capacity: 240
- 186 high rise & apartments
- 35% of residents from other states

SERVICES AVAILABLE:

<u>Recreation:</u>	<u>Health-Related:</u>	
<u>X</u> clubhouse	<u> </u> assisted living plan	<u>X</u> security patrol
<u>X</u> fishing	<u>X</u> medical center	<u> </u> security gate
<u>X</u> garden plot	<u>X</u> nurse on staff	<u>X</u> transportation
<u> </u> golf on site	<u>X</u> nursing home on site	<u> </u> service
<u> </u> greenhouse	<u>X</u> nursing home privileges	<u>X</u> homeowners' assoc.
<u> </u> marina	<u> </u> 24-hour front desk	<u>X</u> entrance fee/deposit
<u>X</u> pool		<u> </u> donation required
<u>X</u> social director	<u>Other:</u>	<u>X</u> fee simple ownership
<u> </u> spa/hydrotherapy	<u>X</u> emergency telephone	<u>X</u> maintenance fee
<u> </u> pool	<u> </u> communications	<u> </u> rental agreements
<u> </u> tennis	<u>X</u> congregate meal plan	<u> </u> available
<u>X</u> visitor tours	<u> </u> neighborhood watch	<u>X</u> income requirements
<u>X</u> walking path	<u> </u> program	<u>X</u> age eligibility
<u>X</u> woodworking shop	<u> </u> handicapped accom.	<u> </u> requirements

CONTRACTUAL INFORMATION:

	<u>YES</u>	<u>NO</u>
1. Is there a contractual agreement?	<u>X</u>	<u> </u>
2. Is the retirement community government subsidized?	<u> </u>	<u>X</u>
3. Is the retirement community church related? Which denomination? _____	<u> </u>	<u>X</u>
4. Does the contract specify services included in the monthly charge and those requiring additional charge? _____	<u>X</u>	<u> </u>
5. Is the refund method outlined in contract?	<u> </u>	<u>X</u>
6. How is information on the financial soundness of the community shared with residents? <u>Residents hold a majority on Board of Trustees.</u>		
7. What is the policy regarding residents who become insolvent? <u>Internal fund to support person unable to continue to pay.</u>		
8. What is the resident's financial responsibility should he/she be transferred to a nursing facility? <u>Pay daily rate</u>		
9. What is the length of time the living unit will be maintained in the event of temporary nursing home placement? <u>Unlimited. Living unit is owned by resident who makes sole decision regarding sale.</u>		

INTEREST POINTS:

-Miles to nearest hospital	<u>6</u>	-Miles to nearest grocery	<u>1</u>
-Miles to nearest major airport	<u>6</u>	-Miles to Blue Ridge Mtns.	<u> </u>
-Miles to nearest shopping mall	<u>1</u>	-Miles to Atlantic Ocean	<u>.5</u>

**BISHOP GADSDEN
EPISCOPAL COMMUNITY
1873 Camp Road
Charleston, SC 29412
(803) 762-3000**

Charleston County

C. William Trawick, Administrator

TYPE OF FACILITY: CONTINUING CARE COMMUNITY

- Residential capacity: 70
- 70 single story congregate living
- 15% of residents from other states

SERVICES AVAILABLE:

- | | | |
|------------------------------|---|---|
| <u>Recreation:</u> | <u>Health-Related:</u> | |
| <u>clubhouse</u> | <u>X</u> assisted living plan | <u>X</u> security patrol |
| <u>fishing</u> | <u>medical center</u> | <u>security gate</u> |
| <u>X</u> garden plot | <u>X</u> nurse on staff | <u>X</u> transportation service |
| <u>golf on site</u> | <u>nursing home on site</u> | <u>homeowners' assoc.</u> |
| <u>greenhouse</u> | <u>nursing home privileges</u> | <u>X</u> entrance fee/deposit donation required |
| <u>marina</u> | <u>X</u> 24-hour front desk | <u>fee simple ownership</u> |
| <u>pool</u> | | <u>X</u> maintenance fee |
| <u>X</u> social director | <u>Other:</u> | <u>rental agreements available</u> |
| <u>spa/hydrotherapy pool</u> | <u>X</u> emergency telephone communications | <u>X</u> income requirements |
| <u>tennis</u> | <u>X</u> congregate meal plan | <u>X</u> age eligibility requirements |
| <u>X</u> visitor tours | <u>neighborhood watch program</u> | |
| <u>X</u> walking path | <u>X</u> handicapped accom. | |
| <u>woodworking shop</u> | | |

CONTRACTUAL INFORMATION:

- | | <u>YES</u> | <u>NO</u> |
|--|---------------|---------------|
| 1. Is there a contractual agreement? | <u>X</u> | <u> </u> |
| 2. Is the retirement community government subsidized? | <u> </u> | <u>X</u> |
| 3. Is the retirement community church related? Which denomination? <u>Episcopal</u> | <u>X</u> | <u> </u> |
| 4. Does the contract specify services included in the monthly charge and those requiring additional charge? <u> </u> | <u>X</u> | <u> </u> |
| 5. Is the refund method outlined in contract? | <u>X</u> | <u> </u> |
| 6. How is information on the financial soundness of the community shared with residents? <u>Offered a copy of annual CPA audit</u> | <u> </u> | <u> </u> |
| 7. What is the policy regarding residents who become insolvent?
<u>Family is responsible; if unable, we subsidize.</u> | <u> </u> | <u> </u> |
| 8. What is the resident's financial responsibility should he/she be transferred to a nursing facility? <u>Totally their responsibility</u> | <u> </u> | <u> </u> |
| 9. What is the length of time the living unit will be maintained in the event of temporary nursing home placement? <u>60-90 days</u> | <u> </u> | <u> </u> |

INTEREST POINTS:

- | | | | |
|---------------------------------|-----------|----------------------------|------------|
| -Miles to nearest hospital | <u>6</u> | -Miles to nearest grocery | <u>1</u> |
| -Miles to nearest major airport | <u>14</u> | -Miles to Blue Ridge Mtns. | <u>200</u> |
| -Miles to nearest shopping mall | <u>6</u> | -Miles to Atlantic Ocean | <u>5</u> |

BRIGHTON PLACE
 1429 Orleans Road
 Charleston, SC 29407
 (803) 722-1942

Charleston County

Jane W. Pharr, Property Manager

TYPE OF FACILITY: RETIREMENT COMMUNITY

- Residential capacity: 100
- 100 apartments
- 1% of residents from other states

SERVICES AVAILABLE:

Recreation:

- clubhouse
- fishing
- garden plot
- golf on site
- greenhouse
- marina
- pool
- social director
- spa/hydrotherapy pool
- tennis
- visitor tours
- walking path
- woodworking shop

Health-Related:

- assisted living plan
- medical center
- nurse on staff
- nursing home on site
- nursing home privileges
- 24-hour front desk

Other:

- emergency telephone communications
- congregate meal plan
- neighborhood watch program
- handicapped accom.

- security patrol
- security gate
- transportation service
- homeowners' assoc.
- entrance fee/deposit donation required
- fee simple ownership
- maintenance fee
- rental agreements available
- income requirements
- age eligibility requirements

CONTRACTUAL INFORMATION:

- | | <u>YES</u> | <u>NO</u> |
|---|-------------|-------------|
| 1. Is there a contractual agreement? | <u>X</u> | <u> </u> |
| 2. Is the retirement community government subsidized? | <u>X</u> | <u> </u> |
| 3. Is the retirement community church related? Which denomination? _____ | <u> </u> | <u>X</u> |
| 4. Does the contract specify services included in the monthly charge and those requiring additional charge? _____ | <u>X</u> | <u> </u> |
| 5. Is the refund method outlined in contract? | <u>X</u> | <u> </u> |
| 6. How is information on the financial soundness of the community shared with residents? <u>Information unavailable</u> | <u> </u> | <u> </u> |
| 7. What is the policy regarding residents who become insolvent? | | |

Subsidized housing

8. What is the resident's financial responsibility should he/she be transferred to a nursing facility? Pay rent until family removes

their belongings.

9. What is the length of time the living unit will be maintained in the event of temporary nursing home placement? As long as

resident desires.

INTEREST POINTS:

- Miles to nearest hospital
- Miles to nearest major airport
- Miles to nearest shopping mall
- Miles to nearest grocery
- Miles to Blue Ridge Mtns.
- Miles to Atlantic Ocean

**BUSKIRK ST. HOUSING
FOR THE ELDERLY
P. O. Box 10387
Charleston, SC 29622
(803) 553-6659**

Charleston County

Irene K. Alexander, Manager

TYPE OF FACILITY: RETIREMENT COMMUNITY

- Residential capacity: 20
- 20 one-story duplexes
- % of residents from other states

SERVICES AVAILABLE:

Recreation:

- clubhouse
- fishing
- garden plot
- golf on site
- greenhouse
- marina
- pool
- social director
- spa/hydrotherapy
- pool
- tennis
- visitor tours
- walking path
- woodworking shop

Health-Related:

- assisted living plan
- medical center
- nurse on staff
- nursing home on site
- nursing home privileges
- 24-hour front desk

Other:

- emergency telephone
- communications
- congregate meal plan
- neighborhood watch program
- handicapped accom.

- security patrol
- security gate
- transportation service
- homeowners' assoc.
- entrance fee/deposit donation required
- fee simple ownership
- maintenance fee
- rental agreements available
- income requirements
- age eligibility requirements

CONTRACTUAL INFORMATION:

- | | <u>YES</u> | <u>NO</u> |
|--|--------------|--------------|
| 1. Is there a contractual agreement? | <u> X </u> | <u> </u> |
| 2. Is the retirement community government subsidized? | <u> </u> | <u> X </u> |
| 3. Is the retirement community church related? Which denomination? _____ | <u> </u> | <u> </u> |
| 4. Does the contract specify services included in the monthly charge and those requiring additional charge? _____ | <u> </u> | <u> </u> |
| 5. Is the refund method outlined in contract? | <u> X </u> | <u> </u> |
| 6. How is information on the financial soundness of the community shared with residents? <u>N/A</u> | | |
| 7. What is the policy regarding residents who become insolvent?
<u>N/A</u> | | |
| 8. What is the resident's financial responsibility should he/she be transferred to a nursing facility? <u>Rent must be paid.</u> | | |
| 9. What is the length of time the living unit will be maintained in the event of temporary nursing home placement? <u>It depends upon the individual case.</u> | | |

INTEREST POINTS:

- | | | | |
|---------------------------------|---------------|----------------------------|--------------|
| -Miles to nearest hospital | <u> 10 </u> | -Miles to nearest grocery | <u> 2 </u> |
| -Miles to nearest major airport | <u> 8 </u> | -Miles to Blue Ridge Mtns. | <u> </u> |
| -Miles to nearest shopping mall | <u> 10 </u> | -Miles to Atlantic Ocean | <u> 20 </u> |

CANTERBURY HOUSE
175 Market Street, Box 5
Charleston, S.C. 29401
(803) 723-5553
Buddy Terry, Administrator

Charleston County

TYPE OF FACILITY: RETIREMENT COMMUNITY

- Residential capacity: 288
- 204 high rise
- % of residents from other states

SERVICES AVAILABLE:

- | | | |
|---|---|--|
| <p><u>Recreation:</u></p> <ul style="list-style-type: none"> <u> </u> clubhouse <u> </u> fishing <input checked="" type="checkbox"/> garden plot <u> </u> golf on site <u> </u> greenhouse <u> </u> marina <u> </u> pool <input checked="" type="checkbox"/> social director <u> </u> spa/hydrotherapy <u> </u> pool <u> </u> tennis <u> </u> visitor tours <u> </u> walking path <u> </u> woodworking shop | <p><u>Health-Related:</u></p> <ul style="list-style-type: none"> <u> </u> assisted living plan <u> </u> medical center <u> </u> nurse on staff <u> </u> nursing home on site <u> </u> nursing home privileges <input checked="" type="checkbox"/> 24-hour front desk <p><u>Other:</u></p> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> emergency telephone <u> </u> communications <u> </u> congregate meal plan <u> </u> neighborhood watch <u> </u> program <u> </u> handicapped accom. | <ul style="list-style-type: none"> <u> </u> security patrol <input checked="" type="checkbox"/> security gate <input checked="" type="checkbox"/> transportation <u> </u> service <u> </u> homeowners' assoc. <u> </u> entrance fee/deposit <u> </u> donation required <u> </u> fee simple ownership <u> </u> maintenance fee <u> </u> rental agreements <u> </u> available <u> </u> income requirements <input checked="" type="checkbox"/> age eligibility <u> </u> requirements |
|---|---|--|

CONTRACTUAL INFORMATION:

- | | <u>YES</u> | <u>NO</u> |
|--|----------------|----------------|
| 1. Is there a contractual agreement? | <u> X </u> | <u> </u> |
| 2. Is the retirement community government subsidized? | <u> </u> | <u> X </u> |
| 3. Is the retirement community church related? Which denomination? <u>Episcopal</u> | <u> X </u> | <u> </u> |
| 4. Does the contract specify services included in the monthly charge and those requiring additional charge? | <u> X </u> | <u> </u> |
| 5. Is the refund method outlined in contract? | <u> </u> | <u> X </u> |
| 6. How is information on the financial soundness of the community shared with residents? <u>Furnished to Resident Advisory Committee</u> | | |
| 7. What is the policy regarding residents who become insolvent? | | |
| 8. <u>We try to help/but continued inability means relocation.</u>
What is the resident's financial responsibility should he/she be transferred to a nursing facility? <u>Pay rent to end of month and</u>
<u>each month thereafter while recouperating.</u> | | |
| 9. What is the length of time the living unit will be maintained in the event of temporary nursing home placement? <u>not fixed</u> | | |

INTEREST POINTS:

- | | | | |
|---------------------------------|-----------------|----------------------------|------------------|
| -Miles to nearest hospital | <u> 1 </u> | -Miles to nearest grocery | <u> .5 </u> |
| -Miles to nearest major airport | <u> 12 </u> | -Miles to Blue Ridge Mtns. | <u> 300 </u> |
| -Miles to nearest shopping mall | <u> .2 </u> | -Miles to Atlantic Ocean | <u> 0 </u> |

COOPER HALL
937 Bowman Road
Mt. Pleasant, S.C. 29464
(803) 884-6949
James B. Connelly, President

Charleston County

TYPE OF FACILITY: RETIREMENT COMMUNITY
 -Residential capacity: Not determinable
 -180 apartments
 -39% of residents from other states

SERVICES AVAILABLE:

<u>Recreation:</u>	<u>Health-Related:</u>	
<input checked="" type="checkbox"/> clubhouse	<input checked="" type="checkbox"/> assisted living plan	<input checked="" type="checkbox"/> security patrol
<input type="checkbox"/> fishing	<input type="checkbox"/> medical center	<input type="checkbox"/> security gate
<input checked="" type="checkbox"/> garden plot	<input checked="" type="checkbox"/> nurse on staff	<input checked="" type="checkbox"/> transportation service
<input type="checkbox"/> golf on site	<input type="checkbox"/> nursing home on site	<input type="checkbox"/> homeowners' assoc.
<input type="checkbox"/> greenhouse	<input type="checkbox"/> nursing home privileges	<input checked="" type="checkbox"/> entrance fee/deposit donation required
<input type="checkbox"/> marina	<input checked="" type="checkbox"/> 24-hour front desk	<input type="checkbox"/> fee simple ownership
<input checked="" type="checkbox"/> pool		<input type="checkbox"/> maintenance fee
<input checked="" type="checkbox"/> social director	<u>Other:</u>	<input checked="" type="checkbox"/> rental agreements available
<input checked="" type="checkbox"/> spa/hydrotherapy pool	<input checked="" type="checkbox"/> emergency telephone communications	<input checked="" type="checkbox"/> income requirements
<input type="checkbox"/> tennis	<input checked="" type="checkbox"/> congregate meal plan	<input checked="" type="checkbox"/> age eligibility requirements
<input checked="" type="checkbox"/> visitor tours	<input type="checkbox"/> neighborhood watch program	
<input checked="" type="checkbox"/> walking path	<input type="checkbox"/> handicapped accom.	
<input checked="" type="checkbox"/> woodworking shop		

CONTRACTUAL INFORMATION:

	<u>YES</u>	<u>NO</u>
1. Is there a contractual agreement?	<u>X</u>	<u> </u>
2. Is the retirement community government subsidized?	<u> </u>	<u>X</u>
3. Is the retirement community church related? Which denomination? _____	<u> </u>	<u>X</u>
4. Does the contract specify services included in the monthly charge and those requiring additional charge?	<u>X</u>	<u> </u>
5. Is the refund method outlined in contract?	<u>X</u>	<u> </u>
6. How is information on the financial soundness of the community shared with residents? <u>Community is privately owned.</u>		
7. What is the policy regarding residents who become insolvent? <u>They must vacate.</u>		
8. What is the resident's financial responsibility should he/she be transferred to a nursing facility? <u>If temporary, monthly fee continues less an allowance for meals. If permanent, resident should vacate to avoid monthly fee if no one else occupied apartment.</u>		
9. What is the length of time the living unit will be maintained in the event of temporary nursing home placement? <u>As long as fees described in #8 are paid.</u>		

INTEREST POINTS:

-Miles to nearest hospital	<u>3/10</u>	-Miles to nearest grocery	<u>1/2</u>
-Miles to nearest major airport	<u>16</u>	-Miles to Blue Ridge Mtns.	<u> </u>
-Miles to nearest shopping mall	<u>20</u>	-Miles to Atlantic Ocean	<u>7</u>

THE ELMS OF CHARLESTON Charleston County
North Charleston, S.C. 29418
(803) 572-5154
Jim McGerry, Exec. Director

TYPE OF FACILITY: RETIREMENT COMMUNITY

- Residential capacity: 319
- 60 detached houses & villas
- 50% of residents from other states

SERVICES AVAILABLE:

Recreation:

- clubhouse
- fishing
- garden plot
- golf on site
- greenhouse
- marina
- pool
- social director
- spa/hydrotherapy pool
- tennis
- visitor tours
- walking path
- woodworking shop

Health-Related:

- assisted living plan
- medical center
- nurse on staff
- nursing home on site
- nursing home privileges
- 24-hour front desk

Other:

- emergency telephone communications
- congregate meal plan
- neighborhood watch program
- handicapped accom.

- security patrol
- security gate
- transportation service
- homeowners' assoc. entrance fee/deposit donation required
- fee simple ownership
- maintenance fee
- rental agreements available
- income requirements
- age eligibility requirements

CONTRACTUAL INFORMATION:

- | | <u>YES</u> | <u>NO</u> |
|---|---------------|---------------|
| 1. Is there a contractual agreement? | <u>X</u> | <u> </u> |
| 2. Is the retirement community government subsidized? | <u>X</u> | <u> </u> |
| 3. Is the retirement community church related? Which denomination? _____ | <u> </u> | <u>X</u> |
| 4. Does the contract specify services included in the monthly charge and those requiring additional charge? | <u>N/A</u> | <u> </u> |
| 5. Is the refund method outlined in contract? | <u>N/A</u> | <u> </u> |
| 6. How is information on the financial soundness of the community shared with residents? <u>The books of the Association are open for inspection by members of the association.</u> | <u> </u> | <u> </u> |
| 7. What is the policy regarding residents who become insolvent? | | |
| <u>N/A</u> | <u> </u> | <u> </u> |
| 8. What is the resident's financial responsibility should he/she be transferred to a nursing facility? <u>N/A</u> | <u> </u> | <u> </u> |
| 9. What is the length of time the living unit will be maintained in the event of temporary nursing home placement? <u>N/A</u> | | |

INTEREST POINTS:

- Miles to nearest hospital .5 -Miles to nearest grocery 1.5
- Miles to nearest major airport 10 -Miles to Blue Ridge Mtns. 260
- Miles to nearest shopping mall 3 -Miles to Atlantic Ocean 35

THE FRANKE HOME
261 Calhoun Street
Charleston, SC 29401
(803) 577-4041
George Keil or Janet Cox

Charleston County

TYPE OF FACILITY: CONTINUING CARE COMMUNITY

- Residential capacity: 77
- 77 individual rooms or shared rooms
- % of residents from other states

SERVICES AVAILABLE:

Recreation:

- clubhouse
- fishing
- garden plot
- golf on site
- greenhouse
- marina
- pool
- X social director
- spa/hydrotherapy
- pool
- tennis
- visitor tours
- walking path
- woodworking shop

Health-Related:

- assisted living plan
- medical center
- X nurse on staff
- nursing home on site
- nursing home privileges
- 24-hour front desk

Other:

- emergency telephone
- communications
- congregate meal plan
- neighborhood watch
- program
- handicapped accom.

- security patrol
- security gate
- transportation
- service
- homeowners' assoc.
- X entrance fee/deposit
- donation required
- fee simple ownership
- maintenance fee
- rental agreements
- available
- income requirements
- age eligibility
- requirements

CONTRACTUAL INFORMATION:

- | | <u>YES</u> | <u>NO</u> |
|--|------------|------------|
| 1. Is there a contractual agreement? | <u>X</u> | <u> </u> |
| 2. Is the retirement community government subsidized? | <u> </u> | <u>X</u> |
| 3. Is the retirement community church related? Which denomination? <u>Lutheran</u> | <u>X</u> | <u> </u> |
| 4. Does the contract specify services included in the monthly charge and those requiring additional charge? <u> </u> | <u> </u> | <u> </u> |
| 5. Is the refund method outlined in contract? | <u>X</u> | <u> </u> |
| 6. How is information on the financial soundness of the community shared with residents? <u>n/a</u> | <u> </u> | <u> </u> |
| 7. What is the policy regarding residents who become insolvent? | | |

Residents have been transferred before they have become insolvent.

8. What is the resident's financial responsibility should he/she be transferred to a nursing facility? n/a

9. What is the length of time the living unit will be maintained in the event of temporary nursing home placement? Living unit is maintained as long as resident or family pays for it.

INTEREST POINTS:

- Miles to nearest hospital .5 -Miles to nearest grocery 2
- Miles to nearest major airport 10 -Miles to Blue Ridge Mtns.
- Miles to nearest shopping mall 5 -Miles to Atlantic Ocean

**JOHN'S ISLAND
COMMUNITY DEVELOPMENT FUND Charleston County
3624 Manpank Highway
John's Island, S.C. 29455
(803) 559-3359
Maggie M. McGill, Housing Director**

TYPE OF FACILITY: RETIREMENT COMMUNITY

- Residential capacity: 188
- 88 apartments
- 02% of residents from other states

SERVICES AVAILABLE:

- | | | |
|--|--|--|
| <u>Recreation:</u> | <u>Health-Related:</u> | |
| <input type="checkbox"/> clubhouse | <input type="checkbox"/> assisted living plan | <input checked="" type="checkbox"/> security patrol |
| <input type="checkbox"/> fishing | <input checked="" type="checkbox"/> medical center | <input type="checkbox"/> security gate |
| <input type="checkbox"/> garden plot | <input type="checkbox"/> nurse on staff | <input type="checkbox"/> transportation service |
| <input type="checkbox"/> golf on site | <input type="checkbox"/> nursing home on site | <input type="checkbox"/> homeowners' assoc. |
| <input type="checkbox"/> greenhouse | <input checked="" type="checkbox"/> nursing home privileges | <input checked="" type="checkbox"/> entrance fee/deposit donation required |
| <input type="checkbox"/> marina | <input type="checkbox"/> 24-hour front desk | <input type="checkbox"/> fee simple ownership |
| <input type="checkbox"/> pool | | <input type="checkbox"/> maintenance fee |
| <input type="checkbox"/> social director | <u>Other:</u> | <input checked="" type="checkbox"/> rental agreements available |
| <input type="checkbox"/> spa/hydrotherapy pool | <input checked="" type="checkbox"/> emergency telephone communications | <input checked="" type="checkbox"/> income requirements |
| <input type="checkbox"/> tennis | <input checked="" type="checkbox"/> congregate meal plan | <input checked="" type="checkbox"/> age eligibility requirements |
| <input type="checkbox"/> visitor tours | <input type="checkbox"/> neighborhood watch program | |
| <input type="checkbox"/> walking path | | |
| <input type="checkbox"/> woodworking shop | <input checked="" type="checkbox"/> handicapped accom. | |

CONTRACTUAL INFORMATION:

- | | <u>YES</u> | <u>NO</u> |
|--|------------|-----------|
| 1. Is there a contractual agreement? | <u>X</u> | _____ |
| 2. Is the retirement community government subsidized? | <u>X</u> | _____ |
| 3. Is the retirement community church related? Which denomination? _____ | _____ | <u>X</u> |
| 4. Does the contract specify services included in the monthly charge and those requiring additional charge? | <u>X</u> | _____ |
| 5. Is the refund method outlined in contract? | <u>X</u> | _____ |
| 6. How is information on the financial soundness of the community shared with residents? <u>through Tenant Council</u> | _____ | _____ |
| 7. What is the policy regarding residents who become insolvent? | _____ | _____ |

- With proof, residents will received full subsidy.
8. What is the resident's financial responsibility should he/she be transferred to a nursing facility? Family members assigned shall
- remove resident's property and return units to us.
9. What is the length of time the living unit will be maintained in the event of temporary nursing home placement? one month

INTEREST POINTS:

- | | | | |
|---------------------------------|-----------|----------------------------|------------|
| -Miles to nearest hospital | <u>13</u> | -Miles to nearest grocery | <u>2</u> |
| -Miles to nearest major airport | <u>20</u> | -Miles to Blue Ridge Mtns. | <u>300</u> |
| -Miles to nearest shopping mall | <u>9</u> | -Miles to Atlantic Ocean | <u>13</u> |

JOSEPH FLOYD MANOR
2106 Mt. Pleasant St.
Charleston, SC 29403
(803) 722-1942

Charleston County

Jane W. Pharr, Property Manager

TYPE OF FACILITY: RETIREMENT COMMUNITY

- Residential capacity: 156
- 156 high rise
- 1% of residents from other states

SERVICES AVAILABLE:

Recreation:

- clubhouse
- fishing
- garden plot
- golf on site
- greenhouse
- marina
- pool
- social director
- spa/hydrotherapy pool
- tennis
- visitor tours
- walking path
- woodworking shop

Health-Related:

- assisted living plan
- medical center
- nurse on staff
- nursing home on site
- nursing home privileges
- 24-hour front desk

Other:

- emergency telephone communications
- congregate meal plan
- neighborhood watch program
- handicapped accom.

- security patrol
- security gate
- transportation service
- homeowners' assoc.
- entrance fee/deposit donation required
- fee simple ownership
- maintenance fee
- rental agreements available
- income requirements
- age eligibility requirements

CONTRACTUAL INFORMATION:

- | | <u>YES</u> | <u>NO</u> |
|---|------------|-----------|
| 1. Is there a contractual agreement? | <u>X</u> | _____ |
| 2. Is the retirement community government subsidized? | <u>X</u> | _____ |
| 3. Is the retirement community church related? Which denomination? _____ | _____ | <u>X</u> |
| 4. Does the contract specify services included in the monthly charge and those requiring additional charge? _____ | <u>X</u> | _____ |
| 5. Is the refund method outlined in contract? | <u>X</u> | _____ |
| 6. How is information on the financial soundness of the community shared with residents? <u>Information is unavailable.</u> | _____ | _____ |
| 7. What is the policy regarding residents who become insolvent? | _____ | _____ |

Subsidized housing

8. What is the resident's financial responsibility should he/she be transferred to a nursing facility? Pay rent until family removes their belongings.
9. What is the length of time the living unit will be maintained in the event of temporary nursing home placement? As long as resident desires

INTEREST POINTS:

- Miles to nearest hospital _____
- Miles to nearest major airport _____
- Miles to nearest shopping mall _____
- Miles to nearest grocery _____
- Miles to Blue Ridge Mtns. _____
- Miles to Atlantic Ocean _____

THE SHERMAN HOUSE
1635 Wallenberg Blvd.
Charleston, SC 29407
(803) 763-2242
Faye R. Glasm, Manager

Charleston County

TYPE OF FACILITY: RETIREMENT & CONTINUING CARE COMMUNITY

- Residential capacity: 56
- 9 apartments
- 0% of residents from other states

SERVICES AVAILABLE:

Recreation:

- clubhouse
- fishing
- garden plot
- golf on site
- greenhouse
- marina
- pool
- social director
- spa/hydrotherapy pool
- tennis
- visitor tours
- walking path
- woodworking shop

Health-Related:

- assisted living plan
- medical center
- nurse on staff
- nursing home on site
- nursing home privileges
- 24-hour front desk

Other:

- emergency telephone communications
- congregate meal plan
- neighborhood watch program
- handicapped accom.

- security patrol
- security gate
- transportation service
- homeowners' assoc.
- entrance fee/deposit donation required
- fee simple ownership
- maintenance fee
- rental agreements available
- income requirements
- age eligibility requirements

CONTRACTUAL INFORMATION:

- | | <u>YES</u> | <u>NO</u> |
|---|------------|-----------|
| 1. Is there a contractual agreement? | <u>X</u> | _____ |
| 2. Is the retirement community government subsidized? | <u>X</u> | _____ |
| 3. Is the retirement community church related? Which denomination? _____ | _____ | <u>X</u> |
| 4. Does the contract specify services included in the monthly charge and those requiring additional charge? _____ | <u>X</u> | _____ |
| 5. Is the refund method outlined in contract? | <u>X</u> | _____ |
| 6. How is information on the financial soundness of the community shared with residents? <u>N/A</u> | _____ | _____ |
| 7. What is the policy regarding residents who become insolvent? | | |

Policy with a period of time to pay

8. What is the resident's financial responsibility should he/she be transferred to a nursing facility? Security deposit returned

with interest minus repair cost if necessary

9. What is the length of time the living unit will be maintained in the event of temporary nursing home placement? Family is

permitted to maintain unit for 2 months

INTEREST POINTS:

- Miles to nearest hospital _____ -Miles to nearest grocery _____
- Miles to nearest major airport _____ -Miles to Blue Ridge Mtns. _____
- Miles to nearest shopping mall _____ -Miles to Atlantic Ocean _____

SIGFIELD GOLF RESORT

Clarendon County

Hwy. 14-37

P.O. Box 578

Summerton, SC 29148

(803) 478-7000

Harold A. Sigmon/Debby Sigmon, Exec. Director

TYPE OF FACILITY: RETIREMENT COMMUNITY-Residential capacity: 75-75 villas, lots available for development-20% of residents from other states**SERVICES AVAILABLE:**Recreation: clubhouse fishing garden plot golf on site greenhouse marina pool social director spa/hydrotherapy pool tennis visitor tours walking path woodworking shopHealth-Related: assisted living plan medical center nurse on staff nursing home on site nursing home privileges 24-hour front deskOther: emergency telephone communications congregate meal plan neighborhood watch program handicapped accom. security patrol security gate transportation service homeowners' assoc. entrance fee/deposit donation required fee simple ownership maintenance fee rental agreements available income requirements age eligibility requirements**CONTRACTUAL INFORMATION:**

- | | <u>YES</u> | <u>NO</u> |
|---|--------------------------|-------------------------------------|
| 1. Is there a contractual agreement? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 2. Is the retirement community government subsidized? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 3. Is the retirement community church related? Which denomination? _____ | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 4. Does the contract specify services included in the monthly charge and those requiring additional charge? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 5. Is the refund method outlined in contract? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 6. How is information on the financial soundness of the community shared with residents? <u>N/A</u> | | |
| 7. What is the policy regarding residents who become insolvent?
<u>N/A</u> | | |
| 8. What is the resident's financial responsibility should he/she be transferred to a nursing facility? <u>N/A</u> | | |
| 9. What is the length of time the living unit will be maintained in the event of temporary nursing home placement? <u>N/A</u> | | |

INTEREST POINTS:

-Miles to nearest hospital	<u>15</u>	-Miles to nearest grocery	<u>7</u>
-Miles to nearest major airport	<u>60</u>	-Miles to Blue Ridge Mtns.	<u>200</u>
-Miles to nearest shopping mall	<u>33</u>	-Miles to Atlantic Ocean	<u>70</u>

BETHEA BAPTIST HOME **Darlington County**
Highway 52
P.O Box 4000
Darlington, S.C. 29532
(803) 393-2867
Horace Hawes, Jr., Exec. Director

TYPE OF FACILITY: RETIREMENT & CONTINUING CARE COMMUNITY

- Residential capacity: 150
- 150 detached houses, apartments, duplexes, & dormitory
- 0% of residents from other states

SERVICES AVAILABLE:

Recreation:

- clubhouse
- fishing
- garden plot
- golf on site
- greenhouse
- marina
- pool
- social director
- spa/hydrotherapy
- pool
- tennis
- visitor tours
- walking path
- woodworking shop

Health-Related:

- assisted living plan
- medical center
- nurse on staff
- nursing home on site
- nursing home privileges
- 24-hour front desk

Other:

- emergency telephone
- communications
- congregate meal plan
- neighborhood watch program
- handicapped accom.

- security patrol
- security gate
- transportation service
- homeowners' assoc.
- entrance fee/deposit donation required
- fee simple ownership
- maintenance fee
- rental agreements available
- income requirements
- age eligibility requirements

CONTRACTUAL INFORMATION:

- | | <u>YES</u> | <u>NO</u> |
|---|------------|------------|
| 1. Is there a contractual agreement? | <u>X</u> | _____ |
| 2. Is the retirement community government subsidized? | _____ | <u>X</u> |
| 3. Is the retirement community church related? Which denomination? <u>Baptist</u> | <u>X</u> | _____ |
| 4. Does the contract specify services included in the monthly charge and those requiring additional charge? | <u>X</u> | _____ |
| 5. Is the refund method outlined in contract? | <u>n/a</u> | <u>n/a</u> |
| 6. How is information on the financial soundness of the community shared with residents? <u>Periodically and annual audit</u> | | |
| 7. What is the policy regarding residents who become insolvent? | | |

Subsidized by S.C. Baptist Convention at request of Trustees

8. What is the resident's financial responsibility should he/she be transferred to a nursing facility? Same as in residential unit, though cost increases
9. What is the length of time the living unit will be maintained in the event of temporary nursing home placement? _____

Varies with individual needs & resources

INTEREST POINTS:

- Miles to nearest hospital 5
- Miles to nearest major airport 8
- Miles to nearest shopping mall 5
- Miles to nearest grocery 5
- Miles to Blue Ridge Mtns. 160
- Miles to Atlantic Ocean 60

PINE RIDGE ELDERLY HOUSING **Summerville County**
600 Greenwave Blvd.
Summerville, SC 29483
(803) 875-1519
Sandra W. Hart, Manager

TYPE OF FACILITY: RETIREMENT COMMUNITY

- Residential capacity: 150
- 74 apartments
- % of residents from other states

SERVICES AVAILABLE:

- | | | |
|--|--|--|
| <u>Recreation:</u> | <u>Health-Related:</u> | |
| <input checked="" type="checkbox"/> clubhouse | <input type="checkbox"/> assisted living plan | <input type="checkbox"/> security patrol |
| <input type="checkbox"/> fishing | <input type="checkbox"/> medical center | <input type="checkbox"/> security gate |
| <input type="checkbox"/> garden plot | <input type="checkbox"/> nurse on staff | <input checked="" type="checkbox"/> transportation service |
| <input type="checkbox"/> golf on site | <input type="checkbox"/> nursing home on site | <input type="checkbox"/> homeowners' assoc. |
| <input type="checkbox"/> greenhouse | <input type="checkbox"/> nursing home privileges | <input checked="" type="checkbox"/> entrance fee/deposit |
| <input type="checkbox"/> marina | <input type="checkbox"/> 24-hour front desk | <input type="checkbox"/> donation required |
| <input type="checkbox"/> pool | <input checked="" type="checkbox"/> Emergency Call System | <input type="checkbox"/> fee simple ownership |
| <input type="checkbox"/> social director | <u>Other:</u> | <input type="checkbox"/> maintenance fee |
| <input type="checkbox"/> spa/hydrotherapy | <input type="checkbox"/> emergency telephone | <input checked="" type="checkbox"/> rental agreements available |
| <input type="checkbox"/> pool | <input type="checkbox"/> communications | <input checked="" type="checkbox"/> income requirements |
| <input type="checkbox"/> tennis | <input checked="" type="checkbox"/> congregate meal plan | <input checked="" type="checkbox"/> age eligibility requirements |
| <input type="checkbox"/> visitor tours | <input checked="" type="checkbox"/> neighborhood watch program | |
| <input checked="" type="checkbox"/> walking path | <input type="checkbox"/> handicapped accom. | |
| <input type="checkbox"/> woodworking shop | | |

CONTRACTUAL INFORMATION:

- | | <u>YES</u> | <u>NO</u> |
|---|------------|-----------|
| 1. Is there a contractual agreement? | <u>X</u> | <u> </u> |
| 2. Is the retirement community government subsidized? | <u>X</u> | <u> </u> |
| 3. Is the retirement community church related? Which denomination?
<u>Seventh Day Adventist</u> | <u>X</u> | <u> </u> |
| 4. Does the contract specify services included in the monthly charge and those requiring additional charge? | <u>X</u> | <u> </u> |
| 5. Is the refund method outlined in contract? | <u>X</u> | <u> </u> |
| 6. How is information on the financial soundness of the community shared with residents? | | |
| 7. What is the policy regarding residents who become insolvent?
<u>Since we are a HUD Subsidized Housing Complex, the rent is figured by a percentage of their income. If their income decreased, so would their rent.</u> | | |
| 8. What is the resident's financial responsibility should he/she be transferred to a nursing facility?
<u>They are responsible for any unpaid rent through the move out date and they are responsible for any cleaning charges or damages done to their apartment.</u> | | |
| 9. What is the length of time the living unit will be maintained in the event of temporary nursing home placement?
<u>We try to work with the family to hold the apartment for the resident for a couple of months in order for the family to see if the resident is going to be able to return.</u> | | |

INTEREST POINTS:

- | | | | |
|---------------------------------|-----------|----------------------------|------------|
| -Miles to nearest hospital | <u>14</u> | -Miles to nearest grocery | <u>1/8</u> |
| -Miles to nearest major airport | <u> </u> | -Miles to Blue Ridge Mtns. | <u> </u> |
| -Miles to nearest shopping mall | <u>20</u> | -Miles to Atlantic Ocean | <u> </u> |

**PRESBYTERIAN HOME
OF S.C. - SUMMERVILLE
CMR Box 140
Summerville, SC 29483
(803) 873-8726**

Dorchester County

TYPE OF FACILITY: RETIREMENT CONTINUING CARE COMMUNITY

- Residential capacity: 325
- 244 apartments, duplexes, cottages,
residential rooms, & nursing facility
- % of residents from other states

SERVICES AVAILABLE:

- | | | |
|----------------------------|-----------------------------------|--------------------------------|
| <u>Recreation:</u> | <u>Health-Related:</u> | |
| <u> </u> clubhouse | <u> </u> assisted living plan | <u>X</u> security patrol |
| <u> </u> fishing | <u> </u> medical center | <u> </u> security gate |
| <u>X</u> garden plot | <u> </u> nurse on staff | <u>X</u> transportation |
| <u> </u> golf on site | <u>X</u> nursing home on site | <u> </u> service |
| <u> </u> greenhouse | <u> </u> nursing home privileges | <u> </u> homeowners' assoc. |
| <u> </u> marina | <u> </u> 24-hour front desk | <u> </u> entrance fee/deposit |
| <u> </u> pool | | <u> </u> donation required |
| <u>X</u> social director | <u>Other:</u> | <u> </u> fee simple ownership |
| <u> </u> spa/hydrotherapy | <u> </u> emergency telephone | <u> </u> maintenance fee |
| <u> </u> pool | <u> </u> communications | <u>X</u> rental agreements |
| <u> </u> tennis | <u>X</u> congregate meal plan | <u> </u> available |
| <u> </u> visitor tours | <u> </u> neighborhood watch | <u> </u> income requirements |
| <u> </u> walking path | <u> </u> program | <u>X</u> age eligibility |
| <u> </u> woodworking shop | <u>X</u> handicapped accom. | <u> </u> requirements |

CONTRACTUAL INFORMATION:

- | | <u>YES</u> | <u>NO</u> |
|--|--------------|--------------|
| 1. Is there a contractual agreement? | <u> X </u> | <u> </u> |
| 2. Is the retirement community government subsidized? | <u> </u> | <u> X </u> |
| 3. Is the retirement community church related? Which denomination? <u>Presbyterian</u> | <u> X </u> | <u> </u> |
| 4. Does the contract specify services included in the monthly charge and those requiring additional charge? <u> </u> | <u> X </u> | <u> </u> |
| 5. Is the refund method outlined in contract? | <u> X </u> | <u> </u> |
| 6. How is information on the financial soundness of the community shared with residents? <u>Annual audit available at Corporate Office</u> | | |
| 7. What is the policy regarding residents who become insolvent? | | |

By action of Committee on Board of Trustees financial aid is granted for those eligible. Financial aid comes from Churches and endowments.

- 8. What is the resident's financial responsibility should he/she be transferred to a nursing facility? Additional charges are imposed as stated in correct.
- 9. What is the length of time the living unit will be maintained in the event of temporary nursing home placement? All living units are maintained for residents in the event of temporary nursing home placement.

INTEREST POINTS:

- Miles to nearest hospital -Miles to nearest grocery
- Miles to nearest major airport -Miles to Blue Ridge Mtns.
- Miles to nearest shopping mall -Miles to Atlantic Ocean

THE CAROLINIAN
718 South Dargan Street
Florence, SC 29501
(803) 665-9314
Margaret Rice, Administrator

Florence County

TYPE OF FACILITY: RETIREMENT & CONTINUING CARE COMMUNITY

- Residential capacity: 160
- 160 apartments
- 15% of residents from other states

SERVICES AVAILABLE:

- | | | |
|---|--|--|
| <u>Recreation:</u> | <u>Health-Related:</u> | |
| <input checked="" type="checkbox"/> clubhouse | <input checked="" type="checkbox"/> assisted living plan | <input checked="" type="checkbox"/> security patrol |
| <input type="checkbox"/> fishing | <input type="checkbox"/> medical center | <input type="checkbox"/> security gate |
| <input type="checkbox"/> garden plot | <input type="checkbox"/> nurse on staff | <input checked="" type="checkbox"/> transportation service |
| <input type="checkbox"/> golf on site | <input type="checkbox"/> nursing home on site | <input type="checkbox"/> homeowners' assoc. |
| <input type="checkbox"/> greenhouse | <input type="checkbox"/> nursing home privileges | <input type="checkbox"/> entrance fee/deposit |
| <input type="checkbox"/> marina | <input checked="" type="checkbox"/> 24-hour front desk | <input type="checkbox"/> donation required |
| <input type="checkbox"/> pool | | <input type="checkbox"/> fee simple ownership |
| <input checked="" type="checkbox"/> social director | <u>Other:</u> | <input type="checkbox"/> maintenance fee |
| <input type="checkbox"/> spa/hydrotherapy | <input checked="" type="checkbox"/> emergency telephone communications | <input checked="" type="checkbox"/> rental agreements available |
| <input type="checkbox"/> pool | | <input type="checkbox"/> income requirements |
| <input type="checkbox"/> tennis | <input checked="" type="checkbox"/> congregate meal plan | <input checked="" type="checkbox"/> age eligibility requirements |
| <input checked="" type="checkbox"/> visitor tours | <input type="checkbox"/> neighborhood watch program | |
| <input checked="" type="checkbox"/> walking path | <input checked="" type="checkbox"/> handicapped accom. | |
| <input type="checkbox"/> woodworking shop | | |
| <input checked="" type="checkbox"/> ceramics workshop | | |

CONTRACTUAL INFORMATION:

- | | <u>YES</u> | <u>NO</u> |
|--|------------|------------|
| 1. Is there a contractual agreement? | _____ | <u>X</u> |
| 2. Is the retirement community government subsidized? | _____ | <u>X</u> |
| 3. Is the retirement community church related? Which denomination? <u>Congregational</u> | <u>X</u> | _____ |
| 4. Does the contract specify services included in the monthly charge and those requiring additional charge? <u>X</u> | <u>X</u> | _____ |
| 5. Is the refund method outlined in contract? | _____ | <u>n/a</u> |
| 6. How is information on the financial soundness of the community shared with residents? <u>Resident meetings</u> | _____ | _____ |
| 7. What is the policy regarding residents who become insolvent? | _____ | _____ |

- Limited assistance is available from Central Office in California
8. What is the resident's financial responsibility should he/she be transferred to a nursing facility? None
-
9. What is the length of time the living unit will be maintained in the event of temporary nursing home placement? 30 days

INTEREST POINTS:

- | | | | |
|---------------------------------|-----------|----------------------------|------------|
| -Miles to nearest hospital | <u>.2</u> | -Miles to nearest grocery | <u>.4</u> |
| -Miles to nearest major airport | <u>3</u> | -Miles to Blue Ridge Mtns. | <u>350</u> |
| -Miles to nearest shopping mall | <u>3</u> | -Miles to Atlantic Ocean | <u>45</u> |

**METHODIST MANOR OF
THE PEE DEE
Peniel Road
P.O. Box 87
Florence, SC 29503
(803) 662-3218**

Florence County

Robert C. Faulkner, Interim Director

TYPE OF FACILITY: RETIREMENT & CONTINUING CARE COMMUNITY

- Residential capacity: 110
- 110 apartments
- 1% of residents from other states
(Construction to begin August 1989)

SERVICES AVAILABLE:

Recreation:

- clubhouse
- fishing
- garden plot
- golf on site
- greenhouse
- marina
- pool
- social director
- spa/hydrotherapy pool
- tennis
- visitor tours
- walking path
- woodworking shop

Health-Related:

- assisted living plan
- medical center
- nurse on staff
- nursing home on site
- nursing home privileges
- 24-hour front desk

Other:

- emergency telephone communications
- congregate meal plan
- neighborhood watch program
- handicapped accom.

- security patrol
- security gate
- transportation service
- homeowners' assoc.
- entrance fee/deposit donation required
- fee simple ownership
- maintenance fee
- rental agreements available
- income requirements
- age eligibility requirements

CONTRACTUAL INFORMATION:

- | | <u>YES</u> | <u>NO</u> |
|---|------------|-----------|
| 1. Is there a contractual agreement? | <u>X</u> | _____ |
| 2. Is the retirement community government subsidized? | _____ | <u>X</u> |
| 3. Is the retirement community church related? Which denomination? <u>Methodist</u> | <u>X</u> | _____ |
| 4. Does the contract specify services included in the monthly charge and those requiring additional charge? | <u>X</u> | _____ |
| 5. Is the refund method outlined in contract? | <u>X</u> | _____ |
| 6. How is information on the financial soundness of the community shared with residents? _____ | | |
| 7. What is the policy regarding residents who become insolvent? _____ | | |

Discretion of the Board

- 8. What is the resident's financial responsibility should he/she be transferred to a nursing facility? Cost of nursing home care
- 9. What is the length of time the living unit will be maintained in the event of temporary nursing home placement? _____

INTEREST POINTS:

- Miles to nearest hospital _____
- Miles to nearest major airport _____
- Miles to nearest shopping mall _____
- Miles to nearest grocery _____
- Miles to Blue Ridge Mtns. _____
- Miles to Atlantic Ocean _____

McCLENAGHAN PLACE **Florence County**
500 South Dargan Street
Florence, S.C. 29501
(803) 661-3820
Anna H. Rainwater, Administrator

TYPE OF FACILITY: RETIREMENT COMMUNITY

- Residential capacity: 50
- 42 apartments
- 50% of residents from other states

SERVICES AVAILABLE:

- | | | |
|---|---|---|
| <u>Recreation:</u>
<input type="checkbox"/> clubhouse
<input type="checkbox"/> fishing
<input checked="" type="checkbox"/> garden plot
<input type="checkbox"/> golf on site
<input type="checkbox"/> greenhouse
<input type="checkbox"/> marina
<input checked="" type="checkbox"/> pool
<input checked="" type="checkbox"/> social director
<input checked="" type="checkbox"/> spa/hydrotherapy
<input type="checkbox"/> pool
<input type="checkbox"/> tennis
<input checked="" type="checkbox"/> visitor tours
<input checked="" type="checkbox"/> walking path
<input type="checkbox"/> woodworking shop | <u>Health-Related:</u>
<input type="checkbox"/> assisted living plan
<input checked="" type="checkbox"/> medical center
<input type="checkbox"/> nurse on staff
<input type="checkbox"/> nursing home on site
<input type="checkbox"/> nursing home privileges
<input checked="" type="checkbox"/> 24-hour front desk

<u>Other:</u>
<input checked="" type="checkbox"/> emergency telephone
<input type="checkbox"/> communications
<input checked="" type="checkbox"/> congregate meal plan
<input type="checkbox"/> neighborhood watch
<input type="checkbox"/> program
<input checked="" type="checkbox"/> handicapped accom. | <input checked="" type="checkbox"/> security patrol
<input type="checkbox"/> security gate
<input checked="" type="checkbox"/> transportation
service
<input type="checkbox"/> homeowners' assoc.
<input checked="" type="checkbox"/> entrance fee/deposit
donation required
<input type="checkbox"/> fee simple ownership
<input type="checkbox"/> maintenance fee
<input type="checkbox"/> rental agreements
available
<input type="checkbox"/> income requirements
<input checked="" type="checkbox"/> age eligibility
requirements |
|---|---|---|

CONTRACTUAL INFORMATION:

- | | <u>YES</u> | <u>NO</u> |
|---|------------|-----------|
| 1. Is there a contractual agreement? | <u>X</u> | _____ |
| 2. Is the retirement community government subsidized? | _____ | <u>X</u> |
| 3. Is the retirement community church related? Which denomination? _____ | _____ | <u>X</u> |
| 4. Does the contract specify services included in the monthly charge and those requiring additional charge? | <u>X</u> | _____ |
| 5. Is the refund method outlined in contract? | <u>X</u> | _____ |
| 6. How is information on the financial soundness of the community shared with residents? <u>Brochure and personally</u> | _____ | _____ |
| 7. What is the policy regarding residents who become insolvent? | _____ | _____ |

8. May be able to work with resident for a reasonable amount of time.
 What is the resident's financial responsibility should he/she be transferred to a nursing facility? Refund 80% of amount paid if moving to nursing facility permanently.
9. What is the length of time the living unit will be maintained in the event of temporary nursing home placement? As long as resident pays monthly maintenance fee.

INTEREST POINTS:

- | | | | |
|---------------------------------|-----------|----------------------------|------------|
| -Miles to nearest hospital | <u>.2</u> | -Miles to nearest grocery | <u>1</u> |
| -Miles to nearest major airport | <u>2</u> | -Miles to Blue Ridge Mtns. | <u>150</u> |
| -Miles to nearest shopping mall | <u>2</u> | -Miles to Atlantic Ocean | <u>70</u> |

**PREBYTERIAN HOME
OF S. C. - FLORENCE
2350 Lucas Street
Florence, SC 29501
(803) 665-2222**

Florence County

Walter E. Hickman, Jr., Administrator

TYPE OF FACILITY: RETIREMENT & RESIDENTIAL CARE COMMUNITY

- Residential capacity: 115
- 82 residential units & 25 nursing beds
- % of residents from other states

SERVICES AVAILABLE:

<u>Recreation:</u>	<u>Health-Related:</u>	
<u> </u> clubhouse	<u> </u> assisted living plan	<u>X</u> security patrol
<u> </u> fishing	<u> </u> medical center	<u> </u> security gate
<u> </u> garden plot	<u>X</u> nurse on staff	<u>X</u> transportation service
<u>X</u> golf on site	<u>X</u> nursing home on site	<u> </u> homeowners' assoc.
<u>X</u> greenhouse	<u> </u> nursing home privileges	<u> </u> entrance fee/deposit
<u> </u> marina	<u> </u> 24-hour front desk	<u> </u> donation required
<u> </u> pool		<u> </u> fee simple ownership
<u>X</u> social director	<u>Other:</u>	<u> </u> maintenance fee
<u> </u> spa/hydrotherapy pool	<u> </u> emergency telephone communications	<u>X</u> rental agreements available
<u> </u> tennis	<u>X</u> congregate meal plan	<u> </u> income requirements
<u>X</u> visitor tours	<u> </u> neighborhood watch program	<u>X</u> age eligibility requirements
<u> </u> walking path		
<u> </u> woodworking shop	<u>X</u> handicapped accom.	

CONTRACTUAL INFORMATION:

- | | <u>YES</u> | <u>NO</u> |
|--|------------|-----------|
| 1. Is there a contractual agreement? | <u>X</u> | <u> </u> |
| 2. Is the retirement community government subsidized? | <u> </u> | <u>X</u> |
| 3. Is the retirement community church related? Which denomination? <u>Presbyterian</u> | <u>X</u> | <u> </u> |
| 4. Does the contract specify services included in the monthly charge and those requiring additional charge? <u> </u> | <u>X</u> | <u> </u> |
| 5. Is the refund method outlined in contract? | <u>X</u> | <u> </u> |
| 6. How is information on the financial soundness of the community shared with residents? <u>Annual audit available at Corporate Office</u> | | |
| 7. What is the policy regarding residents who become insolvent? | | |

By action of Committee on Board of Trustees financial aid is granted for those eligible. Financial aid comes from Churches and endowments.

- 8. What is the resident's financial responsibility should he/she be transferred to a nursing facility? Additional charges are imposed as stated in correct.
- 9. What is the length of time the living unit will be maintained in the event of temporary nursing home placement? All living units are maintained for residents in the event of temporary nursing home placement.

INTEREST POINTS:

-Miles to nearest hospital	<u> 5 </u>	-Miles to nearest grocery	<u> 3 </u>
-Miles to nearest major airport	<u> 8 </u>	-Miles to Blue Ridge Mtns.	<u>200</u>
-Miles to nearest shopping mall	<u> 3 </u>	-Miles to Atlantic Ocean	<u> 55 </u>

GREENVILLE SUMMIT
201 West Washington Street
Greenville, SC 29601
(803) 242-6324
Margaret Hill, Resident Manager

Greenville County

TYPE OF FACILITY: RETIREMENT & CONTINUING CARE COMMUNITY

- Residential capacity: 185
- 101 high rise
- % of residents from other states

SERVICES AVAILABLE:

Recreation:

- clubhouse
- fishing
- garden plot
- golf on site
- greenhouse
- marina
- pool
- social director
- spa/hydrotherapy
- pool
- tennis
- visitor tours
- walking path
- woodworking shop

Health-Related:

- assisted living plan
- medical center
- nurse on staff
- nursing home on site
- nursing home privileges
- 24-hour front desk

Other:

- X emergency telephone
- communications
- congregate meal plan
- neighborhood watch
- program
- X handicapped accom.

- security patrol
- X security gate
- transportation
- service
- homeowners' assoc.
- X entrance fee/deposit
- donation required
- fee simple ownership
- maintenance fee
- rental agreements
- available
- X income requirements
- X age eligibility
- requirements

CONTRACTUAL INFORMATION:

- | | <u>YES</u> | <u>NO</u> |
|---|------------|-----------|
| 1. Is there a contractual agreement? | <u>X</u> | <u> </u> |
| 2. Is the retirement community government subsidized? | <u>X</u> | <u> </u> |
| 3. Is the retirement community church related? Which denomination? _____ | <u> </u> | <u>X</u> |
| 4. Does the contract specify services included in the monthly charge and those requiring additional charge? _____ | <u>X</u> | <u> </u> |
| 5. Is the refund method outlined in contract? | <u>X</u> | <u> </u> |
| 6. How is information on the financial soundness of the community shared with residents? <u>n/a</u> | | |
| 7. What is the policy regarding residents who become insolvent? | | |

- Rent based on income - all amounts affordable
8. What is the resident's financial responsibility should he/she be transferred to a nursing facility? All money due through
- move-out date
9. What is the length of time the living unit will be maintained in the event of temporary nursing home placement? Must be only
- legal residence.

INTEREST POINTS:

- Miles to nearest hospital 3 -Miles to nearest grocery 1
- Miles to nearest major airport 10 -Miles to Blue Ridge Mtns.
- Miles to nearest shopping mall 5 -Miles to Atlantic Ocean 240

HIGHLAND VALLEY
4000 Highway 25 North
Travelers Rest, S.C. 29690
(803) 836-7086
Ed Neves, Exec. Director

Greenville County

TYPE OF FACILITY: RETIREMENT & CONTINUING CARE COMMUNITY

- Residential capacity: 700
- 400 detached houses, duplexes, & 2 story condominiums
- 50% of residents from other states
 (Construction begins Spring/Summer 1989)

SERVICES AVAILABLE:

<u>Recreation:</u>	<u>Health-Related:</u>	
<u>X</u> clubhouse	<u> </u> assisted living plan	<u>X</u> security patrol
<u>X</u> fishing	<u> </u> medical center	<u>X</u> security gate
<u>X</u> garden plot	<u> </u> nurse on staff	<u>X</u> transportation service
<u>X</u> golf on site	<u>X</u> nursing home on site	<u>X</u> homeowners' assoc.
<u>X</u> greenhouse	<u> </u> nursing home privileges	<u> </u> entrance fee/deposit donation required
<u> </u> marina	<u> </u> 24-hour front desk	<u>X</u> fee simple ownership
<u>X</u> pool		<u>X</u> maintenance fee
<u>X</u> social director	<u>Other:</u>	<u> </u> rental agreements available
<u>X</u> spa/hydrotherapy pool	<u>X</u> emergency telephone communications	<u> </u> income requirements
<u>X</u> tennis	<u> </u> congregate meal plan	<u>X</u> age eligibility requirements
<u> </u> visitor tours	<u> </u> neighborhood watch program	
<u>X</u> walking path	<u> </u> handicapped accom.	
<u>X</u> woodworking shop		

CONTRACTUAL INFORMATION:

- | | <u>YES</u> | <u>NO</u> |
|--|------------|-----------|
| 1. Is there a contractual agreement? | <u>X</u> | <u> </u> |
| 2. Is the retirement community government subsidized? | <u> </u> | <u>X</u> |
| 3. Is the retirement community church related? Which denomination? | <u> </u> | <u>X</u> |
| 4. Does the contract specify services included in the monthly charge and those requiring additional charge? | <u>X</u> | <u> </u> |
| 5. Is the refund method outlined in contract? | <u>X</u> | <u> </u> |
| 6. How is information on the financial soundness of the community shared with residents? <u>Balance Sheet and Profit Loss statement will be available.</u> | | |
| 7. What is the policy regarding residents who become insolvent? <u>Residents will have to pay or can resell to find more economical arrangements.</u> | | |
| 8. What is the resident's financial responsibility should he/she be transferred to a nursing facility? <u>Will pay daily rate at that time.</u> | | |
| 9. What is the length of time the living unit will be maintained in the event of temporary nursing home placement? <u>N/A</u> | | |

INTEREST POINTS:

-Miles to nearest hospital	<u>20</u>	-Miles to nearest grocery	<u>12</u>
-Miles to nearest major airport	<u>25</u>	-Miles to Blue Ridge Mtns.	<u>0</u>
-Miles to nearest shopping mall	<u>16</u>	-Miles to Atlantic Ocean	<u>220</u>

McBEE APARTMENTS
1 Merritt Circle
Greenville, SC 29673
(803) 242-9430
Shelby N. Carter

Greenville County

TYPE OF FACILITY: RETIREMENT & CONTINUING CARE COMMUNITY

- Residential capacity: 104
- 104 apartments
- 20% of residents from other states

SERVICES AVAILABLE:

Recreation:

- clubhouse
- fishing
- garden plot
- golf on site
- greenhouse
- marina
- pool
- social director
- spa/hydrotherapy
- pool
- tennis
- visitor tours
- walking path
- woodworking shop

Health-Related:

- assisted living plan
- medical center
- nurse on staff
- nursing home on site
- nursing home privileges
- 24-hour front desk
- Other:
- emergency telephone communications
- congregate meal plan
- neighborhood watch program
- handicapped accom.

- security patrol
- security gate
- transportation service
- homeowners' assoc.
- entrance fee/deposit donation required
- fee simple ownership
- maintenance fee
- rental agreements available
- income requirements
- age eligibility requirements

CONTRACTUAL INFORMATION:

- | | <u>YES</u> | <u>NO</u> |
|---|------------|-----------|
| 1. Is there a contractual agreement? | <u>X</u> | _____ |
| 2. Is the retirement community government subsidized? | <u>X</u> | _____ |
| 3. Is the retirement community church related? Which denomination? _____ | _____ | <u>X</u> |
| 4. Does the contract specify services included in the monthly charge and those requiring additional charge? _____ | _____ | <u>X</u> |
| 5. Is the refund method outlined in contract? | <u>X</u> | _____ |
| 6. How is information on the financial soundness of the community shared with residents? <u>n/a</u> | | |
| 7. What is the policy regarding residents who become insolvent? | | |

- Rent not paid - manager evicts
8. What is the resident's financial responsibility should he/she be transferred to a nursing facility? None
-
9. What is the length of time the living unit will be maintained in the event of temporary nursing home placement? As long as rent is paid

INTEREST POINTS:

- | | | | |
|---------------------------------|-----------|----------------------------|------------|
| -Miles to nearest hospital | <u>2</u> | -Miles to nearest grocery | <u>3</u> |
| -Miles to nearest major airport | <u>10</u> | -Miles to Blue Ridge Mtns. | <u>70</u> |
| -Miles to nearest shopping mall | <u>3</u> | -Miles to Atlantic Ocean | <u>360</u> |

ROLLING GREEN VILLAGE
1 Hoke Smith Boulevard
Greenville, SC 29615
(803) 297-0558

Greenville County

TYPE OF FACILITY: RETIREMENT & CONTINUING CARE COMMUNITY

- Residential capacity: 224
- 224 duplexes
- 15% of residents from other states

SERVICES AVAILABLE:

<u>Recreation:</u>	<u>Health-Related:</u>	
<u>clubhouse</u>	<u>X assisted living plan</u>	<u>X security patrol</u>
<u>X fishing</u>	<u>medical center</u>	<u>X security gate</u>
<u>X garden plot</u>	<u>X nurse on staff</u>	<u>X transportation service</u>
<u>golf on site</u>	<u>X nursing home on site</u>	<u>X homeowners' assoc.</u>
<u>greenhouse</u>	<u>nursing home privileges</u>	<u>X entrance fee/deposit donation required</u>
<u>marina</u>	<u>X 24-hour front desk</u>	<u>X fee simple ownership</u>
<u>pool</u>		<u>X maintenance fee</u>
<u>X social director</u>	<u>Other:</u>	<u>rental agreements available</u>
<u>spa/hydrotherapy pool</u>	<u>X emergency telephone communications</u>	<u>X income requirements</u>
<u>tennis</u>	<u>X congregate meal plan</u>	<u>X age eligibility requirements</u>
<u>visitor tours</u>	<u>neighborhood watch program</u>	
<u>X walking path</u>	<u>handicapped accom.</u>	
<u>X woodworking shop</u>		

CONTRACTUAL INFORMATION:

- | | <u>YES</u> | <u>NO</u> |
|--|---------------|---------------|
| 1. Is there a contractual agreement? | <u>X</u> | <u> </u> |
| 2. Is the retirement community government subsidized? | <u> </u> | <u>X</u> |
| 3. Is the retirement community church related? Which denomination? <u>Baptist</u> | <u>X</u> | <u> </u> |
| 4. Does the contract specify services included in the monthly charge and those requiring additional charge? <u> </u> | <u>X</u> | <u> </u> |
| 5. Is the refund method outlined in contract? | <u>X</u> | <u> </u> |
| 6. How is information on the financial soundness of the community shared with residents? <u>Annual Financial statement</u> | | |
| 7. What is the policy regarding residents who become insolvent? | | |
| <hr/> | | |
| 8. What is the resident's financial responsibility should he/she be transferred to a nursing facility? <u>Resident is reponsible</u> | | |
| <hr/> | | |
| 9. What is the length of time the living unit will be maintained in the event of temporary nursing home placement? <u>According to arrangement</u> | | |

INTEREST POINTS:

-Miles to nearest hospital	<u>11</u>	-Miles to nearest grocery	<u>2</u>
-Miles to nearest major airport	<u>3</u>	-Miles to Blue Ridge Mtns.	<u>70</u>
-Miles to nearest shopping mall	<u>5</u>	-Miles to Atlantic Ocean	<u>350</u>

**SWANSGATE
RETIREMENT COMMUNITY
400 Swansgate Place
Greenville, S.C. 29605
(803) 233-5673
Rita Zack, Community Manager**

Greenville County

TYPE OF FACILITY: RETIREMENT COMMUNITY

- Residential capacity: 190
- 190 detached houses & apartments
- 50% of residents from other states

SERVICES AVAILABLE:

<u>Recreation:</u>	<u>Health-Related:</u>	
<input checked="" type="checkbox"/> clubhouse	<input type="checkbox"/> assisted living plan	<input type="checkbox"/> security patrol
<input type="checkbox"/> fishing	<input type="checkbox"/> medical center	<input checked="" type="checkbox"/> security gate
<input type="checkbox"/> garden plot	<input type="checkbox"/> nurse on staff	<input checked="" type="checkbox"/> transportation service
<input type="checkbox"/> golf on site	<input type="checkbox"/> nursing home on site	<input checked="" type="checkbox"/> homeowners' assoc.
<input type="checkbox"/> greenhouse	<input type="checkbox"/> nursing home privileges	<input type="checkbox"/> entrance fee/deposit donation required
<input type="checkbox"/> marina	<input type="checkbox"/> 24-hour front desk	<input checked="" type="checkbox"/> fee simple ownership
<input checked="" type="checkbox"/> pool		<input checked="" type="checkbox"/> maintenance fee
<input type="checkbox"/> social director	<u>Other:</u>	<input type="checkbox"/> rental agreements available
<input type="checkbox"/> spa/hydrotherapy pool	<input type="checkbox"/> emergency telephone communications	<input type="checkbox"/> income requirements
<input checked="" type="checkbox"/> tennis	<input type="checkbox"/> congregate meal plan	<input checked="" type="checkbox"/> age eligibility requirements
<input type="checkbox"/> visitor tours	<input type="checkbox"/> neighborhood watch program	
<input checked="" type="checkbox"/> walking path	<input type="checkbox"/> handicapped accom.	
<input type="checkbox"/> woodworking shop		

CONTRACTUAL INFORMATION:

	<u>YES</u>	<u>NO</u>
1. Is there a contractual agreement?	_____	<u>X</u>
2. Is the retirement community government subsidized?	_____	<u>X</u>
3. Is the retirement community church related? Which denomination? _____	_____	<u>X</u>
4. Does the contract specify services included in the monthly charge and those requiring additional charge?	<u>n/a</u>	<u>n/a</u>
5. Is the refund method outlined in contract?	<u>n/a</u>	<u>n/a</u>
6. How is information on the financial soundness of the community shared with residents? <u>Community manager in connection with the financial committee.</u>		
7. What is the policy regarding residents who become insolvent?		
<u>n/a</u>		
8. What is the resident's financial responsibility should he/she be transferred to a nursing facility? <u>Complete homeownership responsible for all bills.</u>		
9. What is the length of time the living unit will be maintained in the event of temporary nursing home placement? <u>n/a</u>		

INTEREST POINTS:

-Miles to nearest hospital	<u>.5</u>	-Miles to nearest grocery	<u>.5</u>
-Miles to nearest major airport	<u>10</u>	-Miles to Blue Ridge Mtns.	<u>60</u>
-Miles to nearest shopping mall	<u>5</u>	-Miles to Atlantic Ocean	<u>200</u>

THE BAYBERRY - GREENWOOD
116 Abbey Drive
Greenwood, SC 29646
(803) 223-6510
Rich Hunter, Administrator

Greenwood County

TYPE OF FACILITY: RETIREMENT COMMUNITY

- Residential capacity: 23
- 23 one story with common dining area
- % of residents from other states

SERVICES AVAILABLE:

Recreation:

- clubhouse
- fishing
- X garden plot
- golf on site
- greenhouse
- marina
- pool
- social director
- X spa/hydrotherapy pool
- tennis
- X visitor tours
- walking path
- woodworking shop

Health-Related:

- assisted living plan
- medical center
- X nurse on staff
- nursing home on site
- nursing home privileges
- X 24-hour front desk

Other:

- emergency telephone communications
- X congregate meal plan
- neighborhood watch program
- handicapped accom.

- security patrol
- security gate
- X transportation service
- homeowners' assoc.
- entrance fee/deposit donation required
- fee simple ownership
- maintenance fee
- X rental agreements available
- income requirements
- X age eligibility requirements

CONTRACTUAL INFORMATION:

- | | <u>YES</u> | <u>NO</u> |
|--|------------|-----------|
| 1. Is there a contractual agreement? | <u>X</u> | <u> </u> |
| 2. Is the retirement community government subsidized? | <u> </u> | <u>X</u> |
| 3. Is the retirement community church related? Which denomination? _____ | <u> </u> | <u>X</u> |
| 4. Does the contract specify services included in the monthly charge and those requiring additional charge? _____ | <u>X</u> | <u> </u> |
| 5. Is the refund method outlined in contract? | <u>X</u> | <u> </u> |
| 6. How is information on the financial soundness of the community shared with residents? <u>Not applicable - rental facility</u> | | |
| 7. What is the policy regarding residents who become insolvent? | | |

Details are in rental agreement.

8. What is the resident's financial responsibility should he/she be transferred to a nursing facility? Resident pays for nursing care.

9. What is the length of time the living unit will be maintained in the event of temporary nursing home placement? _____

Resident determines.

INTEREST POINTS:

- | | | | |
|---------------------------------|------------|----------------------------|------------|
| -Miles to nearest hospital | <u>2.5</u> | -Miles to nearest grocery | <u>2</u> |
| -Miles to nearest major airport | <u>30</u> | -Miles to Blue Ridge Mtns. | <u>120</u> |
| -Miles to nearest shopping mall | <u>2</u> | -Miles to Atlantic Ocean | <u>230</u> |

GREENWOOD METHODIST HOME
 1110 Marshall Road
 Greenwood, SC 29646
 P.O. Box 1203
 Greenwood, S.C. 29648
 (803) 227-1220

Greenwood County

Dr. Ted R. Morton, Jr., Exec. Director

TYPE OF FACILITY: RETIREMENT & CONTINUING CARE COMMUNITY

- Residential capacity: 100
- 52 detached houses, apartments, & duplexes
- 50 suites in Congregate facility (opening October 1989)
- 32% of residents from other states

SERVICES AVAILABLE:

Recreation:

- clubhouse
- fishing
- garden plot
- golf on site
- greenhouse
- marina
- pool
- social director
- spa/hydrotherapy pool
- tennis
- visitor tours
- walking path
- woodworking shop

Health-Related:

- assisted living plan
- medical center
- nurse on staff
- nursing home on site
- nursing home privileges
- 24-hour front desk

Other:

- emergency telephone communications
- congregate meal plan
- neighborhood watch program
- handicapped accom.

- security patrol
- security gate
- transportation service
- homeowners' assoc.
- entrance fee/deposit donation required
- fee simple ownership
- maintenance fee
- rental agreements available
- income requirements
- age eligibility requirements

CONTRACTUAL INFORMATION:

- | | <u>YES</u> | <u>NO</u> |
|---|---------------|---------------|
| 1. Is there a contractual agreement? | <u>X</u> | <u> </u> |
| 2. Is the retirement community government subsidized? | <u> </u> | <u>X</u> |
| 3. Is the retirement community church related? Which denomination? <u>United Methodist</u> | <u>X</u> | <u> </u> |
| 4. Does the contract specify services included in the monthly charge and those requiring additional charge? | <u>X</u> | <u> </u> |
| 5. Is the refund method outlined in contract? | <u>X</u> | <u> </u> |
| 6. How is information on the financial soundness of the community shared with residents? <u>Disclosure of financial data upon request</u> | | |
| 7. What is the policy regarding residents who become insolvent? | | |

Provision will be made for their continued residency and care.

8. What is the resident's financial responsibility should he/she be transferred to a nursing facility? To pay the applicable charges at the time of admission if financially able.
9. What is the length of time the living unit will be maintained in the event of temporary nursing home placement? As long as the maintenance fee is paid.

INTEREST POINTS:

- Miles to nearest hospital 2
- Miles to nearest major airport 60
- Miles to nearest shopping mall 5
- Miles to nearest grocery 2
- Miles to Blue Ridge Mtns. 60/70
- Miles to Atlantic Ocean 240

BEACHWOOD AT THE HERITAGE
4300 S. Kings Highway
P.O. Box 3790
Myrtle Beach, S.C. 29578
(803) 238-8350
Donald E. Perry, President

Horry County

TYPE OF FACILITY: RETIREMENT COMMUNITY

- Residential capacity: 68
- 68 manufactured homes & double wide mobiles
- 99% of residents from other states

SERVICES AVAILABLE:

- | | | |
|---|---|---|
| <u>Recreation:</u> | <u>Health-Related:</u> | |
| <input checked="" type="checkbox"/> clubhouse | <input type="checkbox"/> assisted living plan | <input type="checkbox"/> security patrol |
| <input checked="" type="checkbox"/> fishing | <input type="checkbox"/> medical center | <input checked="" type="checkbox"/> security gate |
| <input type="checkbox"/> garden plot | <input type="checkbox"/> nurse on staff | <input type="checkbox"/> transportation |
| <input type="checkbox"/> golf on site | <input type="checkbox"/> nursing home on site | <input type="checkbox"/> service |
| <input type="checkbox"/> greenhouse | <input type="checkbox"/> nursing home privileges | <input type="checkbox"/> homeowners' assoc. |
| <input type="checkbox"/> marina | <input type="checkbox"/> 24-hour front desk | <input type="checkbox"/> entrance fee/deposit |
| <input checked="" type="checkbox"/> pool | | <input type="checkbox"/> donation required |
| <input type="checkbox"/> social director | <u>Other:</u> | <input type="checkbox"/> fee simple ownership |
| <input type="checkbox"/> spa/hydrotherapy | <input checked="" type="checkbox"/> emergency telephone | <input type="checkbox"/> maintenance fee |
| <input type="checkbox"/> pool | <input type="checkbox"/> communications | <input checked="" type="checkbox"/> rental agreements |
| <input type="checkbox"/> tennis | <input type="checkbox"/> congregate meal plan | <input type="checkbox"/> available |
| <input checked="" type="checkbox"/> visitor tours | <input type="checkbox"/> neighborhood watch | <input type="checkbox"/> income requirements |
| <input type="checkbox"/> walking path | <input type="checkbox"/> program | <input checked="" type="checkbox"/> age eligibility |
| <input type="checkbox"/> woodworking shop | <input type="checkbox"/> handicapped accom. | <input type="checkbox"/> requirements |

CONTRACTUAL INFORMATION:

- | | <u>YES</u> | <u>NO</u> |
|---|------------|-----------|
| 1. Is there a contractual agreement? | _____ | <u>X</u> |
| 2. Is the retirement community government subsidized? | _____ | <u>X</u> |
| 3. Is the retirement community church related? Which denomination? _____ | _____ | <u>X</u> |
| 4. Does the contract specify services included in the monthly charge and those requiring additional charge? | _____ | <u>X</u> |
| 5. Is the refund method outlined in contract? | _____ | <u>X</u> |
| 6. How is information on the financial soundness of the community shared with residents? <u>N/A</u> | | |
| 7. What is the policy regarding residents who become insolvent? | | |
| <u>N/A</u> | | |
| 8. What is the resident's financial responsibility should he/she be transferred to a nursing facility? <u>N/A</u> | | |
| 9. What is the length of time the living unit will be maintained in the event of temporary nursing home placement? <u>N/A</u> | | |

INTEREST POINTS:

- | | | | |
|---------------------------------|-----------|----------------------------|------------|
| -Miles to nearest hospital | _____ | -Miles to nearest grocery | <u>.2</u> |
| -Miles to nearest major airport | <u>2</u> | -Miles to Blue Ridge Mtns. | <u>500</u> |
| -Miles to nearest shopping mall | <u>.2</u> | -Miles to Atlantic Ocean | <u>.2</u> |

COLONIAL CHARTER
P. O. Box 4299
N. Myrtle Beach, SC 29597
(803) 399-4445
John Laymon, Broker in Charge

Horry County

TYPE OF FACILITY: RETIREMENT COMMUNITY

- Residential capacity: 900
- 900 detached houses, villas, patio homes
- 80% of residents from other states

SERVICES AVAILABLE:

- | | | |
|---|--|---|
| <u>Recreation:</u> | <u>Health-Related:</u> | |
| <input checked="" type="checkbox"/> clubhouse | <input type="checkbox"/> assisted living plan | <input type="checkbox"/> security patrol |
| <input type="checkbox"/> fishing | <input type="checkbox"/> medical center | <input checked="" type="checkbox"/> security gate |
| <input type="checkbox"/> garden plot | <input type="checkbox"/> nurse on staff | <input type="checkbox"/> transportation service |
| <input checked="" type="checkbox"/> golf on site | <input type="checkbox"/> nursing home on site | <input checked="" type="checkbox"/> homeowners' assoc. |
| <input type="checkbox"/> greenhouse | <input type="checkbox"/> nursing home privileges | <input type="checkbox"/> entrance fee/deposit donation required |
| <input type="checkbox"/> marina | <input type="checkbox"/> 24-hour front desk | <input checked="" type="checkbox"/> fee simple ownership |
| <input checked="" type="checkbox"/> pool | | <input type="checkbox"/> maintenance fee |
| <input type="checkbox"/> social director | <u>Other:</u> | <input checked="" type="checkbox"/> rental agreements available |
| <input type="checkbox"/> spa/hydrotherapy | <input checked="" type="checkbox"/> emergency telephone communications | <input type="checkbox"/> income requirements |
| <input type="checkbox"/> pool | <input type="checkbox"/> congregate meal plan | <input type="checkbox"/> age eligibility requirements |
| <input checked="" type="checkbox"/> tennis | <input type="checkbox"/> neighborhood watch program | |
| <input checked="" type="checkbox"/> visitor tours | <input type="checkbox"/> handicapped accom. | |
| <input checked="" type="checkbox"/> walking path | | |
| <input type="checkbox"/> woodworking shop | | |

CONTRACTUAL INFORMATION:

- | | <u>YES</u> | <u>NO</u> |
|---|---------------|---------------|
| 1. Is there a contractual agreement? | <u>X</u> | <u> </u> |
| 2. Is the retirement community government subsidized? | <u> </u> | <u>X</u> |
| 3. Is the retirement community church related? Which denomination? _____ | <u> </u> | <u>X</u> |
| 4. Does the contract specify services included in the monthly charge and those requiring additional charge? _____ | <u>X</u> | <u> </u> |
| 5. Is the refund method outlined in contract? | <u>X</u> | <u> </u> |
| 6. How is information on the financial soundness of the community shared with residents? <u>Upon request</u> | | |
| 7. What is the policy regarding residents who become insolvent? | | |
| <u>N/A</u> | | |
| 8. What is the resident's financial responsibility should he/she be transferred to a nursing facility? <u>N/A</u> | | |
| <u> </u> | | |
| 9. What is the length of time the living unit will be maintained in the event of temporary nursing home placement? <u>N/A</u> | | |
| <u> </u> | | |

INTEREST POINTS:

- | | | | |
|---------------------------------|-----------|----------------------------|------------|
| -Miles to nearest hospital | <u>12</u> | -Miles to nearest grocery | <u>3</u> |
| -Miles to nearest major airport | <u>20</u> | -Miles to Blue Ridge Mtns. | <u>250</u> |
| -Miles to nearest shopping mall | <u>10</u> | -Miles to Atlantic Ocean | <u>7</u> |

COVENANT TOWERS
5001 Little River Road
Myrtle Beach, S.C. 29577
(803) 449-2484
Mack Brown, Exec. Director

Horry County

TYPE OF FACILITY: RETIREMENT & CONTINUING CARE COMMUNITY

- Residential capacity: 200
- 159 5-story mid-rise condominiums
- 50% of residents from other states

SERVICES AVAILABLE:

- | | | |
|---|--|---|
| <u>Recreation:</u> | <u>Health-Related:</u> | |
| <input checked="" type="checkbox"/> clubhouse | <input checked="" type="checkbox"/> assisted living plan | <input checked="" type="checkbox"/> security patrol |
| <input checked="" type="checkbox"/> fishing | <input checked="" type="checkbox"/> medical center | <input type="checkbox"/> security gate |
| <input checked="" type="checkbox"/> garden plot | <input checked="" type="checkbox"/> nurse on staff | <input checked="" type="checkbox"/> transportation service |
| <input type="checkbox"/> golf on site | <input checked="" type="checkbox"/> nursing home on site | <input checked="" type="checkbox"/> homeowners' assoc. entrance fee/deposit donation required |
| <input type="checkbox"/> greenhouse | <input checked="" type="checkbox"/> nursing home privileges | <input checked="" type="checkbox"/> fee simple ownership |
| <input type="checkbox"/> marina | <input checked="" type="checkbox"/> 24-hour front desk | <input checked="" type="checkbox"/> maintenance fee |
| <input checked="" type="checkbox"/> pool | | <input checked="" type="checkbox"/> rental agreements available |
| <input checked="" type="checkbox"/> social director | <u>Other:</u> | <input type="checkbox"/> income requirements |
| <input checked="" type="checkbox"/> spa/hydrotherapy pool | <input checked="" type="checkbox"/> emergency telephone communications | <input checked="" type="checkbox"/> age eligibility requirements |
| <input type="checkbox"/> tennis | <input checked="" type="checkbox"/> congregate meal plan | |
| <input checked="" type="checkbox"/> visitor tours | <input checked="" type="checkbox"/> neighborhood watch program | |
| <input checked="" type="checkbox"/> walking path | <input checked="" type="checkbox"/> handicapped accom. | |
| <input type="checkbox"/> woodworking shop | | |

CONTRACTUAL INFORMATION:

- | | YES | NO |
|--|----------|----------|
| 1. Is there a contractual agreement? | <u>X</u> | _____ |
| 2. Is the retirement community government subsidized? | _____ | <u>X</u> |
| 3. Is the retirement community church related? Which denomination? _____ | _____ | <u>X</u> |
| 4. Does the contract specify services included in the monthly charge and those requiring additional charge? | <u>X</u> | _____ |
| 5. Is the refund method outlined in contract? | <u>X</u> | _____ |
| 6. How is information on the financial soundness of the community shared with residents? <u>Profit & loss statement and balance sheet.</u> | | |
| 7. What is the policy regarding residents who become insolvent? | | |

8. Homeowners Association Board action on a "per occurrence" basis
 What is the resident's financial responsibility should he/she be transferred to a nursing facility? Pay a reduced fee on
9. condominium and per diem for other services.
 What is the length of time the living unit will be maintained in the event of temporary nursing home placement? _____

Fee simple ownership - indefinite time limit

INTEREST POINTS:

- | | | | |
|---------------------------------|----------|----------------------------|-------------|
| -Miles to nearest hospital | <u>2</u> | -Miles to nearest grocery | <u>1</u> |
| -Miles to nearest major airport | <u>8</u> | -Miles to Blue Ridge Mtns. | <u>350</u> |
| -Miles to nearest shopping mall | <u>1</u> | -Miles to Atlantic Ocean | <u>6/10</u> |

Mr. L. Richard Nixon, Exec. Vice President

TYPE OF FACILITY: RETIREMENT COMMUNITY

- Residential capacity: 1000
- 570 detached houses
- 95% of residents from other states

SERVICES AVAILABLE:

- | | | |
|---|--|---|
| <u>Recreation:</u> | <u>Health-Related:</u> | |
| <input checked="" type="checkbox"/> clubhouse | <input type="checkbox"/> assisted living plan | <input checked="" type="checkbox"/> security patrol |
| <input checked="" type="checkbox"/> fishing | <input checked="" type="checkbox"/> medical center | <input type="checkbox"/> security gate |
| <input type="checkbox"/> garden plot | <input type="checkbox"/> nurse on staff | <input type="checkbox"/> transportation service |
| <input type="checkbox"/> golf on site | <input type="checkbox"/> nursing home on site | <input checked="" type="checkbox"/> homeowners' assoc. |
| <input type="checkbox"/> greenhouse | <input type="checkbox"/> nursing home privileges | <input type="checkbox"/> entrance fee/deposit |
| <input type="checkbox"/> marina | <input type="checkbox"/> 24-hour front desk | <input type="checkbox"/> donation required |
| <input checked="" type="checkbox"/> pool | | <input type="checkbox"/> fee simple ownership |
| <input type="checkbox"/> social director | <u>Other:</u> | <input checked="" type="checkbox"/> maintenance fee |
| <input type="checkbox"/> spa/hydrotherapy | <input type="checkbox"/> emergency telephone | <input checked="" type="checkbox"/> rental agreements |
| <input type="checkbox"/> pool | <input type="checkbox"/> communications | <input type="checkbox"/> available |
| <input type="checkbox"/> tennis | <input type="checkbox"/> congregate meal plan | <input checked="" type="checkbox"/> income requirements |
| <input type="checkbox"/> visitor tours | <input checked="" type="checkbox"/> neighborhood watch | <input checked="" type="checkbox"/> age eligibility |
| <input type="checkbox"/> walking path | <input type="checkbox"/> program | <input type="checkbox"/> requirements |
| <input type="checkbox"/> woodworking shop | <input type="checkbox"/> handicapped accom. | |

CONTRACTUAL INFORMATION:

- | | <u>YES</u> | <u>NO</u> |
|---|---------------|---------------|
| 1. Is there a contractual agreement? | <u>X</u> | <u> </u> |
| 2. Is the retirement community government subsidized? | <u> </u> | <u>X</u> |
| 3. Is the retirement community church related? Which denomination? _____ | <u> </u> | <u>X</u> |
| 4. Does the contract specify services included in the monthly charge and those requiring additional charge? | <u>X</u> | <u> </u> |
| 5. Is the refund method outlined in contract? | <u>n/a</u> | <u>n/a</u> |
| 6. How is information on the financial soundness of the community shared with residents? <u>n/a</u> | | |
| 7. What is the policy regarding residents who become insolvent? | | |

- Homes are re-sold
8. What is the resident's financial responsibility should he/she be transferred to a nursing facility? Home is re-sold
9. What is the length of time the living unit will be maintained in the event of temporary nursing home placement? Various

INTEREST POINTS:

- | | | | |
|---------------------------------|-----------|----------------------------|---------------|
| -Miles to nearest hospital | <u>18</u> | -Miles to nearest grocery | <u>.1</u> |
| -Miles to nearest major airport | <u>8</u> | -Miles to Blue Ridge Mtns. | <u>5/hrs.</u> |
| -Miles to nearest shopping mall | <u>1</u> | -Miles to Atlantic Ocean | <u>1+</u> |

THE LAKES
600 Waccamaw River Road
Surfside, S.C. 29575
(803) 238-4000
Ed Edelen, Owner & Developer

Horry County

TYPE OF FACILITY: RETIREMENT COMMUNITY

- Residential capacity: 1027
- 1027 detached houses
- 40% of residents from other states

SERVICES AVAILABLE:

- | | | |
|--|---|--|
| <p>Recreation:</p> <p><input type="checkbox"/> clubhouse</p> <p><input checked="" type="checkbox"/> fishing</p> <p><input checked="" type="checkbox"/> garden plot</p> <p><input checked="" type="checkbox"/> golf next door</p> <p><input type="checkbox"/> greenhouse</p> <p><input type="checkbox"/> marina</p> <p><input type="checkbox"/> pool</p> <p><input type="checkbox"/> social director</p> <p><input type="checkbox"/> spa/hydrotherapy pool</p> <p><input type="checkbox"/> tennis</p> <p><input type="checkbox"/> visitor tours</p> <p><input checked="" type="checkbox"/> walking path</p> <p><input type="checkbox"/> woodworking shop</p> | <p>Health-Related:</p> <p><input type="checkbox"/> assisted living plan</p> <p><input type="checkbox"/> medical center</p> <p><input type="checkbox"/> nurse on staff</p> <p><input type="checkbox"/> nursing home on site</p> <p><input type="checkbox"/> nursing home privileges</p> <p><input type="checkbox"/> 24-hour front desk</p> <p>Other:</p> <p><input type="checkbox"/> emergency telephone communications</p> <p><input type="checkbox"/> congregate meal plan</p> <p><input type="checkbox"/> neighborhood watch program</p> <p><input type="checkbox"/> handicapped accom.</p> | <p><input checked="" type="checkbox"/> security patrol</p> <p><input type="checkbox"/> security gate</p> <p><input type="checkbox"/> transportation service</p> <p><input checked="" type="checkbox"/> homeowners' assoc.</p> <p><input type="checkbox"/> entrance fee/deposit donation required</p> <p><input checked="" type="checkbox"/> fee simple ownership</p> <p><input checked="" type="checkbox"/> maintenance fee</p> <p><input type="checkbox"/> rental agreements available</p> <p><input type="checkbox"/> income requirements</p> <p><input type="checkbox"/> age eligibility requirements</p> |
|--|---|--|

CONTRACTUAL INFORMATION:

- | | <u>YES</u> | <u>NO</u> |
|--|---------------|---------------|
| 1. Is there a contractual agreement? | <u>X</u> | <u> </u> |
| 2. Is the retirement community government subsidized? | <u> </u> | <u>X</u> |
| 3. Is the retirement community church related? Which denomination? _____ | <u> </u> | <u>X</u> |
| 4. Does the contract specify services included in the monthly charge and those requiring additional charge? | <u> </u> | <u>X</u> |
| 5. Is the refund method outlined in contract? | <u> </u> | <u>X</u> |
| 6. How is information on the financial soundness of the community shared with residents? <u>It is not shared.</u> | | |
| 7. What is the policy regarding residents who become insolvent? | | |
| <u>They must move.</u> | | |
| 8. What is the resident's financial responsibility should he/she be transferred to a nursing facility? <u>None</u> | | |
| 9. What is the length of time the living unit will be maintained in the event of temporary nursing home placement? <u>0 days</u> | | |

INTEREST POINTS:

- | | | | |
|---------------------------------|----------|----------------------------|------------|
| -Miles to nearest hospital | <u>1</u> | -Miles to nearest grocery | <u>1</u> |
| -Miles to nearest major airport | <u>3</u> | -Miles to Blue Ridge Mtns. | <u>200</u> |
| -Miles to nearest shopping mall | <u>1</u> | -Miles to Atlantic Ocean | <u>1</u> |

MYRTLE BEACH MANOR **Horry County**
9201 N. Kings Highway
Myrtle Beach, S.C. 29572
(803) 449-5283
Juana C. Newber, Exec. Director

TYPE OF FACILITY: RETIREMENT & CONTINUING CARE COMMUNITY

- Residential capacity: 80
- 60 apartments
- 80% of residents from other states

SERVICES AVAILABLE:

- | | | |
|--|---|---|
| <p><u>Recreation:</u></p> <ul style="list-style-type: none"> <input type="checkbox"/> clubhouse <input type="checkbox"/> fishing <input type="checkbox"/> garden plot <input type="checkbox"/> golf on site <input type="checkbox"/> greenhouse <input type="checkbox"/> marina <input type="checkbox"/> pool <input checked="" type="checkbox"/> social director <input type="checkbox"/> spa/hydrotherapy pool <input type="checkbox"/> tennis <input checked="" type="checkbox"/> visitor tours <input checked="" type="checkbox"/> walking path <input type="checkbox"/> woodworking shop | <p><u>Health-Related:</u></p> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> assisted living plan <input checked="" type="checkbox"/> medical center <input checked="" type="checkbox"/> nurse on staff <input checked="" type="checkbox"/> nursing home on site <input checked="" type="checkbox"/> nursing home privileges <input type="checkbox"/> 24-hour front desk <p><u>Other:</u></p> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> emergency telephone communications <input checked="" type="checkbox"/> congregate meal plan <input type="checkbox"/> neighborhood watch program <input checked="" type="checkbox"/> handicapped accom. | <ul style="list-style-type: none"> <input type="checkbox"/> security patrol <input type="checkbox"/> security gate <input checked="" type="checkbox"/> transportation service <input type="checkbox"/> homeowners' assoc. entrance fee/deposit donation required <input type="checkbox"/> fee simple ownership maintenance fee <input checked="" type="checkbox"/> rental agreements available <input type="checkbox"/> income requirements <input type="checkbox"/> age eligibility requirements |
|--|---|---|

CONTRACTUAL INFORMATION:

- | | <u>YES</u> | <u>NO</u> |
|---|-------------|-------------|
| 1. Is there a contractual agreement? | <u>X</u> | <u> </u> |
| 2. Is the retirement community government subsidized? | <u> </u> | <u>X</u> |
| 3. Is the retirement community church related? Which denomination? _____ | <u> </u> | <u>X</u> |
| 4. Does the contract specify services included in the monthly charge and those requiring additional charge? | <u>X</u> | <u> </u> |
| 5. Is the refund method outlined in contract? | <u>X</u> | <u> </u> |
| 6. How is information on the financial soundness of the community shared with residents? <u>On request</u> | <u> </u> | <u> </u> |
| 7. What is the policy regarding residents who become insolvent? | <u> </u> | <u> </u> |

- Excluding nursing care, only private pay accepted
8. What is the resident's financial responsibility should he/she be transferred to a nursing facility? The current rate will be charged.
9. What is the length of time the living unit will be maintained in the event of temporary nursing home placement? 30 days

INTEREST POINTS:

- | | | | |
|---------------------------------|------------|----------------------------|------------|
| -Miles to nearest hospital | <u>1.5</u> | -Miles to nearest grocery | <u>.4</u> |
| -Miles to nearest major airport | <u>12</u> | -Miles to Blue Ridge Mtns. | <u>480</u> |
| -Miles to nearest shopping mall | <u>1.5</u> | -Miles to Atlantic Ocean | <u>.4</u> |

**MYRTLE TRACE
RETIREMENT COMMUNITY
100 Myrtle Trace Drive
P.O. Box 3908
Myrtle Beach, SC 29578
(803) 448-1045
Van Watts, III, Sales Manager**

Horry County

TYPE OF FACILITY: RETIREMENT COMMUNITY

- Residential capacity: 500
- 500 detached houses & villas
- 98% of residents from other states

SERVICES AVAILABLE:

Recreation:

- clubhouse
- fishing
- garden plot
- golf on site
- greenhouse
- marina
- pool
- social director
- spa/hydrotherapy pool
- tennis
- visitor tours
- walking path
- woodworking shop

Health-Related:

- assisted living plan
- medical center
- nurse on staff
- nursing home on site
- nursing home privileges
- 24-hour front desk

Other:

- emergency telephone communications
- congregate meal plan
- neighborhood watch program
- handicapped accom.

- security patrol
- security gate
- transportation service
- homeowners' assoc.
- entrance fee/deposit donation required
- fee simple ownership
- maintenance fee
- rental agreements available
- income requirements
- age eligibility requirements

CONTRACTUAL INFORMATION:

- | | <u>YES</u> | <u>NO</u> |
|---|---------------|---------------|
| 1. Is there a contractual agreement? | <u>X</u> | <u> </u> |
| 2. Is the retirement community government subsidized? | <u> </u> | <u>X</u> |
| 3. Is the retirement community church related? Which denomination? _____ | <u> </u> | <u>X</u> |
| 4. Does the contract specify services included in the monthly charge and those requiring additional charge? | <u> </u> | <u>X</u> |
| 5. Is the refund method outlined in contract? | <u>X</u> | <u> </u> |
| 6. How is information on the financial soundness of the community shared with residents? <u>N/A - not Life Care Community</u> | | |
| 7. What is the policy regarding residents who become insolvent?
<u>N/A - not Life Care Community</u> | | |
| 8. What is the resident's financial responsibility should he/she be transferred to a nursing facility? <u>Up to the individual</u> | | |
| 9. What is the length of time the living unit will be maintained in the event of temporary nursing home placement? <u>Individually owned home</u> | | |

INTEREST POINTS:

- Miles to nearest hospital .5 -Miles to nearest grocery 5
- Miles to nearest major airport 7 -Miles to Blue Ridge Mtns. 300
- Miles to nearest shopping mall 7 -Miles to Atlantic Ocean 8

SENIORS' COUNTRY CLUB **Horry County**
 Hwy. 905 South
 Longs, S.C. 29568
 P.O. Drawer 3489
 North Myrtle Beach, SC 29582
 (803) 249-8003
 Thad Williams, President

TYPE OF FACILITY: RETIREMENT COMMUNITY

- Residential capacity: 765
- 765 detached houses, apartments, villas, townhouses, condominiums
- % of residents from other states

SERVICES AVAILABLE:

- | | | |
|--|---|---|
| <u>Recreation:</u> | <u>Health-Related:</u> | |
| <input checked="" type="checkbox"/> clubhouse | <input type="checkbox"/> assisted living plan | <input type="checkbox"/> security patrol |
| <input type="checkbox"/> fishing | <input type="checkbox"/> medical center | <input checked="" type="checkbox"/> security gate |
| <input type="checkbox"/> garden plot | <input type="checkbox"/> nurse on staff | <input type="checkbox"/> transportation service |
| <input checked="" type="checkbox"/> golf on site | <input type="checkbox"/> nursing home on site | <input checked="" type="checkbox"/> homeowners' assoc. |
| <input type="checkbox"/> greenhouse | <input type="checkbox"/> nursing home privileges | <input type="checkbox"/> entrance fee/deposit |
| <input type="checkbox"/> marina | <input type="checkbox"/> 24-hour front desk | <input type="checkbox"/> donation required |
| <input checked="" type="checkbox"/> pool | | <input type="checkbox"/> fee simple ownership |
| <input type="checkbox"/> social director | <u>Other:</u> | <input type="checkbox"/> maintenance fee |
| <input type="checkbox"/> spa/hydrotherapy | <input type="checkbox"/> emergency telephone | <input checked="" type="checkbox"/> rental agreements available |
| <input type="checkbox"/> pool | <input type="checkbox"/> communications | <input type="checkbox"/> income requirements |
| <input checked="" type="checkbox"/> tennis | <input type="checkbox"/> congregate meal plan | <input type="checkbox"/> age eligibility requirements |
| <input type="checkbox"/> visitor tours | <input type="checkbox"/> neighborhood watch program | |
| <input checked="" type="checkbox"/> walking path | <input type="checkbox"/> handicapped accom. | |
| <input type="checkbox"/> woodworking shop | | |

CONTRACTUAL INFORMATION:

- | | <u>YES</u> | <u>NO</u> |
|--|--------------------------|-------------------------------------|
| 1. Is there a contractual agreement? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 2. Is the retirement community government subsidized? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 3. Is the retirement community church related? Which denomination? _____ | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 4. Does the contract specify services included in the monthly charge and those requiring additional charge? | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Is the refund method outlined in contract? | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. How is information on the financial soundness of the community shared with residents? _____ | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. What is the policy regarding residents who become insolvent? _____ | <input type="checkbox"/> | <input type="checkbox"/> |
| 8. What is the resident's financial responsibility should he/she be transferred to a nursing facility? _____ | <input type="checkbox"/> | <input type="checkbox"/> |
| 9. What is the length of time the living unit will be maintained in the event of temporary nursing home placement? _____ | <input type="checkbox"/> | <input type="checkbox"/> |

INTEREST POINTS:

- | | | | |
|---------------------------------|-----------|----------------------------|-----------|
| -Miles to nearest hospital | <u>20</u> | -Miles to nearest grocery | <u>10</u> |
| -Miles to nearest major airport | <u>30</u> | -Miles to Blue Ridge Mtns. | <u> </u> |
| -Miles to nearest shopping mall | <u>15</u> | -Miles to Atlantic Ocean | <u>10</u> |

WOODLAKE
606 Bluebird Lane
Murrells Inlet, SC 29576
(803) 651-0020
Jeanne Scott, Manager

Horry County

TYPE OF FACILITY: RETIREMENT COMMUNITY

- Residential capacity: 450
- 450 detached houses
- 90% of residents from other states

SERVICES AVAILABLE:

Recreation:

- clubhouse
- fishing
- garden plot
- golf on site
- greenhouse
- marina
- pool
- social director
- spa/hydrotherapy pool
- tennis
- visitor tours
- walking path
- woodworking shop

Health-Related:

- assisted living plan
- medical center
- nurse on staff
- nursing home on site
- nursing home privileges
- 24-hour front desk

Other:

- emergency telephone communications
- congregate meal plan
- neighborhood watch program
- handicapped accom.

- security patrol
- security gate
- transportation service
- homeowners' assoc.
- entrance fee/deposit donation required
- fee simple ownership
- maintenance fee
- rental agreements available
- income requirements
- age eligibility requirements

CONTRACTUAL INFORMATION:

- | | <u>YES</u> | <u>NO</u> |
|--|---------------|---------------|
| 1. Is there a contractual agreement? | <u>X</u> | <u> </u> |
| 2. Is the retirement community government subsidized? | <u> </u> | <u>X</u> |
| 3. Is the retirement community church related? Which denomination? _____ | <u> </u> | <u> </u> |
| 4. Does the contract specify services included in the monthly charge and those requiring additional charge? _____ | <u> </u> | <u> </u> |
| 5. Is the refund method outlined in contract? | <u> </u> | <u> </u> |
| 6. How is information on the financial soundness of the community shared with residents? _____ | <u> </u> | <u> </u> |
| 7. What is the policy regarding residents who become insolvent? _____ | <u> </u> | <u> </u> |
| | | |
| 8. What is the resident's financial responsibility should he/she be transferred to a nursing facility? _____ | <u> </u> | <u> </u> |
| | | |
| 9. What is the length of time the living unit will be maintained in the event of temporary nursing home placement? _____ | <u> </u> | <u> </u> |

INTEREST POINTS:

- Miles to nearest hospital 15 -Miles to nearest grocery 2
- Miles to nearest major airport 10 -Miles to Blue Ridge Mtns. 300
- Miles to nearest shopping mall 2 -Miles to Atlantic Ocean 3

SPRINGDALE VILLAGE
146 Battleship Road
P.O. Box 1619
Camden, SC 29020
(803) 432-3741

Kershaw County

Carl Kretschmar, President

TYPE OF FACILITY: RETIREMENT & CONTINUING CARE COMMUNITY

- Residential capacity: 13
- 9 apartments
- 0% of residents from other states

SERVICES AVAILABLE:

Recreation:

- clubhouse
- fishing
- garden plot
- golf on site
- greenhouse
- marina
- pool
- social director
- spa/hydrotherapy pool
- tennis
- visitor tours
- walking path
- woodworking shop

Health-Related:

- assisted living plan
- medical center
- nurse on staff
- nursing home on site
- nursing home privileges
- 24-hour front desk

Other:

- emergency telephone communications
- congregate meal plan
- neighborhood watch program
- handicapped accom.

- security patrol
- security gate
- transportation service
- homeowners' assoc.
- entrance fee/deposit donation required
- fee simple ownership
- maintenance fee
- rental agreements available
- income requirements
- age eligibility requirements

CONTRACTUAL INFORMATION:

- | | <u>YES</u> | <u>NO</u> |
|--|-------------|-------------|
| 1. Is there a contractual agreement? | <u>X</u> | <u> </u> |
| 2. Is the retirement community government subsidized? | <u> </u> | <u>X</u> |
| 3. Is the retirement community church related? Which denomination? _____ | <u> </u> | <u>X</u> |
| 4. Does the contract specify services included in the monthly charge and those requiring additional charge? | <u>X</u> | <u> </u> |
| 5. Is the refund method outlined in contract? | <u>X</u> | <u> </u> |
| 6. How is information on the financial soundness of the community shared with residents? <u>Personal consultations</u> | <u> </u> | <u> </u> |
| 7. What is the policy regarding residents who become insolvent? | <u> </u> | <u> </u> |

They would be asked to move.

8. What is the resident's financial responsibility should he/she be transferred to a nursing facility? They would pay the nursing

home fees directly to that facility.

9. What is the length of time the living unit will be maintained in the event of temporary nursing home placement? As long as resident

wants to hold his or her apartment.

INTEREST POINTS:

- Miles to nearest hospital 2 -Miles to nearest grocery 1
- Miles to nearest major airport 40 -Miles to Blue Ridge Mtns.
- Miles to nearest shopping mall 2 -Miles to Atlantic Ocean 150

LANCASTER MANOR APARTMENTS Lancaster County
201 Chesterfield Avenue
Lancaster, S.C. 29720
(803) 285-7115
Terri Morrow, Manager

TYPE OF FACILITY: RETIREMENT COMMUNITY

- Residential capacity: 66
- 66 high rise
- % of residents from other states

SERVICES AVAILABLE:

- | | | |
|---|---|---|
| <p><u>Recreation:</u></p> <ul style="list-style-type: none"> <u> </u> clubhouse <u> </u> fishing <u> </u> garden plot <u> </u> golf on site <u> </u> greenhouse <u> </u> marina <u> </u> pool <u> </u> social director <u> </u> spa/hydrotherapy <u> </u> pool <u> </u> tennis <u> </u> visitor tours <u> </u> walking path <u> </u> woodworking shop | <p><u>Health-Related:</u></p> <ul style="list-style-type: none"> <u> </u> assisted living plan <u> </u> medical center <u> </u> nurse on staff <u> </u> nursing home on site <u> </u> nursing home privileges <u> </u> 24-hour front desk <p><u>Other:</u></p> <ul style="list-style-type: none"> <u> </u> emergency telephone <u> </u> communications <u> </u> congregate meal plan <u> </u> neighborhood watch <u> </u> program <u> X</u> handicapped accom. | <ul style="list-style-type: none"> <u> </u> security patrol <u> </u> security gate <u> </u> transportation <u> </u> service <u> </u> homeowners' assoc. <u> </u> entrance fee/deposit <u> </u> donation required <u> </u> fee simple ownership <u> </u> maintenance fee <u> X</u> rental agreements <u> </u> available <u> X</u> income requirements <u> X</u> age eligibility <u> </u> requirements |
|---|---|---|

CONTRACTUAL INFORMATION:

- | | <u>YES</u> | <u>NO</u> |
|--|--------------|--------------|
| 1. Is there a contractual agreement? | <u> X </u> | <u> </u> |
| 2. Is the retirement community government subsidized? | <u> X </u> | <u> </u> |
| 3. Is the retirement community church related? Which denomination? _____ | <u> </u> | <u> X </u> |
| 4. Does the contract specify services included in the monthly charge and those requiring additional charge? | <u> X </u> | <u> </u> |
| 5. Is the refund method outlined in contract? | <u> X </u> | <u> </u> |
| 6. How is information on the financial soundness of the community shared with residents? <u>N/A</u> | <u> </u> | <u> </u> |
| 7. What is the policy regarding residents who become insolvent?

<u>Must be capable of independent living or provide own assistance.</u> | <u> </u> | <u> </u> |
| 8. What is the resident's financial responsibility should he/she be transferred to a nursing facility? <u>30 day written notice if possible; responsibility limited to actual residence.</u> | <u> </u> | <u> </u> |
| 9. What is the length of time the living unit will be maintained in the event of temporary nursing home placement? <u>Dependent upon medical evaluation.</u> | <u> </u> | <u> </u> |

INTEREST POINTS:

- | | | | |
|---------------------------------|--------------|----------------------------|--------------|
| -Miles to nearest hospital | <u> 3 </u> | -Miles to nearest grocery | <u> 2 </u> |
| -Miles to nearest major airport | <u> 40 </u> | -Miles to Blue Ridge Mtns. | <u> 150 </u> |
| -Miles to nearest shopping mall | <u> 25 </u> | -Miles to Atlantic Ocean | <u> 150 </u> |

ABERDEEN PLACE
E. Maple Street
P.O. Box 89
Clinton, SC 29325
(803) 833-0681
W. L. Prickett, Broker

Laurens County

TYPE OF FACILITY: RETIREMENT COMMUNITY

- Residential capacity:
- 37 detached houses
- 50% of residents from other states

SERVICES AVAILABLE:

Recreation: <input type="checkbox"/> clubhouse <input type="checkbox"/> fishing <input type="checkbox"/> garden plot <input type="checkbox"/> golf on site <input type="checkbox"/> greenhouse <input type="checkbox"/> marina <input type="checkbox"/> pool <input type="checkbox"/> social director <input type="checkbox"/> spa/hydrotherapy <input checked="" type="checkbox"/> pool <input type="checkbox"/> tennis <input type="checkbox"/> visitor tours <input checked="" type="checkbox"/> walking path <input type="checkbox"/> woodworking shop	Health-Related: <input type="checkbox"/> assisted living plan <input type="checkbox"/> medical center <input type="checkbox"/> nurse on staff <input type="checkbox"/> nursing home on site <input type="checkbox"/> nursing home privileges <input type="checkbox"/> 24-hour front desk Other: <input type="checkbox"/> emergency telephone <input type="checkbox"/> communications <input type="checkbox"/> congregate meal plan <input type="checkbox"/> neighborhood watch <input type="checkbox"/> program <input checked="" type="checkbox"/> handicapped accom.	<input type="checkbox"/> security patrol <input checked="" type="checkbox"/> security gate <input type="checkbox"/> transportation <input type="checkbox"/> service <input checked="" type="checkbox"/> homeowners' assoc. <input type="checkbox"/> entrance fee/deposit <input type="checkbox"/> donation required <input type="checkbox"/> fee simple ownership <input checked="" type="checkbox"/> maintenance fee <input type="checkbox"/> rental agreements <input type="checkbox"/> available <input type="checkbox"/> income requirements <input type="checkbox"/> age eligibility <input type="checkbox"/> requirements
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CONTRACTUAL INFORMATION:

- | | <u>YES</u> | <u>NO</u> |
|---|-------------|-------------|
| 1. Is there a contractual agreement? | <u>N/A</u> | <u> </u> |
| 2. Is the retirement community government subsidized? | <u> </u> | <u>X</u> |
| 3. Is the retirement community church related? Which denomination? _____ | <u> </u> | <u>X</u> |
| 4. Does the contract specify services included in the monthly charge and those requiring additional charge? <u> </u> | <u> </u> | <u> </u> |
| 5. Is the refund method outlined in contract? | <u>N/A</u> | <u> </u> |
| 6. How is information on the financial soundness of the community shared with residents? <u>N/A</u> | <u> </u> | <u> </u> |
| 7. What is the policy regarding residents who become insolvent?
_____ | <u> </u> | <u> </u> |
| 8. What is the resident's financial responsibility should he/she be transferred to a nursing facility?
_____ | <u> </u> | <u> </u> |
| 9. What is the length of time the living unit will be maintained in the event of temporary nursing home placement?
_____ | <u> </u> | <u> </u> |

INTEREST POINTS:

-Miles to nearest hospital <u> 1</u>	-Miles to nearest grocery <u> 1</u>
-Miles to nearest major airport <u> 40</u>	-Miles to Blue Ridge Mtns. <u> 60</u>
-Miles to nearest shopping mall <u> 3</u>	-Miles to Atlantic Ocean <u> 180</u>

FRAMPTON HALL
N. Broad Street
Clinton, S.C. 29325
(803) 833-0386
Samuel N. Thomas, Sr., Administrator

Laurens County

TYPE OF FACILITY: RETIREMENT COMMUNITY

- Residential capacity: 100
- 78 apartments & private rooms
- 2% of residents from other states

SERVICES AVAILABLE:

- | | | |
|---|--|--|
| <u>Recreation:</u> | <u>Health-Related:</u> | |
| <input type="checkbox"/> clubhouse | <input type="checkbox"/> assisted living plan | <input checked="" type="checkbox"/> security patrol |
| <input type="checkbox"/> fishing | <input type="checkbox"/> medical center | <input type="checkbox"/> security gate |
| <input checked="" type="checkbox"/> garden plot | <input checked="" type="checkbox"/> nurse on staff | <input checked="" type="checkbox"/> transportation service |
| <input type="checkbox"/> golf on site | <input type="checkbox"/> nursing home on site | <input type="checkbox"/> homeowners' assoc. |
| <input type="checkbox"/> greenhouse | <input type="checkbox"/> nursing home privileges | <input type="checkbox"/> entrance fee/deposit |
| <input type="checkbox"/> marina | <input checked="" type="checkbox"/> 24-hour front desk | <input type="checkbox"/> donation required |
| <input type="checkbox"/> pool | | <input type="checkbox"/> fee simple ownership |
| <input checked="" type="checkbox"/> social director | <u>Other:</u> | <input checked="" type="checkbox"/> maintenance fee |
| <input type="checkbox"/> spa/hydrotherapy pool | <input checked="" type="checkbox"/> emergency telephone communications | <input type="checkbox"/> rental agreements available |
| <input type="checkbox"/> tennis | <input checked="" type="checkbox"/> congregate meal plan | <input type="checkbox"/> income requirements |
| <input checked="" type="checkbox"/> visitor tours | <input type="checkbox"/> neighborhood watch program | <input checked="" type="checkbox"/> age eligibility requirements |
| <input type="checkbox"/> walking path | | |
| <input type="checkbox"/> woodworking shop | <input checked="" type="checkbox"/> handicapped accom. | |

CONTRACTUAL INFORMATION:

- | | <u>YES</u> | <u>NO</u> |
|---|------------|-----------|
| 1. Is there a contractual agreement? | <u>X</u> | _____ |
| 2. Is the retirement community government subsidized? | _____ | <u>X</u> |
| 3. Is the retirement community church related? Which denomination? <u>Presbyterian</u> | <u>X</u> | _____ |
| 4. Does the contract specify services included in the monthly charge and those requiring additional charge? | <u>X</u> | _____ |
| 5. Is the refund method outlined in contract? | _____ | _____ |
| 6. How is information on the financial soundness of the community shared with residents? <u>Annual Report</u> | _____ | _____ |
| 7. What is the policy regarding residents who become insolvent? | _____ | _____ |
| <u>Home will subsidize such residents</u> | | |
| 8. What is the resident's financial responsibility should he/she be transferred to a nursing facility? <u>Resident has financial responsibility -Home will be subsidize if resident is unable to pay.</u> | _____ | _____ |
| 9. What is the length of time the living unit will be maintained in the event of temporary nursing home placement? <u>at least 30 days</u> | _____ | _____ |

INTEREST POINTS:

- | | | | |
|---------------------------------|-----------|----------------------------|------------|
| -Miles to nearest hospital | <u>1</u> | -Miles to nearest grocery | <u>.5</u> |
| -Miles to nearest major airport | <u>45</u> | -Miles to Blue Ridge Mtns. | <u>70</u> |
| -Miles to nearest shopping mall | <u>2</u> | -Miles to Atlantic Ocean | <u>175</u> |

**MARTHA FRANKS BAPTIST
RETIREMENT CENTER
1 Martha Franks Drive
Laurens, SC 29360
(803) 984-4541
Joe R. Babb, Administrator**

Laurens County

TYPE OF FACILITY: RETIREMENT & CONTINUING CARE COMMUNITY

- Residential capacity: 166
- 166 apartments & residential beds
- 0% of residents from other states

SERVICES AVAILABLE:

<u>Recreation:</u>	<u>Health-Related:</u>	
<u>clubhouse</u>	<u>X assisted living plan</u>	<u>X security patrol</u>
<u>X fishing</u>	<u>X medical center</u>	<u>security gate</u>
<u>X garden plot</u>	<u>X nurse on staff</u>	<u>X transportation</u>
<u>golf on site</u>	<u>X nursing home on site</u>	service
<u>greenhouse</u>	<u>nursing home privileges</u>	<u>homeowners' assoc.</u>
<u>marina</u>	<u>X 24-hour front desk</u>	<u>X entrance fee/deposit</u>
<u>pool</u>		donation required
<u>X social director</u>	<u>Other:</u>	<u>fee simple ownership</u>
<u>spa/hydrotherapy</u>	<u>X emergency telephone</u>	<u>X maintenance fee</u>
<u>pool</u>	communications	<u>X rental agreements</u>
<u>tennis</u>	<u>X congregate meal plan</u>	available
<u>X visitor tours</u>	<u>neighborhood watch</u>	<u>income requirements</u>
<u>X walking path</u>	program	<u>X age eligibility</u>
<u>X woodworking shop</u>	<u>X handicapped accom.</u>	requirements

CONTRACTUAL INFORMATION:

- | | <u>YES</u> | <u>NO</u> |
|--|-------------|-------------|
| 1. Is there a contractual agreement? | <u>X</u> | <u> </u> |
| 2. Is the retirement community government subsidized? | <u> </u> | <u>X</u> |
| 3. Is the retirement community church related? Which denomination? <u>Baptist</u> | <u>X</u> | <u> </u> |
| 4. Does the contract specify services included in the monthly charge and those requiring additional charge? <u> </u> | <u>X</u> | <u> </u> |
| 5. Is the refund method outlined in contract? | <u>X</u> | <u> </u> |
| 6. How is information on the financial soundness of the community shared with residents? <u>Audit available</u> | <u> </u> | <u> </u> |
| 7. What is the policy regarding residents who become insolvent? | | |
| <u> Evaluated case by case</u> | | |
| 8. What is the resident's financial responsibility should he/she be transferred to a nursing facility? <u>Evaluated on a case by case</u> | | |
| <u> basis Residential & nursing on fee basis not life care.</u> | | |
| 9. What is the length of time the living unit will be maintained in the event of temporary nursing home placement? <u>Varied depending</u> | | |
| <u> on probability of residents return. Evaluation case by case basis.</u> | | |

INTEREST POINTS:

-Miles to nearest hospital	<u>1.5</u>	-Miles to nearest grocery	<u>1.5</u>
-Miles to nearest major airport	<u>40</u>	-Miles to Blue Ridge Mtns.	<u>70</u>
-Miles to nearest shopping mall	<u>1.5</u>	-Miles to Atlantic Ocean	<u>150</u>

**PRESBYTERIAN HOME
OF S.C. - LAURENS
Hwy 56 - North
Clinton, SC 29325
(803) 833-5190
Joan Young, Administrator**

Laurens County

TYPE OF FACILITY: RETIREMENT & CONTINUING CARE COMMUNITY

- Residential capacity: 185
- 174 detached houses, apartments, quadraplex, single rooms
- 3% of residents from other states

SERVICES AVAILABLE:

<u>Recreation:</u>	<u>Health-Related:</u>	
<u>clubhouse</u>	<u>assisted living plan</u>	<u>X</u> security patrol
<u>fishing</u>	<u>medical center</u>	<u>security gate</u>
<u>garden plot</u>	<u>X</u> nurse on staff	<u>X</u> transportation service
<u>X</u> golf on site	<u>X</u> nursing home on site	<u>homeowners' assoc.</u>
<u>greenhouse</u>	<u>nursing home privileges</u>	<u>entrance fee/deposit</u>
<u>marina</u>	<u>24-hour front desk</u>	<u>donation required</u>
<u>pool</u>		<u>fee simple ownership</u>
<u>X</u> social director	<u>Other:</u>	<u>maintenance fee</u>
<u>spa/hydrotherapy</u>	<u>emergency telephone</u>	<u>X</u> rental agreements
<u>pool</u>	<u>communications</u>	<u>available</u>
<u>tennis</u>	<u>X</u> congregate meal plan	<u>income requirements</u>
<u>X</u> visitor tours	<u>neighborhood watch</u>	<u>X</u> age eligibility
<u>X</u> walking path	<u>program</u>	<u>requirements</u>
<u>woodworking shop</u>	<u>X</u> handicapped accom.	

CONTRACTUAL INFORMATION:

- | | <u>YES</u> | <u>NO</u> |
|---|-------------|-------------|
| 1. Is there a contractual agreement? | <u>X</u> | <u> </u> |
| 2. Is the retirement community government subsidized? | <u> </u> | <u>X</u> |
| 3. Is the retirement community church related? Which denomination? <u>Presbyterian</u> | <u>X</u> | <u> </u> |
| 4. Does the contract specify services included in the monthly charge and those requiring additional charge? | <u>X</u> | <u> </u> |
| 5. Is the refund method outlined in contract? | <u>X</u> | <u> </u> |
| 6. How is information on the financial soundness of the community shared with residents? <u>Annual Audited Financial Report available</u> | | |
| 7. What is the policy regarding residents who become insolvent? | | |

Financial aid from churches and endowment granted after approval by a subcommittee of the Board of Trustees.

8. What is the resident's financial responsibility should he/she be transferred to a nursing facility? Additional supplemental charges as stated in contracts
9. What is the length of time the living unit will be maintained in the event of temporary nursing home placement? All living units are maintained for residents in the event of temporary nursing home placement.

INTEREST POINTS:

-Miles to nearest hospital	<u>2.5</u>	-Miles to nearest grocery	<u>.2</u>
-Miles to nearest major airport	<u>40</u>	-Miles to Blue Ridge Mtns.	<u>100</u>
-Miles to nearest shopping mall	<u>3</u>	-Miles to Atlantic Ocean	<u>150</u>

ASBURY ARMS
100 Asbury Lane
West Columbia, S.C. 29169
(803) 794-8052
Frances B. Rich, Res. Manager

Lexington County

TYPE OF FACILITY: RETIREMENT COMMUNITY

- Residential capacity: 56
- 56 villas
- 06% of residents from other states

SERVICES AVAILABLE:

<u>Recreation:</u>	<u>Health-Related:</u>	
<input checked="" type="checkbox"/> clubhouse	<input checked="" type="checkbox"/> assisted living plan	<input type="checkbox"/> security patrol
<input type="checkbox"/> fishing	<input type="checkbox"/> medical center	<input type="checkbox"/> security gate
<input type="checkbox"/> garden plot	<input type="checkbox"/> nurse on staff	<input type="checkbox"/> transportation service
<input type="checkbox"/> golf on site	<input type="checkbox"/> nursing home on site	<input type="checkbox"/> homeowners' assoc.
<input type="checkbox"/> greenhouse	<input type="checkbox"/> nursing home privileges	<input checked="" type="checkbox"/> entrance fee/deposit donation required
<input type="checkbox"/> marina	<input type="checkbox"/> 24-hour front desk	<input type="checkbox"/> fee simple ownership
<input type="checkbox"/> pool		<input type="checkbox"/> maintenance fee
<input type="checkbox"/> social director	<u>Other:</u>	<input type="checkbox"/> rental agreements available
<input type="checkbox"/> spa/hydrotherapy pool	<input type="checkbox"/> emergency telephone communications	<input checked="" type="checkbox"/> income requirements
<input type="checkbox"/> tennis	<input type="checkbox"/> congregate meal plan	<input checked="" type="checkbox"/> age eligibility requirements
<input type="checkbox"/> visitor tours	<input checked="" type="checkbox"/> neighborhood watch program	
<input type="checkbox"/> walking path	<input checked="" type="checkbox"/> handicapped accom.	
<input type="checkbox"/> woodworking shop		

CONTRACTUAL INFORMATION:

- | | <u>YES</u> | <u>NO</u> |
|---|-------------------------------------|--------------------------|
| 1. Is there a contractual agreement? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 2. Is the retirement community government subsidized? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 3. Is the retirement community church related? Which denomination? <u>Methodist</u> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Does the contract specify services included in the monthly charge and those requiring additional charge? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 5. Is the refund method outlined in contract? | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 6. How is information on the financial soundness of the community shared with residents? <u>N/A</u> | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. What is the policy regarding residents who become insolvent? | | |

HUD requirements

8. What is the resident's financial responsibility should he/she be transferred to a nursing facility? Pay rent if plans are to return to apartment.
9. What is the length of time the living unit will be maintained in the event of temporary nursing home placement? Until family makes a choice.

INTEREST POINTS:

-Miles to nearest hospital	<u>.5</u>	-Miles to nearest grocery	<u>1.5</u>
-Miles to nearest major airport	<u>5</u>	-Miles to Blue Ridge Mtns.	<u>120</u>
-Miles to nearest shopping mall	<u>4</u>	-Miles to Atlantic Ocean	<u>110</u>

**HULON GREENE
RETIREMENT COMMUNITY
900 Poinsett Place
West Columbia, SC 29169
(803) 791-4850
Julie Long, Manager**

Lexington County

TYPE OF FACILITY: RETIREMENT & CONTINUING CARE COMMUNITY

- Residential capacity: 350
- 100 detached houses, duplexes, & condominium
- 70% of residents from other states

SERVICES AVAILABLE:

Recreation:

- clubhouse
- fishing
- garden plot
- golf on site
- greenhouse
- marina
- pool
- social director
- spa/hydrotherapy pool
- tennis
- visitor tours
- walking path
- woodworking shop

Health-Related:

- assisted living plan
- medical center
- nurse on staff
- nursing home on site
- nursing home privileges
- 24-hour front desk

Other:

- emergency telephone communications
- congregate meal plan
- neighborhood watch program
- handicapped accom.

- security patrol
- security gate
- transportation service
- homeowners' assoc.
- entrance fee/deposit donation required
- fee simple ownership
- maintenance fee
- rental agreements available
- income requirements
- age eligibility requirements

CONTRACTUAL INFORMATION:

- | | <u>YES</u> | <u>NO</u> |
|---|---------------|---------------|
| 1. Is there a contractual agreement? | <u>X</u> | <u> </u> |
| 2. Is the retirement community government subsidized? | <u> </u> | <u>X</u> |
| 3. Is the retirement community church related? Which denomination? _____ | <u> </u> | <u>X</u> |
| 4. Does the contract specify services included in the monthly charge and those requiring additional charge? _____ | <u> </u> | <u>X</u> |
| 5. Is the refund method outlined in contract? | <u>X</u> | <u> </u> |
| 6. How is information on the financial soundness of the community shared with residents? <u>Through Resident Council, Management and Financial Committee</u> | | |
| 7. What is the policy regarding residents who become insolvent? | | |
| 8. What is the resident's financial responsibility should he/she be transferred to a nursing facility? <u>It's the responsibility of themselves or power of attorney.</u> | | |
| 9. What is the length of time the living unit will be maintained in the event of temporary nursing home placement? _____ | | |

INTEREST POINTS:

- | | | | |
|---------------------------------|-----------|----------------------------|------------|
| -Miles to nearest hospital | <u>.2</u> | -Miles to nearest grocery | <u>1</u> |
| -Miles to nearest major airport | <u>5</u> | -Miles to Blue Ridge Mtns. | <u>100</u> |
| -Miles to nearest shopping mall | <u>4</u> | -Miles to Atlantic Ocean | <u>200</u> |

**PRESBYTERIAN HOME
OF S.C. - COLUMBIA
700 DeVega Drive
Lexington, SC 29072
(803) 796-8700**

Lexington County

Margaret Taylor, Administrator

TYPE OF FACILITY: RETIREMENT & CONTINUING CARE COMMUNITY

- Residential capacity: 80
- 69 apartments & residential rooms
- % of residents from other states

SERVICES AVAILABLE:

- | | | |
|----------------------------|----------------------------------|---------------------------------|
| <u>Recreation:</u> | <u>Health-Related:</u> | |
| <u> </u> clubhouse | <u> </u> assisted living plan | <u>X</u> security patrol |
| <u> </u> fishing | <u> </u> medical center | <u> </u> security gate |
| <u>X</u> garden plot | <u>X</u> nurse on staff | <u>X</u> transportation service |
| <u> </u> golf on site | <u> </u> nursing home on site | <u> </u> homeowners' assoc. |
| <u> </u> greenhouse | <u>X</u> nursing home privileges | <u> </u> entrance fee/deposit |
| <u> </u> marina | <u> </u> 24-hour front desk | <u> </u> donation required |
| <u> </u> pool | | <u> </u> fee simple ownership |
| <u>X</u> social director | <u>Other:</u> | <u> </u> maintenance fee |
| <u> </u> spa/hydrotherapy | <u> </u> emergency telephone | <u>X</u> rental agreements |
| <u> </u> pool | <u> </u> communications | <u> </u> available |
| <u> </u> tennis | <u>X</u> congregate meal plan | <u> </u> income requirements |
| <u> </u> visitor tours | <u> </u> neighborhood watch | <u>X</u> age eligibility |
| <u> </u> walking path | <u> </u> program | <u> </u> requirements |
| <u> </u> woodworking shop | <u>X</u> handicapped accom. | |

CONTRACTUAL INFORMATION:

- | | <u>YES</u> | <u>NO</u> |
|--|--------------|--------------|
| 1. Is there a contractual agreement? | <u> X </u> | <u> </u> |
| 2. Is the retirement community government subsidized? | <u> </u> | <u> X </u> |
| 3. Is the retirement community church related? Which denomination? <u>Presbyterian</u> | <u> X </u> | <u> </u> |
| 4. Does the contract specify services included in the monthly charge and those requiring additional charge? <u> </u> | <u> X </u> | <u> </u> |
| 5. Is the refund method outlined in contract? | <u> X </u> | <u> </u> |
| 6. How is information on the financial soundness of the community shared with residents? <u>Annual audit available at Corporate Office</u> | | |
| 7. What is the policy regarding residents who become insolvent? | | |

By action of Committee on Board of Trustees financial aid is granted for those eligible. Financial aid comes from Churches and endowments.

- 8. What is the resident's financial responsibility should he/she be transferred to a nursing facility? Additional charges are imposed as stated in correct.
- 9. What is the length of time the living unit will be maintained in the event of temporary nursing home placement? All living units are maintained for residents in the event of temporary nursing home placement.

INTEREST POINTS:

- | | | | |
|---------------------------------|-----------|----------------------------|-----------|
| -Miles to nearest hospital | <u> </u> | -Miles to nearest grocery | <u> </u> |
| -Miles to nearest major airport | <u> </u> | -Miles to Blue Ridge Mtns. | <u> </u> |
| -Miles to nearest shopping mall | <u> </u> | -Miles to Atlantic Ocean | <u> </u> |

**S. C. EPISCOPAL
RETIREMENT COMMUNITY Lexington County**
Still Hopes
100 7th Street Extension
West Columbia, SC 29169
(803) 796-6490
Peggy Thibault, Exec. Director

TYPE OF FACILITY: RETIREMENT & CONTINUING CARE COMMUNITY

- Residential capacity: 110
- 110 apartments, duplexes, & resident, nursing
- 01% of residents from other states

SERVICES AVAILABLE:

- | | | |
|--------------------------|----------------------------------|-------------------------------|
| <u>Recreation:</u> | <u>Health-Related:</u> | |
| <u>clubhouse</u> | <u>X assisted living plan</u> | <u>X security patrol</u> |
| <u>X fishing</u> | <u>medical center</u> | <u>security gate</u> |
| <u>X garden plot</u> | <u>X nurse on staff</u> | <u>X transportation</u> |
| <u>golf on site</u> | <u>X nursing home on site</u> | service |
| <u>X greenhouse</u> | <u>X nursing home privileges</u> | <u>homeowners' assoc.</u> |
| <u>marina</u> | <u>24-hour front desk</u> | <u>X entrance fee/deposit</u> |
| <u>pool</u> | | donation required |
| <u>X social director</u> | <u>Other:</u> | <u>fee simple ownership</u> |
| <u>spa/hydrotherapy</u> | <u>X emergency telephone</u> | <u>X maintenance fee</u> |
| pool | communications | <u>X rental agreements</u> |
| <u>tennis</u> | <u>X congregate meal plan</u> | available |
| <u>X visitor tours</u> | <u>neighborhood watch</u> | <u>income requirements</u> |
| <u>X walking path</u> | program | <u>X age eligibility</u> |
| <u>woodworking shop</u> | <u>X handicapped accom.</u> | requirements |

CONTRACTUAL INFORMATION:

- | | <u>YES</u> | <u>NO</u> |
|---|---------------|---------------|
| 1. Is there a contractual agreement? | <u>X</u> | <u> </u> |
| 2. Is the retirement community government subsidized? | <u> </u> | <u>X</u> |
| 3. Is the retirement community church related? Which denomination? <u>Episcopal</u> | <u>X</u> | <u> </u> |
| 4. Does the contract specify services included in the monthly charge and those requiring additional charge? | <u>X</u> | <u> </u> |
| 5. Is the refund method outlined in contract? | <u>X</u> | <u> </u> |
| 6. How is information on the financial soundness of the community shared with residents? <u>Yes, if asked for</u> | <u> </u> | <u> </u> |
| 7. What is the policy regarding residents who become insolvent? | <u> </u> | <u> </u> |
| <u>Have assistance available</u> | | |
| 8. What is the resident's financial responsibility should he/she be transferred to a nursing facility? <u>Responsible for own account</u> | <u> </u> | <u> </u> |
| 9. What is the length of time the living unit will be maintained in the event of temporary nursing home placement? <u>No set time</u> | <u> </u> | <u> </u> |

INTEREST POINTS:

- | | | | |
|---------------------------------|-----------|----------------------------|------------|
| -Miles to nearest hospital | <u>5</u> | -Miles to nearest grocery | <u>3</u> |
| -Miles to nearest major airport | <u>10</u> | -Miles to Blue Ridge Mtns. | <u>120</u> |
| -Miles to nearest shopping mall | <u>5</u> | -Miles to Atlantic Ocean | <u>100</u> |

TIMBERLAKE PLANTATION
1700-A Amick's Ferry Road
Chapin, SC 29036
(803) 345-5044
Don Dowling, Broker-in Charge

Lexington County

TYPE OF FACILITY: RETIREMENT COMMUNITY

- Residential capacity: 1300-1400
- 1300-1400 detached houses
- 30% of residents from other states

SERVICES AVAILABLE:

Recreation:

- clubhouse
- fishing
- garden plot
- golf on site
- greenhouse
- marina
- pool
- social director
- spa/hydrotherapy pool
- tennis
- visitor tours
- walking path
- woodworking shop

Health-Related:

- assisted living plan
- medical center
- nurse on staff
- nursing home on site
- nursing home privileges
- 24-hour front desk

Other:

- emergency telephone communications
- congregate meal plan
- neighborhood watch program
- handicapped accom.

- security patrol
- security gate
- transportation service
- homeowners' assoc. entrance fee/deposit donation required
- fee simple ownership
- maintenance fee
- rental agreements available
- income requirements
- age eligibility requirements

CONTRACTUAL INFORMATION:

- | | <u>YES</u> | <u>NO</u> |
|--|-------------|-------------|
| 1. Is there a contractual agreement? | <u>X</u> | <u> </u> |
| 2. Is the retirement community government subsidized? | <u> </u> | <u>X</u> |
| 3. Is the retirement community church related? Which denomination? _____ | <u> </u> | <u>X</u> |
| 4. Does the contract specify services included in the monthly charge and those requiring additional charge? <u> </u> | <u> </u> | <u>X</u> |
| 5. Is the refund method outlined in contract? | <u>X</u> | <u> </u> |
| 6. How is information on the financial soundness of the community shared with residents? <u>Homeowners Association</u> | | |
| 7. What is the policy regarding residents who become insolvent?

<u>None established</u> | | |
| 8. What is the resident's financial responsibility should he/she be transferred to a nursing facility? <u>Residents are homeowners or property owners so financial responsibility is theirs.</u> | | |
| 9. What is the length of time the living unit will be maintained in the event of temporary nursing home placement? <u>n/a</u> | | |

INTEREST POINTS:

- Miles to nearest hospital 18 -Miles to nearest grocery 7
- Miles to nearest major airport 20 -Miles to Blue Ridge Mtns. 150
- Miles to nearest shopping mall 25 -Miles to Atlantic Ocean 150

SAVANNAH LAKES VILLAGE

McCormick County

Hwy. 378 West

P.O. Box 1469

McCormick, SC 29835

(803) 391-2151

Shirley Vernon, Director of Marketing

TYPE OF FACILITY: RETIREMENT & CONTINUING CARE COMMUNITY

- Residential capacity: 10000
- detached houses & townhouses
- 50% of residents from other states

SERVICES AVAILABLE:

- | | | |
|---|---|---|
| <u>Recreation:</u> | <u>Health-Related:</u> | |
| <input checked="" type="checkbox"/> clubhouse | <input type="checkbox"/> assisted living plan | <input checked="" type="checkbox"/> security patrol |
| <input checked="" type="checkbox"/> fishing | <input type="checkbox"/> medical center | <input type="checkbox"/> security gate |
| <input type="checkbox"/> garden plot | <input type="checkbox"/> nurse on staff | <input type="checkbox"/> transportation service |
| <input checked="" type="checkbox"/> golf on site | <input checked="" type="checkbox"/> nursing home on site | <input checked="" type="checkbox"/> homeowners' assoc. |
| <input type="checkbox"/> greenhouse | <input type="checkbox"/> nursing home privileges | <input type="checkbox"/> entrance fee/deposit donation required |
| <input checked="" type="checkbox"/> marina | <input type="checkbox"/> 24-hour front desk | <input checked="" type="checkbox"/> fee simple ownership |
| <input checked="" type="checkbox"/> pool | | <input checked="" type="checkbox"/> maintenance fee |
| <input type="checkbox"/> social director | <u>Other:</u> | <input checked="" type="checkbox"/> rental agreements available |
| <input checked="" type="checkbox"/> spa/hydrotherapy pool | <input type="checkbox"/> emergency telephone communications | <input type="checkbox"/> income requirements |
| <input checked="" type="checkbox"/> tennis | <input type="checkbox"/> congregate meal plan | <input type="checkbox"/> age eligibility requirements |
| <input type="checkbox"/> visitor tours | <input type="checkbox"/> neighborhood watch program | |
| <input checked="" type="checkbox"/> walking path | <input type="checkbox"/> handicapped accom. | |
| <input type="checkbox"/> woodworking shop | | |

CONTRACTUAL INFORMATION:

- | | <u>YES</u> | <u>NO</u> |
|--|-------------|-------------|
| 1. Is there a contractual agreement? | <u> </u> | <u>X</u> |
| 2. Is the retirement community government subsidized? | <u> </u> | <u>X</u> |
| 3. Is the retirement community church related? Which denomination? _____ | <u> </u> | <u>X</u> |
| 4. Does the contract specify services included in the monthly charge and those requiring additional charge? <u> </u> | <u>X</u> | <u> </u> |
| 5. Is the refund method outlined in contract? | <u>X</u> | <u> </u> |
| 6. How is information on the financial soundness of the community shared with residents? <u>Fully</u> | <u> </u> | <u> </u> |
| 7. What is the policy regarding residents who become insolvent?
<u>Unknown at present time</u> | <u> </u> | <u> </u> |
| 8. What is the resident's financial responsibility should he/she be transferred to a nursing facility? <u>Unknown at present time</u> | <u> </u> | <u> </u> |
| 9. What is the length of time the living unit will be maintained in the event of temporary nursing home placement? <u>Unknown at present time.</u> | <u> </u> | <u> </u> |

INTEREST POINTS:

- | | | | |
|---------------------------------|-----------|----------------------------|------------|
| -Miles to nearest hospital | <u>28</u> | -Miles to nearest grocery | <u>5</u> |
| -Miles to nearest major airport | <u>40</u> | -Miles to Blue Ridge Mtns. | <u>100</u> |
| -Miles to nearest shopping mall | <u>28</u> | -Miles to Atlantic Ocean | <u>150</u> |

CHICKASAW POINT
South Hwy. 11
P.O. Box 97
Fair Play, SC 29643
(803) 972-3042
John Morgan, Developer

Oconee County

TYPE OF FACILITY: RETIREMENT COMMUNITY

- Residential capacity: 1100
- 165 villas, residential single family
- 90% of residents from other states

SERVICES AVAILABLE:

Recreation:

- clubhouse
- fishing
- garden plot
- golf on site
- greenhouse
- marina
- pool
- social director
- spa/hydrotherapy pool
- tennis
- visitor tours
- walking path
- woodworking shop

Health-Related:

- assisted living plan
- medical center
- nurse on staff
- nursing home on site
- nursing home privileges
- 24-hour front desk

Other:

- emergency telephone communications
- congregate meal plan
- neighborhood watch program
- handicapped accom.

- security patrol
- security gate
- transportation service
- homeowners' assoc.
- entrance fee/deposit donation required
- fee simple ownership
- maintenance fee
- rental agreements available
- income requirements
- age eligibility requirements

CONTRACTUAL INFORMATION:

- | | <u>YES</u> | <u>NO</u> |
|--|------------|-----------|
| 1. Is there a contractual agreement? | _____ | <u>X</u> |
| 2. Is the retirement community government subsidized? | _____ | <u>X</u> |
| 3. Is the retirement community church related? Which denomination? _____ | _____ | <u>X</u> |
| 4. Does the contract specify services included in the monthly charge and those requiring additional charge? _____ | _____ | <u>X</u> |
| 5. Is the refund method outlined in contract? | <u>n/a</u> | _____ |
| 6. How is information on the financial soundness of the community shared with residents? <u>Self governing POA</u> | _____ | _____ |
| 7. What is the policy regarding residents who become insolvent? | _____ | _____ |
| <hr/> | | |
| 8. What is the resident's financial responsibility should he/she be transferred to a nursing facility? _____ | | |
| <hr/> | | |
| 9. What is the length of time the living unit will be maintained in the event of temporary nursing home placement? _____ | | |

INTEREST POINTS:

- Miles to nearest hospital 12
- Miles to nearest major airport 60
- Miles to nearest shopping mall 12
- Miles to nearest grocery 6
- Miles to Blue Ridge Mtns. 20
- Miles to Atlantic Ocean 200

KEOWEE KEY
Route 2
Salem, SC 29676
(803) 944-2400
Bonnie Douglas, Administrator

Oconee County

TYPE OF FACILITY: RETIREMENT COMMUNITY

- Residential capacity: 2200
- 710 detached houses, condominiums
- 95% of residents from other states

SERVICES AVAILABLE:

Recreation:

- clubhouse
- fishing
- garden plot
- golf on site
- greenhouse
- marina
- pool
- social director
- spa/hydrotherapy pool
- tennis
- visitor tours
- walking path
- woodworking shop

Health-Related:

- assisted living plan
- medical center
- nurse on staff
- nursing home on site
- nursing home privileges
- 24-hour front desk

Other:

- emergency telephone communications
- congregate meal plan
- neighborhood watch program
- handicapped accom.

- security patrol
- security gate
- transportation service
- homeowners' assoc.
- entrance fee/deposit donation required
- fee simple ownership
- maintenance fee
- rental agreements available
- income requirements
- age eligibility requirements

CONTRACTUAL INFORMATION:

- | | <u>YES</u> | <u>NO</u> |
|--|---------------|---------------|
| 1. Is there a contractual agreement? | <u>X</u> | <u> </u> |
| 2. Is the retirement community government subsidized? | <u> </u> | <u>X</u> |
| 3. Is the retirement community church related? Which denomination? _____ | <u> </u> | <u>X</u> |
| 4. Does the contract specify services included in the monthly charge and those requiring additional charge? _____ | <u>X</u> | <u> </u> |
| 5. Is the refund method outlined in contract? | <u>X</u> | <u> </u> |
| 6. How is information on the financial soundness of the community shared with residents? <u>Financial report available</u> | <u> </u> | <u> </u> |
| 7. What is the policy regarding residents who become insolvent? | <u> </u> | <u> </u> |

Lien is filed.

8. What is the resident's financial responsibility should he/she be transferred to a nursing facility? Individual

9. What is the length of time the living unit will be maintained in the event of temporary nursing home placement? As long as fees

and payments are current quarterly.

INTEREST POINTS:

- Miles to nearest hospital -Miles to nearest grocery
- Miles to nearest major airport -Miles to Blue Ridge Mtns.
- Miles to nearest shopping mall -Miles to Atlantic Ocean

BRADFORD VILLAGE
1 Bradford Boulevard
P.O. Box 70
Santee, S.C. 29142
(803) 854-2155
Johnny Roland, Manager

Orangeburg County

TYPE OF FACILITY: RETIREMENT COMMUNITY

- Residential capacity: 700
- 350 detached houses & villas
- 75% of residents from other states

SERVICES AVAILABLE:

Recreation:

- clubhouse
- fishing
- garden plot
- golf on site
- greenhouse
- marina
- pool
- social director
- spa/hydrotherapy pool
- tennis
- visitor tours
- walking path
- woodworking shop

Health-Related:

- assisted living plan
- medical center
- nurse on staff
- nursing home on site
- nursing home privileges
- 24-hour front desk

Other:

- emergency telephone communications
- congregate meal plan
- neighborhood watch program
- handicapped accom.

- security patrol
- security gate
- transportation service
- homeowners' assoc.
- entrance fee/deposit donation required
- fee simple ownership
- maintenance fee
- rental agreements available
- income requirements
- age eligibility requirements

CONTRACTUAL INFORMATION:

- | | <u>YES</u> | <u>NO</u> |
|---|------------|------------|
| 1. Is there a contractual agreement? | _____ | <u>X</u> |
| 2. Is the retirement community government subsidized? | _____ | <u>X</u> |
| 3. Is the retirement community church related? Which denomination? _____ | _____ | <u>X</u> |
| 4. Does the contract specify services included in the monthly charge and those requiring additional charge? | _____ | <u>X</u> |
| 5. Is the refund method outlined in contract? | _____ | <u>n/a</u> |
| 6. How is information on the financial soundness of the community shared with residents? <u>Monthly Association Meetings</u> | _____ | _____ |
| 7. What is the policy regarding residents who become insolvent?
<u>None - Residents own house title in fee simple.</u> | _____ | _____ |
| 8. What is the resident's financial responsibility should he/she be transferred to a nursing facility? <u>N/A</u> | _____ | _____ |
| 9. What is the length of time the living unit will be maintained in the event of temporary nursing home placement? <u>N/A</u> | _____ | _____ |

INTEREST POINTS:

- Miles to nearest hospital 22
- Miles to nearest major airport 55
- Miles to nearest shopping mall 100
- Miles to nearest grocery .5
- Miles to Blue Ridge Mtns. 160
- Miles to Atlantic Ocean 75

CHAPEL CREEK PLANTATION

Orangeburg County

Hwy. 6

P.O. Drawer 190

Santee, SC 29142

(803) 854-3531

Charles W. Clark, General Partner

TYPE OF FACILITY: RETIREMENT COMMUNITY

- Residential capacity: 170 lots
- 170 detached houses
- 75% of residents from other states

SERVICES AVAILABLE:

Recreation:

- clubhouse
- fishing
- garden plot
- golf on site
- greenhouse
- marina
- pool
- social director
- spa/hydrotherapy
- pool
- tennis
- visitor tours
- walking path
- woodworking shop

Health-Related:

- assisted living plan
- medical center
- nurse on staff
- nursing home on site
- nursing home privileges
- 24-hour front desk

Other:

- emergency telephone
- communications
- congregate meal plan
- neighborhood watch
- program
- handicapped accom.

- security patrol
- security gate
- transportation
- service
- homeowners' assoc.
- entrance fee/deposit
- donation required
- fee simple ownership
- maintenance fee
- rental agreements
- available
- income requirements
- age eligibility
- requirements

CONTRACTUAL INFORMATION:

- | | <u>YES</u> | <u>NO</u> |
|---|------------|------------|
| 1. Is there a contractual agreement? | _____ | <u>n/a</u> |
| 2. Is the retirement community government subsidized? | _____ | <u>n/a</u> |
| 3. Is the retirement community church related? Which denomination? _____ | _____ | <u>n/a</u> |
| 4. Does the contract specify services included in the monthly charge and those requiring additional charge? _____ | _____ | <u>n/a</u> |
| 5. Is the refund method outlined in contract? | _____ | <u>n/a</u> |
| 6. How is information on the financial soundness of the community shared with residents? <u>N/A</u> | | |
| 7. What is the policy regarding residents who become insolvent? | | |
| <u>N/A</u> | | |
| 8. What is the resident's financial responsibility should he/she be transferred to a nursing facility? <u>N/A</u> | | |
| 9. What is the length of time the living unit will be maintained in the event of temporary nursing home placement? <u>N/A</u> | | |

INTEREST POINTS:

- | | | | |
|---------------------------------|-----------|----------------------------|------------|
| -Miles to nearest hospital | <u>35</u> | -Miles to nearest grocery | <u>1</u> |
| -Miles to nearest major airport | <u>60</u> | -Miles to Blue Ridge Mtns. | <u>250</u> |
| -Miles to nearest shopping mall | <u>2</u> | -Miles to Atlantic Ocean | <u>70</u> |

THE METHODIST HOME
 1000 Live Oak Dr., S.W.
 P.O. Box 327
 Orangeburg, S.C. 29116
 (803) 534-1212

Orangeburg County

Rev. C. Bunton Sheffield, Exec. Director

TYPE OF FACILITY: RETIREMENT & CONTINUING CARE COMMUNITY

- Residential capacity: 375
- 271 apartments & duplexes
- 6% of residents from other states

SERVICES AVAILABLE:

Recreation:

- clubhouse
- fishing
- garden plot
- golf on site
- greenhouse
- marina
- pool
- social director
- spa/hydrotherapy
- pool
- tennis
- visitor tours
- walking path
- woodworking shop

Health-Related:

- assisted living plan
- medical center
- nurse on staff
- nursing home on site
- nursing home privileges
- 24-hour front desk

Other:

- emergency telephone communications
- congregate meal plan
- neighborhood watch program
- handicapped accom.

- security patrol
- security gate
- transportation service
- homeowners' assoc.
- entrance fee/deposit donation required
- fee simple ownership
- maintenance fee
- rental agreements available
- income requirements
- age eligibility requirements

CONTRACTUAL INFORMATION:

- | | <u>YES</u> | <u>NO</u> |
|---|---------------|---------------|
| 1. Is there a contractual agreement? | <u>X</u> | <u> </u> |
| 2. Is the retirement community government subsidized? | <u> </u> | <u>X</u> |
| 3. Is the retirement community church related? Which denomination? <u>United Methodist</u> | <u>X</u> | <u> </u> |
| 4. Does the contract specify services included in the monthly charge and those requiring additional charge? | <u>X</u> | <u> </u> |
| 5. Is the refund method outlined in contract? | <u> </u> | <u>n/a</u> |
| 6. How is information on the financial soundness of the community shared with residents? <u>Resident makes no investment.</u> | | |
| 7. What is the policy regarding residents who become insolvent? | | |

At present, Church or Medicaid supports them.

8. What is the resident's financial responsibility should he/she be transferred to a nursing facility? None

9. What is the length of time the living unit will be maintained in the event of temporary nursing home placement? As long as

resident wants to maintain the unit.

INTEREST POINTS:

- | | | | |
|---------------------------------|-----------|----------------------------|------------|
| -Miles to nearest hospital | <u>12</u> | -Miles to nearest grocery | <u>3</u> |
| -Miles to nearest major airport | <u>40</u> | -Miles to Blue Ridge Mtns. | <u>180</u> |
| -Miles to nearest shopping mall | <u>8</u> | -Miles to Atlantic Ocean | <u>90</u> |

**PECAN GROVE
ELDERLY HOUSING
1820 St. Matthews Road
Orangeburg, SC 29115
(803) 534-0815
Nona Adkins, Manager**

Orangeburg County

TYPE OF FACILITY: RETIREMENT & CONTINUING CARE COMMUNITY

- Residential capacity: 75
- 75 garden apartments
- 75% of residents from other states

SERVICES AVAILABLE:

<u>Recreation:</u>	<u>Health-Related:</u>	
<input type="checkbox"/> clubhouse	<input type="checkbox"/> assisted living plan	<input type="checkbox"/> security patrol
<input type="checkbox"/> fishing	<input type="checkbox"/> medical center	<input type="checkbox"/> security gate
<input type="checkbox"/> garden plot	<input type="checkbox"/> nurse on staff	<input type="checkbox"/> transportation service
<input type="checkbox"/> golf on site	<input type="checkbox"/> nursing home on site	<input type="checkbox"/> homeowners' assoc.
<input type="checkbox"/> greenhouse	<input type="checkbox"/> nursing home privileges	<input type="checkbox"/> entrance fee/deposit
<input type="checkbox"/> marina	<input type="checkbox"/> 24-hour front desk	<input type="checkbox"/> donation required
<input type="checkbox"/> pool		<input type="checkbox"/> fee simple ownership
<input type="checkbox"/> social director	<u>Other:</u>	<input type="checkbox"/> maintenance fee
<input type="checkbox"/> spa/hydrotherapy pool	<input type="checkbox"/> emergency telephone communications	<input type="checkbox"/> rental agreements available
<input type="checkbox"/> tennis	<input type="checkbox"/> congregate meal plan	<input type="checkbox"/> income requirements
<input type="checkbox"/> visitor tours	<input type="checkbox"/> neighborhood watch program	<input type="checkbox"/> age eligibility requirements
<input type="checkbox"/> walking path		
<input type="checkbox"/> woodworking shop	<input checked="" type="checkbox"/> handicapped accom.	

CONTRACTUAL INFORMATION:

	<u>YES</u>	<u>NO</u>
1. Is there a contractual agreement?	_____	<u>X</u>
2. Is the retirement community government subsidized?	<u>X</u>	_____
3. Is the retirement community church related? Which denomination? <u>7th Day Adventist</u>	<u>X</u>	_____
4. Does the contract specify services included in the monthly charge and those requiring additional charge? _____	_____	<u>n/a</u>
5. Is the refund method outlined in contract?	<u>X</u>	_____
6. How is information on the financial soundness of the community shared with residents? <u>N/A</u>	_____	_____
7. What is the policy regarding residents who become insolvent?	_____	_____

Personal conversations with families or DSS (Protective Services)

8. What is the resident's financial responsibility should he/she be transferred to a nursing facility? None
-
9. What is the length of time the living unit will be maintained in the event of temporary nursing home placement? 4 to 5 months

INTEREST POINTS:

-Miles to nearest hospital	<u>2</u>	-Miles to nearest grocery	<u>2</u>
-Miles to nearest major airport	<u>45</u>	-Miles to Blue Ridge Mtns.	<u>90</u>
-Miles to nearest shopping mall	<u>2</u>	-Miles to Atlantic Ocean	<u>70</u>

SANTEE COOPER RESORT
S.C. Highway 6
P.O. Box 486
Santee, S.C. 29142
(803) 854-2900
Bob Hickman, President

Orangeburg County

TYPE OF FACILITY: RETIREMENT COMMUNITY

- Residential capacity: 450
- 110 detached houses, villas
- 65% of residents from other states

SERVICES AVAILABLE:

<u>Recreation:</u>	<u>Health-Related:</u>	
<input checked="" type="checkbox"/> clubhouse	<input type="checkbox"/> assisted living plan	<input type="checkbox"/> security patrol
<input checked="" type="checkbox"/> fishing	<input type="checkbox"/> medical center	<input checked="" type="checkbox"/> security gate
<input checked="" type="checkbox"/> garden plot	<input type="checkbox"/> nurse on staff	<input type="checkbox"/> transportation service
<input checked="" type="checkbox"/> golf on site	<input type="checkbox"/> nursing home on site	<input checked="" type="checkbox"/> homeowners' assoc.
<input type="checkbox"/> greenhouse	<input type="checkbox"/> nursing home privileges	<input checked="" type="checkbox"/> entrance fee/deposit donation required
<input checked="" type="checkbox"/> marina	<input type="checkbox"/> 24-hour front desk	<input checked="" type="checkbox"/> fee simple ownership
<input type="checkbox"/> pool		<input checked="" type="checkbox"/> maintenance fee
<input type="checkbox"/> social director	<u>Other:</u>	<input checked="" type="checkbox"/> rental agreements available
<input type="checkbox"/> spa/hydrotherapy pool	<input checked="" type="checkbox"/> emergency telephone communications	<input type="checkbox"/> income requirements
<input checked="" type="checkbox"/> tennis	<input type="checkbox"/> congregate meal plan	<input type="checkbox"/> age eligibility requirements
<input type="checkbox"/> visitor tours	<input checked="" type="checkbox"/> neighborhood watch program	
<input checked="" type="checkbox"/> walking path	<input type="checkbox"/> handicapped accom.	
<input type="checkbox"/> woodworking shop		

CONTRACTUAL INFORMATION:

	<u>YES</u>	<u>NO</u>
1. Is there a contractual agreement?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
2. Is the retirement community government subsidized?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
3. Is the retirement community church related? Which denomination? _____	<input type="checkbox"/>	<input checked="" type="checkbox"/>
4. Does the contract specify services included in the monthly charge and those requiring additional charge?	<input type="checkbox"/>	<u>n/a</u>
5. Is the refund method outlined in contract?	<input type="checkbox"/>	<u>n/a</u>
6. How is information on the financial soundness of the community shared with residents? <u>Through independent annual audits</u>		
7. What is the policy regarding residents who become insolvent?		
<u>N/A</u>		
8. What is the resident's financial responsibility should he/she be transferred to a nursing facility? <u>N/A</u>		
9. What is the length of time the living unit will be maintained in the event of temporary nursing home placement? <u>N/A</u>		

INTEREST POINTS:

-Miles to nearest hospital	<u>23</u>	-Miles to nearest grocery	<u>2</u>
-Miles to nearest major airport	<u>55</u>	-Miles to Blue Ridge Mtns.	<u>100</u>
-Miles to nearest shopping mall	<u>2</u>	-Miles to Atlantic Ocean	<u>110</u>

CLEMSON DOWNS
500 Downs Loop
Clemson, S.C. 29631
(803) 654-1155

Pickens County

R. Reinhart, Exec. Director

TYPE OF FACILITY: RETIREMENT & CONTINUING CARE COMMUNITY

- Residential capacity: 390
- 206 detached houses, apartments, & duplexes
- 30% of residents from other states

SERVICES AVAILABLE:

- | | | |
|---|--|--|
| <u>Recreation:</u> | <u>Health-Related:</u> | |
| <input checked="" type="checkbox"/> clubhouse | <input type="checkbox"/> assisted living plan | <input type="checkbox"/> security patrol |
| <input type="checkbox"/> fishing | <input checked="" type="checkbox"/> medical center | <input type="checkbox"/> security gate |
| <input checked="" type="checkbox"/> garden plot | <input checked="" type="checkbox"/> nurse on staff | <input checked="" type="checkbox"/> transportation service |
| <input type="checkbox"/> golf on site | <input checked="" type="checkbox"/> nursing home on site | <input checked="" type="checkbox"/> homeowners' assoc. |
| <input type="checkbox"/> greenhouse | <input checked="" type="checkbox"/> nursing home privileges | <input checked="" type="checkbox"/> entrance fee/deposit donation required |
| <input type="checkbox"/> marina | <input type="checkbox"/> 24-hour front desk | <input checked="" type="checkbox"/> fee simple ownership maintenance fee |
| <input type="checkbox"/> pool | | <input checked="" type="checkbox"/> rental agreements available |
| <input type="checkbox"/> social director | <u>Other:</u> | <input checked="" type="checkbox"/> income requirements |
| <input type="checkbox"/> spa/hydrotherapy pool | <input checked="" type="checkbox"/> emergency telephone communications | <input checked="" type="checkbox"/> age eligibility requirements |
| <input type="checkbox"/> tennis | <input checked="" type="checkbox"/> congregate meal plan | |
| <input checked="" type="checkbox"/> visitor tours | <input type="checkbox"/> neighborhood watch program | |
| <input checked="" type="checkbox"/> walking path | <input type="checkbox"/> handicapped accom. | |
| <input type="checkbox"/> woodworking shop | | |

CONTRACTUAL INFORMATION:

- | | <u>YES</u> | <u>NO</u> |
|--|---------------|---------------|
| 1. Is there a contractual agreement? | <u>X</u> | <u> </u> |
| 2. Is the retirement community government subsidized? | <u> </u> | <u>X</u> |
| 3. Is the retirement community church related? Which denomination? _____ | <u> </u> | <u>X</u> |
| 4. Does the contract specify services included in the monthly charge and those requiring additional charge? | <u>X</u> | <u> </u> |
| 5. Is the refund method outlined in contract? | <u>X</u> | <u> </u> |
| 6. How is information on the financial soundness of the community shared with residents? <u>Copy of audit report</u> | | |
| 7. What is the policy regarding residents who become insolvent? | | |

- Must leave
8. What is the resident's financial responsibility should he/she be transferred to a nursing facility? Insurance pay, Medicare certified or private pay
9. What is the length of time the living unit will be maintained in the event of temporary nursing home placement? Indefinitely if paid for

INTEREST POINTS:

- | | | | |
|---------------------------------|-----------|----------------------------|------------|
| -Miles to nearest hospital | <u>10</u> | -Miles to nearest grocery | <u>2</u> |
| -Miles to nearest major airport | <u>25</u> | -Miles to Blue Ridge Mtns. | <u>20</u> |
| -Miles to nearest shopping mall | <u>3</u> | -Miles to Atlantic Ocean | <u>300</u> |

COUNTRYSIDE MANOR
706 Pelzer Highway
P.O. Box 1423
Easley, SC 29640
(803) 859-0167
Dee Hook, Administrator

Pickens County

TYPE OF FACILITY: RETIREMENT & CONTINUING CARE COMMUNITY

- Residential capacity: 160
- 145 apartments & residential care unit
- % of residents from other states

SERVICES AVAILABLE:

<u>Recreation:</u>	<u>Health-Related:</u>	
<input checked="" type="checkbox"/> clubhouse	<input checked="" type="checkbox"/> assisted living plan	<input checked="" type="checkbox"/> security patrol
<input type="checkbox"/> fishing	<input type="checkbox"/> medical center	<input type="checkbox"/> security gate
<input checked="" type="checkbox"/> garden plot	<input checked="" type="checkbox"/> nurse on staff	<input checked="" type="checkbox"/> transportation service
<input type="checkbox"/> golf on site	<input type="checkbox"/> nursing home on site	<input type="checkbox"/> homeowners' assoc.
<input type="checkbox"/> greenhouse	<input type="checkbox"/> nursing home privileges	<input checked="" type="checkbox"/> entrance fee/deposit donation required
<input type="checkbox"/> marina	<input checked="" type="checkbox"/> 24-hour front desk	<input type="checkbox"/> fee simple ownership
<input type="checkbox"/> pool		<input checked="" type="checkbox"/> maintenance fee
<input checked="" type="checkbox"/> social director	<u>Other:</u>	<input checked="" type="checkbox"/> rental agreements available
<input type="checkbox"/> spa/hydrotherapy pool	<input checked="" type="checkbox"/> emergency telephone communications	<input type="checkbox"/> income requirements
<input type="checkbox"/> tennis	<input checked="" type="checkbox"/> congregate meal plan	<input checked="" type="checkbox"/> age eligibility requirements
<input checked="" type="checkbox"/> visitor tours	<input checked="" type="checkbox"/> neighborhood watch program	
<input checked="" type="checkbox"/> walking path	<input checked="" type="checkbox"/> handicapped accom.	
<input type="checkbox"/> woodworking shop		

CONTRACTUAL INFORMATION:

- | | <u>YES</u> | <u>NO</u> |
|--|--------------|--------------|
| 1. Is there a contractual agreement? | <u> X </u> | <u> </u> |
| 2. Is the retirement community government subsidized? | <u> </u> | <u> X </u> |
| 3. Is the retirement community church related? Which denomination? _____ | <u> </u> | <u> X </u> |
| 4. Does the contract specify services included in the monthly charge and those requiring additional charge? <u> </u> | <u> X </u> | <u> </u> |
| 5. Is the refund method outlined in contract? | <u> X </u> | <u> </u> |
| 6. How is information on the financial soundness of the community shared with residents? <u>In writing upon request</u> | | |
| 7. What is the policy regarding residents who become insolvent?
<u>Family must assume responsibility.</u> | | |
| 8. What is the resident's financial responsibility should he/she be transferred to a nursing facility? <u>Family must assume responsibility.</u> | | |
| 9. What is the length of time the living unit will be maintained in the event of temporary nursing home placement? <u>60-90 days</u> | | |

INTEREST POINTS:

-Miles to nearest hospital	<u> 4 </u>	-Miles to nearest grocery	<u> 4 </u>
-Miles to nearest major airport	<u> 40 </u>	-Miles to Blue Ridge Mtns.	<u> 75 </u>
-Miles to nearest shopping mall	<u> 4 </u>	-Miles to Atlantic Ocean	<u> 250 </u>

CHRISTOPHER TOWERS
1805 Devine Street
Columbia, SC 29201
(803) 799-5876

Richland County

A.C. Yost, Property Manager in Charge

TYPE OF FACILITY: RETIREMENT COMMUNITY

- Residential capacity: 225
- 225 high rise & apartments
- 5% of residents from other states

SERVICES AVAILABLE:

Recreation:

- clubhouse
- fishing
- garden plot
- golf on site
- greenhouse
- marina
- pool
- social director
- spa/hydrotherapy
- pool
- tennis
- visitor tours
- walking path
- woodworking shop

Health-Related:

- assisted living plan
- medical center
- nurse on staff
- nursing home on site
- nursing home privileges
- 24-hour front desk

Other:

- emergency telephone communications
- congregate meal plan
- neighborhood watch program
- handicapped accom.

- security patrol
- security gate
- transportation service
- homeowners' assoc.
- entrance fee/deposit donation required
- fee simple ownership
- maintenance fee
- rental agreements available
- income requirements
- age eligibility requirements

CONTRACTUAL INFORMATION:

- | | <u>YES</u> | <u>NO</u> |
|--|------------|-----------|
| 1. Is there a contractual agreement? | <u>X</u> | _____ |
| 2. Is the retirement community government subsidized? | <u>X</u> | _____ |
| 3. Is the retirement community church related? Which denomination? _____ | _____ | <u>X</u> |
| 4. Does the contract specify services included in the monthly charge and those requiring additional charge? _____ | <u>X</u> | _____ |
| 5. Is the refund method outlined in contract? | <u>X</u> | _____ |
| 6. How is information on the financial soundness of the community shared with residents? _____ | _____ | _____ |
| 7. What is the policy regarding residents who become insolvent? _____ | _____ | _____ |
| 8. What is the resident's financial responsibility should he/she be transferred to a nursing facility? _____ | _____ | _____ |
| 9. What is the length of time the living unit will be maintained in the event of temporary nursing home placement? _____ | _____ | _____ |

INTEREST POINTS:

- Miles to nearest hospital 1
- Miles to nearest major airport 3
- Miles to nearest shopping mall 1
- Miles to nearest grocery .4
- Miles to Blue Ridge Mtns. 100
- Miles to Atlantic Ocean 160

ENSOR FOREST
4520 Monticello Road
Columbia, S.C. 29203
(803) 765-9515
Brenda P. Johnson, Manager

Richland County

TYPE OF FACILITY: RETIREMENT COMMUNITY

- Residential capacity: 69
- 69 villas
- 15% of residents from other states

SERVICES AVAILABLE:

Recreation:

- clubhouse
- fishing
- garden plot
- golf on site
- greenhouse
- marina
- pool
- social director
- spa/hydrotherapy pool
- tennis
- visitor tours
- walking path
- woodworking shop

Health-Related:

- assisted living plan
- medical center
- nurse on staff
- nursing home on site
- nursing home privileges
- 24-hour front desk

Other:

- emergency telephone communications
- congregate meal plan
- neighborhood watch program
- handicapped accom.

- security patrol
- security gate
- transportation service
- homeowners' assoc.
- entrance fee/deposit donation required
- fee simple ownership
- maintenance fee
- rental agreements available
- income requirements
- age eligibility requirements

CONTRACTUAL INFORMATION:

- | | <u>YES</u> | <u>NO</u> |
|---|---------------|---------------|
| 1. Is there a contractual agreement? | <u>X</u> | <u> </u> |
| 2. Is the retirement community government subsidized? | <u>X</u> | <u> </u> |
| 3. Is the retirement community church related? Which denomination? _____ | <u> </u> | <u>X</u> |
| 4. Does the contract specify services included in the monthly charge and those requiring additional charge? | <u>X</u> | <u> </u> |
| 5. Is the refund method outlined in contract? | <u>X</u> | <u> </u> |
| 6. How is information on the financial soundness of the community shared with residents? <u>n/a</u> | <u> </u> | <u> </u> |
| 7. What is the policy regarding residents who become insolvent?
<u>n/a</u> | <u> </u> | <u> </u> |
| 8. What is the resident's financial responsibility should he/she be transferred to a nursing facility? <u>Lease ends on last day of stay or when family moves resident out for permanent placement.</u> | <u> </u> | <u> </u> |
| 9. What is the length of time the living unit will be maintained in the event of temporary nursing home placement? <u>3 months</u> | <u> </u> | <u> </u> |

INTEREST POINTS:

- Miles to nearest hospital 2
- Miles to nearest major airport 10
- Miles to nearest shopping mall 1.3
- Miles to nearest grocery .5
- Miles to Blue Ridge Mtns. 150
- Miles to Atlantic Ocean 160

FINLAY HOUSE
2100 Blossom Street
Columbia, S.C. 29205
(803) 799-6524
Carol Reis, Exec. Director

Richland County

TYPE OF FACILITY: RETIREMENT COMMUNITY

- Residential capacity: 203
- 203 high rise
- % of residents from other states

SERVICES AVAILABLE:

- | | | |
|--|--|--|
| <p><u>Recreation:</u></p> <ul style="list-style-type: none"> <u> </u> clubhouse <u> </u> fishing <u>X</u> garden plot <u> </u> golf on site <u> </u> greenhouse <u> </u> marina <u> </u> pool <u>X</u> social director <u> </u> spa/hydrotherapy <u> </u> pool <u> </u> tennis <u> </u> visitor tours <u> </u> walking path <u>X</u> woodworking shop | <p><u>Health-Related:</u></p> <ul style="list-style-type: none"> <u> </u> assisted living plan <u> </u> medical center <u> </u> nurse on staff <u> </u> nursing home on site <u> </u> nursing home privileges <u>X</u> 24-hour front desk <p><u>Other:</u></p> <ul style="list-style-type: none"> <u>X</u> emergency telephone communications <u>X</u> congregate meal plan <u> </u> neighborhood watch program <u> </u> handicapped accom. | <ul style="list-style-type: none"> <u> </u> security patrol <u> </u> security gate <u>X</u> transportation service <u> </u> homeowners' assoc. <u> </u> entrance fee/deposit donation required <u> </u> fee simple ownership <u> </u> maintenance fee <u> </u> rental agreements available <u>X</u> income requirements <u>X</u> age eligibility requirements |
|--|--|--|

CONTRACTUAL INFORMATION:

- | | <u>YES</u> | <u>NO</u> |
|---|------------|-----------|
| 1. Is there a contractual agreement? | <u>X</u> | <u> </u> |
| 2. Is the retirement community government subsidized? | <u>X</u> | <u> </u> |
| 3. Is the retirement community church related? Which denomination? <u>Episcopal</u> | <u>X</u> | <u> </u> |
| 4. Does the contract specify services included in the monthly charge and those requiring additional charge? | <u>X</u> | <u> </u> |
| 5. Is the refund method outlined in contract? | <u> </u> | <u>X</u> |
| 6. How is information on the financial soundness of the community shared with residents? <u>Annual Meeting</u> | <u> </u> | <u> </u> |
| 7. What is the policy regarding residents who become insolvent? | <u> </u> | <u> </u> |
| <u>No policy</u> | <u> </u> | <u> </u> |
| 8. What is the resident's financial responsibility should he/she be transferred to a nursing facility? <u>Payment of monthly rent</u> | <u> </u> | <u> </u> |
| 9. What is the length of time the living unit will be maintained in the event of temporary nursing home placement? <u>3 months</u> | <u> </u> | <u> </u> |

INTEREST POINTS:

- | | | | |
|---------------------------------|--------------|----------------------------|----------------|
| -Miles to nearest hospital | <u> 2 </u> | -Miles to nearest grocery | <u> 1/4 </u> |
| -Miles to nearest major airport | <u> 6 </u> | -Miles to Blue Ridge Mtns. | <u> 250 </u> |
| -Miles to nearest shopping mall | <u> 2 </u> | -Miles to Atlantic Ocean | <u> 100 </u> |

THE LOWMAN HOME
 Lowman Home Barn Road
 P.O. Box 444
 White Rock, SC 29177
 (803) 732-3000

Richland County

Mrs. Louetta A. Slice, N.H.A., Exec. Vice President

TYPE OF FACILITY: RETIREMENT & CONTINUING CARE COMMUNITY

- Residential capacity: 34
- 25 detached houses & duplexes
- 10% of residents from other states

SERVICES AVAILABLE:

<u>Recreation:</u>	<u>Health-Related:</u>	
<input type="checkbox"/> clubhouse	<input type="checkbox"/> assisted living plan	<input checked="" type="checkbox"/> security patrol
<input type="checkbox"/> fishing	<input type="checkbox"/> medical center	<input type="checkbox"/> security gate
<input type="checkbox"/> garden plot	<input checked="" type="checkbox"/> nurse on staff	<input checked="" type="checkbox"/> transportation service
<input type="checkbox"/> golf on site	<input checked="" type="checkbox"/> nursing home on site	<input type="checkbox"/> homeowners' assoc.
<input checked="" type="checkbox"/> greenhouse	<input checked="" type="checkbox"/> nursing home privileges	<input type="checkbox"/> entrance fee/deposit
<input type="checkbox"/> marina	<input checked="" type="checkbox"/> 24-hour front desk	<input type="checkbox"/> donation required
<input type="checkbox"/> pool		<input type="checkbox"/> fee simple ownership
<input type="checkbox"/> social director	<u>Other:</u>	<input checked="" type="checkbox"/> maintenance fee
<input type="checkbox"/> spa/hydrotherapy	<input type="checkbox"/> emergency telephone	<input type="checkbox"/> rental agreements
<input type="checkbox"/> pool	<input type="checkbox"/> communications	<input type="checkbox"/> available
<input type="checkbox"/> tennis	<input type="checkbox"/> congregate meal plan	<input type="checkbox"/> income requirements
<input type="checkbox"/> visitor tours	<input type="checkbox"/> neighborhood watch	<input checked="" type="checkbox"/> age eligibility
<input type="checkbox"/> walking path	<input type="checkbox"/> program	<input type="checkbox"/> requirements
<input type="checkbox"/> woodworking shop	<input type="checkbox"/> handicapped accom.	

CONTRACTUAL INFORMATION:

- | | <u>YES</u> | <u>NO</u> |
|---|---------------|---------------|
| 1. Is there a contractual agreement? | <u>X</u> | <u> </u> |
| 2. Is the retirement community government subsidized? | <u> </u> | <u>X</u> |
| 3. Is the retirement community church related? Which denomination? <u>Lutheran</u> | <u>X</u> | <u> </u> |
| 4. Does the contract specify services included in the monthly charge and those requiring additional charge? <u> </u> | <u>X</u> | <u> </u> |
| 5. Is the refund method outlined in contract? | <u>X</u> | <u> </u> |
| 6. How is information on the financial soundness of the community shared with residents? <u>n/a</u> | <u> </u> | <u> </u> |
| 7. What is the policy regarding residents who become insolvent? | <u> </u> | <u> </u> |

Residents are asked to pay the full fee for care as long as possible, then arrangements are made to received subsidized care.

8. What is the resident's financial responsibility should he/she be transferred to a nursing facility? Same as above
9. What is the length of time the living unit will be maintained in the event of temporary nursing home placement? Until resident or family member releases unit.

INTEREST POINTS:

-Miles to nearest hospital	<u>19</u>	-Miles to nearest grocery	<u>4</u>
-Miles to nearest major airport	<u>20</u>	-Miles to Blue Ridge Mtns.	<u>100</u>
-Miles to nearest shopping mall	<u>7</u>	-Miles to Atlantic Ocean	<u>100</u>

REGENISIS
Pineland & Greenfield Roads
3025A McNaughton Road
Columbia, SC 29223
(803) 699-4000
Timothy W. O'Leary

Richland County

TYPE OF FACILITY: RETIREMENT & CONTINUING CARE COMMUNITY

- Residential capacity: 400
- 106 villas in Phase I
- % of residents from other states

SERVICES AVAILABLE:

- | | | |
|---|---|---|
| <p><u>Recreation:</u></p> <ul style="list-style-type: none"> <u> </u> clubhouse <u> </u> fishing <u> </u> garden plot <u>X</u> golf <u> </u> greenhouse <u> </u> marina <u>X</u> pool <u>X</u> social director <u> </u> spa/hydrotherapy pool <u>X</u> tennis <u> </u> visitor tours <u>X</u> walking path <u> </u> woodworking shop | <p><u>Health-Related:</u></p> <ul style="list-style-type: none"> <u>X</u> assisted living plan <u>X</u> medical center <u>X</u> nurse on staff <u>X</u> nursing home on site <u>X</u> nursing home privileges <u>X</u> 24-hour front desk <p><u>Other:</u></p> <ul style="list-style-type: none"> <u>X</u> emergency telephone communications <u>X</u> congregate meal plan <u>X</u> neighborhood watch program <u>X</u> handicapped accom. | <ul style="list-style-type: none"> <u> </u> security patrol <u> </u> security gate <u>X</u> transportation service <u> </u> homeowners' assoc. <u>X</u> entrance fee/deposit donation required <u> </u> fee simple ownership <u> </u> maintenance fee <u>X</u> rental agreements available <u>X</u> income requirements <u> </u> age eligibility requirements |
|---|---|---|

CONTRACTUAL INFORMATION:

- | | <u>YES</u> | <u>NO</u> |
|---|------------|-----------|
| 1. Is there a contractual agreement? | <u>X</u> | <u> </u> |
| 2. Is the retirement community government subsidized? | <u>n/a</u> | <u> </u> |
| 3. Is the retirement community church related? Which denomination? _____ | <u> </u> | <u>X</u> |
| 4. Does the contract specify services included in the monthly charge and those requiring additional charge? <u> </u> | <u>X</u> | <u> </u> |
| 5. Is the refund method outlined in contract? | <u>n/a</u> | <u> </u> |
| 6. How is information on the financial soundness of the community shared with residents? <u>Bank references</u> | <u> </u> | <u> </u> |
| 7. What is the policy regarding residents who become insolvent? | <u> </u> | <u> </u> |

Residents must be maximum Social Security to qualify so insolvency is not a problem.

8. What is the resident's financial responsibility should he/she be transferred to a nursing facility? Lessee is responsible only

for one month.

9. What is the length of time the living unit will be maintained in the event of temporary nursing home placement? See above. Many or temporary nursing home stays are included in our insurance program.

INTEREST POINTS:

- | | | | |
|---------------------------------|---------------|----------------------------|---------------|
| -Miles to nearest hospital | <u> 7 </u> | -Miles to nearest grocery | <u> .5 </u> |
| -Miles to nearest major airport | <u> 16 </u> | -Miles to Blue Ridge Mtns. | <u> </u> |
| -Miles to nearest shopping mall | <u> 2 </u> | -Miles to Atlantic Ocean | <u> </u> |

SKYLYN PLACE
1705 Skylyn Dr.
Spartanburg, S.C. 29302
(803) 582-6838

Spartanburg County

Ms. Freddie Jones, Marketing Director

TYPE OF FACILITY: RETIREMENT & CONTINUING CARE COMMUNITY

- Residential capacity: 240
- 240 apartments
- 35% of residents from other states

SERVICES AVAILABLE:

<u>Recreation:</u>	<u>Health-Related:</u>	
<input checked="" type="checkbox"/> clubhouse	<input type="checkbox"/> assisted living plan	<input checked="" type="checkbox"/> security patrol
<input type="checkbox"/> fishing	<input checked="" type="checkbox"/> medical center	<input checked="" type="checkbox"/> security gate
<input type="checkbox"/> garden plot	<input checked="" type="checkbox"/> nurse on staff	<input checked="" type="checkbox"/> transportation service
<input type="checkbox"/> golf on site	<input checked="" type="checkbox"/> nursing home on site	<input type="checkbox"/> homeowners' assoc.
<input type="checkbox"/> greenhouse	<input checked="" type="checkbox"/> nursing home privileges	<input type="checkbox"/> entrance fee/deposit
<input type="checkbox"/> marina	<input checked="" type="checkbox"/> 24-hour front desk	<input type="checkbox"/> donation required
<input type="checkbox"/> pool		<input type="checkbox"/> fee simple ownership
<input checked="" type="checkbox"/> social director	<u>Other:</u>	<input type="checkbox"/> maintenance fee
<input type="checkbox"/> spa/hydrotherapy pool	<input checked="" type="checkbox"/> emergency telephone communications	<input checked="" type="checkbox"/> rental agreements available
<input type="checkbox"/> tennis	<input checked="" type="checkbox"/> congregate meal plan	<input type="checkbox"/> income requirements
<input checked="" type="checkbox"/> visitor tours	<input checked="" type="checkbox"/> neighborhood watch program	<input checked="" type="checkbox"/> age eligibility requirements
<input checked="" type="checkbox"/> walking path		
<input type="checkbox"/> woodworking shop	<input checked="" type="checkbox"/> handicapped accom.	

CONTRACTUAL INFORMATION:

- | | <u>YES</u> | <u>NO</u> |
|--|---------------|---------------|
| 1. Is there a contractual agreement? | <u>X</u> | <u> </u> |
| 2. Is the retirement community government subsidized? | <u> </u> | <u>X</u> |
| 3. Is the retirement community church related? Which denomination? _____ | <u> </u> | <u>X</u> |
| 4. Does the contract specify services included in the monthly charge and those requiring additional charge? | <u>X</u> | <u> </u> |
| 5. Is the refund method outlined in contract? | <u> </u> | <u>X</u> |
| 6. How is information on the financial soundness of the community shared with residents? <u>As requested</u> | | |
| 7. What is the policy regarding residents who become insolvent? | | |

Dealt with on an individual basis

8. What is the resident's financial responsibility should he/she be transferred to a nursing facility? Depends on extent of stay
9. What is the length of time the living unit will be maintained in the event of temporary nursing home placement? As long as needed

INTEREST POINTS:

-Miles to nearest hospital	<u>.2</u>	-Miles to nearest grocery	<u>2</u>
-Miles to nearest major airport	<u>15</u>	-Miles to Blue Ridge Mtns.	<u>45</u>
-Miles to nearest shopping mall	<u>2</u>	-Miles to Atlantic Ocean	<u>175</u>

WHITE OAK ESTATES
400 Webber Road
Spartanburg, SC 29302
(803) 579-7004

Spartanburg County

Carol Tesh, Acting Administrator

TYPE OF FACILITY: RETIREMENT & CONTINUING CARE COMMUNITY

- Residential capacity: 156
- 78 apartments (ground level)
- 20% of residents from other states

SERVICES AVAILABLE:

<u>Recreation:</u>		<u>Health-Related:</u>	
<input checked="" type="checkbox"/> clubhouse	<input checked="" type="checkbox"/> assisted living plan	<input checked="" type="checkbox"/> security patrol	
<input type="checkbox"/> fishing	<input checked="" type="checkbox"/> medical center	<input type="checkbox"/> security gate	
<input checked="" type="checkbox"/> garden plot	<input type="checkbox"/> nurse on staff	<input checked="" type="checkbox"/> transportation	
<input type="checkbox"/> golf on site	<input checked="" type="checkbox"/> nursing home on site	<input type="checkbox"/> service	
<input type="checkbox"/> greenhouse	<input checked="" type="checkbox"/> nursing home privileges	<input type="checkbox"/> homeowners' assoc.	
<input type="checkbox"/> marina	<input type="checkbox"/> 24-hour front desk	<input checked="" type="checkbox"/> entrance fee/deposit	
<input type="checkbox"/> pool		<input type="checkbox"/> donation required	
<input checked="" type="checkbox"/> social director	<u>Other:</u>	<input checked="" type="checkbox"/> fee simple ownership	
<input checked="" type="checkbox"/> spa/hydrotherapy	<input checked="" type="checkbox"/> emergency telephone	<input checked="" type="checkbox"/> maintenance fee	
<input type="checkbox"/> pool	<input type="checkbox"/> communications	<input checked="" type="checkbox"/> rental agreements	
<input type="checkbox"/> tennis	<input checked="" type="checkbox"/> congregate meal plan	<input type="checkbox"/> available	
<input checked="" type="checkbox"/> visitor tours	<input checked="" type="checkbox"/> neighborhood watch	<input type="checkbox"/> income requirements	
<input checked="" type="checkbox"/> walking path	<input type="checkbox"/> program	<input checked="" type="checkbox"/> age eligibility	
<input type="checkbox"/> woodworking shop	<input checked="" type="checkbox"/> handicapped accom.	<input type="checkbox"/> requirements	

CONTRACTUAL INFORMATION:

	<u>YES</u>	<u>NO</u>
1. Is there a contractual agreement?	<u>X</u>	<u> </u>
2. Is the retirement community government subsidized?	<u> </u>	<u>X</u>
3. Is the retirement community church related? Which denomination?	<u> </u>	<u>X</u>
4. Does the contract specify services included in the monthly charge and those requiring additional charge?	<u>X</u>	<u> </u>
5. Is the refund method outlined in contract?	<u>X</u>	<u> </u>
6. How is information on the financial soundness of the community shared with residents? <u>Audited financial statement</u>		
7. What is the policy regarding residents who become insolvent?		

N/A - It has never occurred. Apartment agreement covers past due and non-payment policies.

8. What is the resident's financial responsibility should he/she be transferred to a nursing facility? 100% except 10 free days

during calendar year.

9. What is the length of time the living unit will be maintained in the event of temporary nursing home placement? Advice of doctor

to 90 days

INTEREST POINTS:

-Miles to nearest hospital	<u>3</u>	-Miles to nearest grocery	<u>1</u>
-Miles to nearest major airport	<u>20</u>	-Miles to Blue Ridge Mtns.	<u>30</u>
-Miles to nearest shopping mall	<u>1</u>	-Miles to Atlantic Ocean	<u>160</u>

WESTMINSTER TOWERS
1330 India Hook Road
Rock Hill, S.C. 29730
(803) 327-2344

York County

Paul L. Majors, Exec. Director

TYPE OF FACILITY: RETIREMENT & CONTINUING CARE COMMUNITY

- Residential capacity: 300
- 164 high rise
- 5% of residents from other states

SERVICES AVAILABLE:

- | | | |
|--|--|--|
| <u>Recreation:</u> | <u>Health-Related:</u> | |
| <input checked="" type="checkbox"/> clubhouse | <input checked="" type="checkbox"/> assisted living plan | <input checked="" type="checkbox"/> security patrol |
| <input type="checkbox"/> fishing | <input type="checkbox"/> medical center | <input checked="" type="checkbox"/> security gate |
| <input type="checkbox"/> garden plot | <input checked="" type="checkbox"/> nurse on staff | <input checked="" type="checkbox"/> transportation service |
| <input type="checkbox"/> golf on site | <input checked="" type="checkbox"/> nursing home on site | <input type="checkbox"/> homeowners' assoc. |
| <input type="checkbox"/> greenhouse | <input type="checkbox"/> nursing home privileges | <input checked="" type="checkbox"/> entrance fee/deposit donation required |
| <input type="checkbox"/> marina | <input checked="" type="checkbox"/> 24-hour front desk | <input type="checkbox"/> fee simple ownership |
| <input checked="" type="checkbox"/> pool (Indoor) | | <input checked="" type="checkbox"/> maintenance fee |
| <input checked="" type="checkbox"/> social director | <u>Other:</u> | <input type="checkbox"/> rental agreements available |
| <input type="checkbox"/> spa/hydrotherapy | <input checked="" type="checkbox"/> emergency telephone communications | <input checked="" type="checkbox"/> income requirements |
| <input type="checkbox"/> pool | <input checked="" type="checkbox"/> congregate meal plan | <input checked="" type="checkbox"/> age eligibility requirements |
| <input type="checkbox"/> tennis | <input type="checkbox"/> neighborhood watch program | |
| <input checked="" type="checkbox"/> visitor tours | <input type="checkbox"/> handicapped accom. | |
| <input checked="" type="checkbox"/> walking path | | |
| <input checked="" type="checkbox"/> woodworking shop | | |

CONTRACTUAL INFORMATION:

- | | <u>YES</u> | <u>NO</u> |
|--|---------------|---------------|
| 1. Is there a contractual agreement? | <u>X</u> | <u> </u> |
| 2. Is the retirement community government subsidized? | <u> </u> | <u>X</u> |
| 3. Is the retirement community church related? Which denomination? <u>Presbyterian (open)</u> | <u>X</u> | <u> </u> |
| 4. Does the contract specify services included in the monthly charge and those requiring additional charge? | <u>X</u> | <u> </u> |
| 5. Is the refund method outlined in contract? | <u>X</u> | <u> </u> |
| 6. How is information on the financial soundness of the community shared with residents? <u>It will be given once we open to the resident council for review & dissemination to other residents.</u> | | |
| 7. What is the policy regarding residents who become insolvent? | | |

We will attempt to keep resident in-house through endowments.

8. What is the resident's financial responsibility should he/she be transferred to a nursing facility? Pay fees associated with

nursing facility - we will put their independent unit back on market if appropriate.

9. What is the length of time the living unit will be maintained in the event of temporary nursing home placement? Until the attending physician decides the resident is unable to live independently.

INTEREST POINTS:

- | | | | |
|---------------------------------|-----------|----------------------------|---------------|
| -Miles to nearest hospital | <u>2</u> | -Miles to nearest grocery | <u>.5</u> |
| -Miles to nearest major airport | <u>20</u> | -Miles to Blue Ridge Mtns. | <u> </u> |
| -Miles to nearest shopping mall | <u>.5</u> | -Miles to Atlantic Ocean | <u> </u> |