



Protecting, Maintaining and Improving the Health of All Minnesotans

Electronically Delivered

April 2, 2026

Licensee
Creskide Cottage Assisted Living
1190 117th Avenue Northwest
Coon Rapids, MN 55448

RE: Project Number(s) SL24666016

Dear Licensee:

On November 12, 2025, the Minnesota Department of Health completed a follow-up survey of your facility to determine correction of orders from the survey completed on August 20, 2025. This follow-up survey verified that the facility is in substantial compliance.

You are encouraged to retain this document for your records. It is your responsibility to share the information contained in the letter with your organization's Governing Body.

Please feel free to call me with any questions.

Sincerely,

A handwritten signature in black ink that reads 'Stephanie Jones de Palma'.

Stephanie Jones de Palma, Supervisor
State Engineering Services Section
Email: stephanie.jones.de.palma@state.mn.us
Telephone: 651-201-4320 Fax: 1-866-890-9290

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