

STATE OF GEORGIA

NARCOTIC TREATMENT PROGRAM PERMIT

This is to certify that a permit is hereby granted to

PITTARD CLINIC II C

This permit is effective October 01, 2007 and remains in effect unless revoked or suspended. This permit is granted pursuant to the authority vested in the Department of Community Health, Official Code of Georgia, Annotated, Section 26-5-2 et seq., and signifies that the provider complies with the Rules and Regulations of the Department of Community Health on the date this license was issued. THIS PERMIT IS NOT TRANSFERABLE Permit No: NTP001041	(City or Town)	. County of STEPHENS	Said facility and premises are located at 1654 FALLS ROAD	(Name of Facility)	named as PITTARD CLINIC	to maintain and operate a DRUG ABUSE TREATMENT AND EDUCATION PROGRAM SPECIALIZING IN ONLY NARCOTIC TREATMENT	(Name of Governing Body)	TI TAKU GENIC, LEG
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GEORGIA DEPARTMENT OF COMMUNITY HEALTH

HEALTHCARE FACILITY REGULATION DIVISION

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Melanie Simon, Division Chief