



GEORGIA DEPARTMENT OF
COMMUNITY HEALTH

STATE OF GEORGIA

NARCOTIC TREATMENT PROGRAM PERMIT

This is to certify that a permit is hereby granted to

GPA TREATMENT, INC.

(Name of Governing Body)

to maintain and operate a **DRUG ABUSE TREATMENT AND EDUCATION PROGRAM SPECIALIZING IN ONLY NARCOTIC TREATMENT**

named as **GPA TREATMENT, INC**

(Name of Facility)

Said facility and premises are located at **4255 CHAMBLEE-TUCKER ROAD**

(Street)

in **DORAVILLE**, County of **DEKALB**, Georgia.

(City or Town)

This permit is effective **April 06, 2004** 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: **NTP001007**

GEORGIA DEPARTMENT OF COMMUNITY HEALTH

HEALTHCARE FACILITY REGULATION DIVISION

Melanie Simon, Division Chief