



STATE OF NEW HAMPSHIRE  
DEPARTMENT OF HEALTH AND HUMAN SERVICES  
OFFICE OF OPERATIONS SUPPORT  
HEALTH FACILITIES ADMINISTRATION  
129 PLEASANT STREET, CONCORD, NH 03301

## LICENSE

Under provisions of New Hampshire Revised Statutes Annotated Chapter RSA 151, a license is issued to:

Licensee: NH REGIONAL COMMUNITY DEVELOPMENT

Name: LACONIA HOUSING & REDEV AUTHORITY

Located at: 25 UNION AVENUE

LACONIA NH 03246

To Operate: Home Health Care Provider

Subtype:

This license is effective under the conditions and for the period stated below:

License#: 02865

Effective Date: 04/01/2026

Expiration Date: 03/31/2027

Administrator: CATHERINE BOWLER

A handwritten signature in black ink, appearing to read "Michael J. Flynn".

Chief Legal Officer