



# State of California

## Department of Social Services

Facility Number: 306005859

Effective Date: 01/06/2021

Total Capacity: 6

In accordance with applicable provisions of the Health and Safety Code of California, and its rules and regulations; the Department of Social Services hereby issues

### this License to

CAMBRIDGE MENTAL HEALTH MANAGEMENT LLC

to operate and maintain a

SOCIAL REHABILITATION FACILITY

### Name of Facility

CAMBRIDGE MENTAL HEALTH  
MANAGEMENT, LLC

4 SUMMIT

IRVINE, CA 92603

This License is not transferable and is granted solely upon the following:

TRANSITIONAL RESIDENTIAL TREATMENT PROGRAM. APPROVED FOR 6 AMBULATORY ONLY.

Client Groups Served:


ADULTS

Complaints regarding services provided in this facility should be directed to:

CCLD Regional Office

(916) 657-2600

Pamela Dickfoss  
Deputy Director,  
Community Care Licensing Division

  
Authorized Representative of Licensing Agency