
Approved Entities

Waiver Number **299**

Primary Entity Name **Cumberland Gardens Housing Development Fund Company**

Primary Address *425 Cumberland St*

Primary Phone Number *(718) 623-8181*

Brooklyn

Current Waiver Issued Beginning Period

NY

5/10/2015

11238-

Current Waiver Ending Period

County

Kings

5/9/2018

Professional Services to be Offered by Qualified Individuals:

<input checked="" type="checkbox"/> Licensed Master Social Work	<input type="checkbox"/> Licensed Marriage and Family Therapy	<input type="checkbox"/> Licensed Psychoanalysis
<input checked="" type="checkbox"/> Licensed Clinical Social Work	<input type="checkbox"/> Licensed Creative Arts Therapy	<input type="checkbox"/> Psychology
<input checked="" type="checkbox"/> Licensed Mental Health Counseling	<input type="checkbox"/> Licensed Behavior Analyst	<input type="checkbox"/> Certified Behavior Analyst Assistant

Additional Sites if any - with Certificate Number

Certificate Number

- -