
Approved Entities

Waiver Number **610**

Primary Entity Name **United Tenants of Albany Inc.**

Primary Address *33 Clinton Avenue*

Primary Phone Number *(518) 436-8997*

Albany

Current Waiver Issued Beginning Period

NY

5/10/2012

12207-

Current Waiver Ending Period

County *Albany*

5/9/2015

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 type="checkbox"/> Licensed Clinical Social Work	<input type="checkbox"/> Licensed Creative Arts Therapy	<input type="checkbox"/> Psychology
<input type="checkbox"/> Licensed Mental Health Counseling		

Additional Sites if any - with Certificate Number

Certificate Number

- -