



# Certificate of Licensure

**Issued to:** WYOMING VALLEY ALCOHOL AND DRUG SERVICES

**Facility No.:** 401216

**Type:** FULL

**THIS CERTIFICATE AUTHORIZES**

WYOMING VALLEY ALCOHOL AND DRUG SERVICES, INC.  
437 NORTH MAIN STREET  
WILKES BARRE, PA 18705

**To Provide The Following Drug and Alcohol Activities Up To The Identified Maximum Number Of Persons**

Outpatient (270)  
Outpatient Other Chemotherapy (0)  
Partial Hospitalization (80)  
Partial Hospitalization Other Chemotherapy (0)

**Approval Date:** May 01, 2026

**Expiration Date:** April 30, 2027



**Pennsylvania  
Department of Drug and  
Alcohol Programs**

*Latika Davis-Jones, PhD, MPH, MSW  
Secretary of Drug and Alcohol Programs*

NOTE: THIS CERTIFICATE OF LICENSURE IS ISSUED TO THE ORGANIZATION NAMED ABOVE AND IS FOR THE PREMISES AND FACILITY NAMED AND IS NOT TRANSFERABLE.