



FOUNTAIN VIEW  
VILLAGE

ASSISTED LIVING & MEMORY CARE  
555 SQ. FT. | One Bedroom, One Bath



Date _____	Community Fee	\$ _____	Monthly Fee	\$ _____
Residence # _____	Deposit	\$ _____	Second Person Fee	\$ _____
By _____	Other _____	\$ _____	Care Package	\$ _____
	Total	\$ _____	Total Monthly Fee	\$ _____

*Floor plan is not to scale and subject to change.  
Square footage, room dimension or window placement may vary.*

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Managed by Life Care Services®    

