

Initial  Unannounced Full/Partial  Follow-up  Location Change  Investigation  Other \_\_\_\_\_

### SUPPLEMENTAL REPORT OF INSPECTION

Name of Program/Provider: Bridgewater YMA/Notke Educational Center Date: 9-23-21 Time: 9:15am

Location Address: 401 Mossuth Ave Telephone #: 203-332-6447

e-mail address: TmcCarthy@cccymca.org License #: 116131 Expiration Date: 4-30-25

Capacity: 192 # of Children Present: 30 # of Staff Present: 24

**Consent to Inspect  
Family Child Care Home**

I agree to allow the Office of Early Childhood to have access to and inspect this facility and all child care records as required by Family Child Care Home Regulations.  
Provider/Applicant/Substitute's Signature

Purpose of visit: Follow up on #130 that was cited on 9-16-21

**Observations/Corrections needed:**

Program is in compliance at this inspection with violation #130.

S = Substantiated    NS = Not Substantiated    P = Pending (if applicable)

Operators/providers are required by regulations and statutes to be in compliance at all times.

CORRECTIVE PLAN SHALL BE RETURNED TO  
OEC BY: NA

Signature: Cathy Anderson  
(OEC Representative)

Print Name: Cathy Anderson

Signature: Evelyn Semings  
(Person in Charge)

Print Name: Evelyn Semings