

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

SUPPLEMENTAL REPORT OF INSPECTION

Name of Program/Provider: Bright Beginnings Early Childhood Program Date: 10/13/21 Time: 8:30 AM
Location Address: 356 Black Rock Tpke Fairfield, Ct. 06825 Telephone #: (203) 870-8300
e-mail address: bbfairfield@bbecp.com License #: 70278 Expiration Date: 12-31-23
Capacity: 172 # of Children Present: 64 # of Staff Present: 18

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

Purpose of visit: Re-measure lighting with different light meter

Observations/Corrections needed:

Lighting violation #76 removed as lighting in compliance when measured with a different light meter.

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: N/A

Signature: [Signature]
Print Name: Terry R Roberts (OEC Representative)
Signature: [Signature]
Print Name: Jacy [Signature] (Person in Charge)