

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

SUPPLEMENTAL REPORT OF INSPECTION

Name of Program/Provider: Discovery Zone Learning Center Date: 3/17/22 Time: 9 AM

Location Address: 2 Orlando Drive, Columbia Telephone #: 800 228 8885

e-mail address: robin@d21c14ds.org License #: 110720 Expiration Date: 11.30.25

Capacity: 148 # of Children Present: 44 # of Staff Present: 12

**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: playground inspection 2022-229

Observations/Corrections needed:

Inspection of playgrounds due to snow cover on
February 2, 2022.

Program is in compliance with items
87-94 and 141-142 of the inspection
form.

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: MA

Signature: Carlyne Deloreto
(OEC Representative)

Print Name: Carlyne Deloreto

Signature: Robin Green
(Person in Charge)

Print Name: Robin Green