

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

SUPPLEMENTAL REPORT OF INSPECTION

Name of Program/Provider: CIFC/HSNFC Head Start Date: 3/29/22 Time: 1:00
Location Address: 37 Foster St. Danbury, CT 06810 Telephone #: 203-743-3993
e-mail address: Scott.R@cifc.org License #: 16641 Expiration Date: 11/30/24
Capacity: 272/32 # of Children Present: 146 # of Staff Present: 28(4)

Consent to Inspect Family Child Care Home	<i>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.</i> <i>Provider/Applicant/Substitute's Signature</i> _____
--	---

Purpose of visit: Change in use of 1 classroom.

Observations/Corrections needed:

Classroom 12: ~~is~~ currently licensed for 20 children 3+ over. Change to split the room - 1/2 to be used for under 3's + the other 1/2 to be used for therapeutic services.

Under 3 side measurements:
18.6 x 22.5 - (2.2 x 9.6)
418.5 - 21.12 = 397.38 = 11.35 OK

fire marshal - ✓
local health - ✓
change form - ✓
floor plan - ✓
Oec approval - ✓

total capacity: 260
Under 3 : 40

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]
(OEC Representative)
Print Name: Kristi Morgan
Signature: [Signature]
(Person in Charge)
Print Name: Robert Scott

CONNECTICUT OFFICE OF EARLY CHILDHOOD – DIVISION OF LICENSING
 Notification of Proposed Changes in Child Care Centers and Group Child Care Homes

ALERT: Any change that requires a new application must be submitted to the agency 60 days prior to the anticipated date of opening.

1. Name of Program Facility Address: Street & City/Town License # Phone #
 CFC/HSNFC Head Start Program 37 Foster St. Danbury, CT 16641 203-743-9760
 2. Mailing Address: (If different or changed) x2800

Please Check Applicable Sections Regarding CHANGES

PHYSICAL PLANT CHANGES: (Description) _____

PROGRAM CHANGES REQUESTED: (Notify OEC at least 30 days prior to requested change)

a. Current Licensed Capacity: 272 Proposed Licensed Capacity: _____
 b. Current Under 3 Capacity: 32 Proposed Under 3 Capacity: 8
 c. Current Ages Served: _____ Proposed Ages Served: _____
 d. Current Months, Days & Hours of Operation: Sept.-Aug., M-F, 7:30AM-2:30pm
 (e.g., Sept.-Dec., MWF – 9:00 a.m.-12:00 p.m.)
 Proposed Months, Days & Hours of Operation: Sept.-Aug., M-F 7:30AM-2:30pm
 e. **CURRENT LICENSE CATEGORIES:** **PROPOSED LICENSE CATEGORIES:**

- | | | | |
|-----------------|-------------------------------------|-------------------|-------------------------------------|
| 1. Children 3-5 | <input type="checkbox"/> | 1. Children 3 – 5 | <input type="checkbox"/> |
| 2. Under 3 | <input checked="" type="checkbox"/> | 2. Under 3 | <input checked="" type="checkbox"/> |
| 3. School Age | <input type="checkbox"/> | 3. School Age | <input type="checkbox"/> |
| 4. Night Care | <input type="checkbox"/> | 4. Night Care | <input type="checkbox"/> |

CHANGES IN PLANS, POLICIES & PROCEDURES (Notify OEC within 5 days of change)
 Policies, Plans & Procedures must be kept on site at your program for agency review) – Do Not Submit a Copy
 Indicate which policy, plan or procedure changed: _____

Changes in Service Contracts or Current Agreements with Consultants, Practitioners & Agencies
 (Notify OEC within 10 days of change) Service Contracts/Agreements must be kept on site at your program for
 department review) Health Dental Social Service Education Dietician

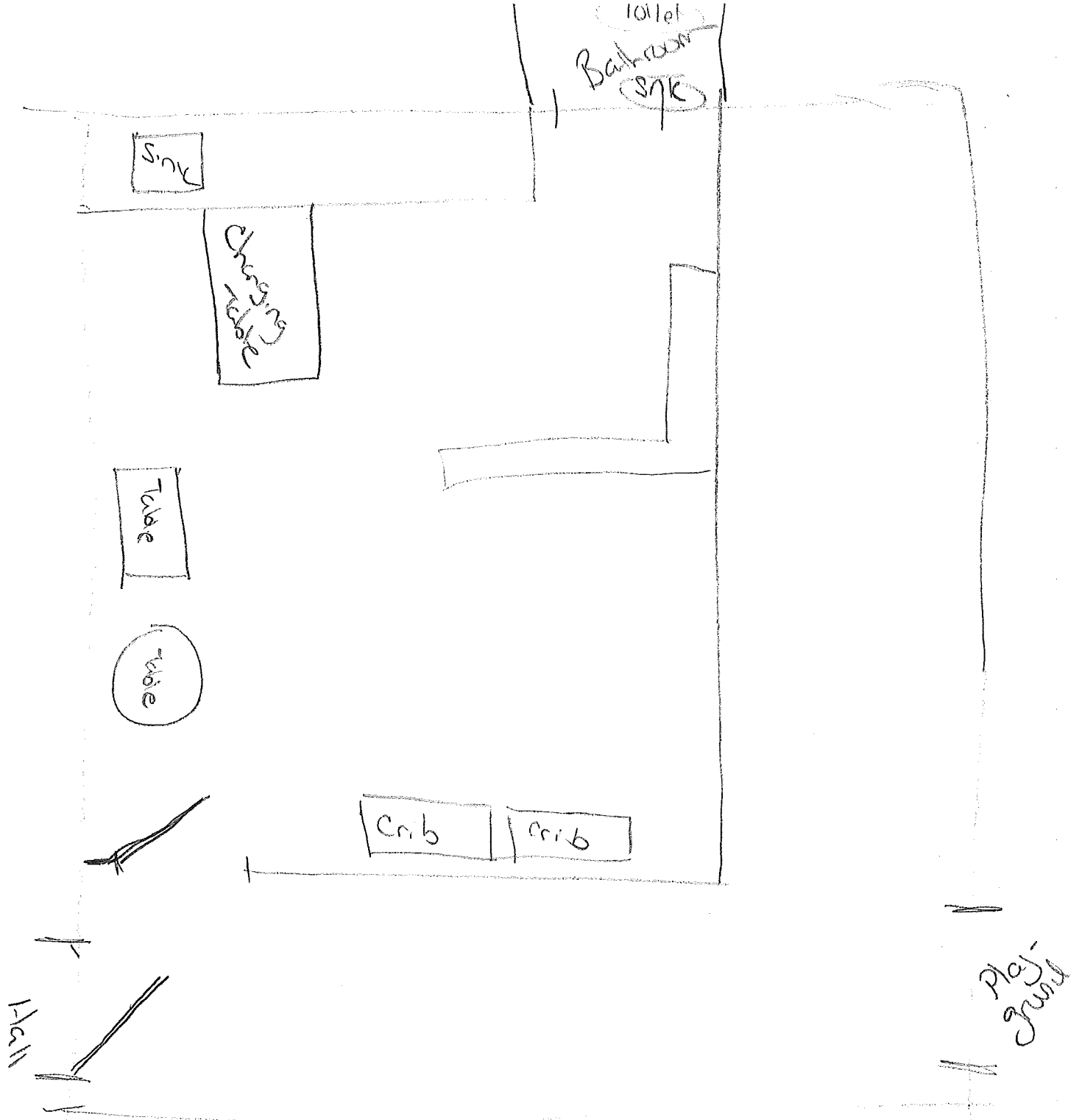
Name of Consultant(s) _____

NEW DIRECTOR: Name: _____ Remove former Director
 Date of Hire for this Position: _____ Work Schedule (Days/Hours): _____
 Director Email Address: _____

NEW HEAD TEACHER: Name: _____ Remove former Head Teacher
 Date of Hire for this Position: _____ Date of Birth: _____ Work Schedule (Days/Hours): _____

Other: _____

Completed by: Micole Tavithridis Title: Director Date: 9/14/22



Toilet
Bathroom
Sink

Sink

Changing
table

Table

Chair

Crib

Crib

Hall

Play
ground

103+05
Street
2/2/12

APPROVAL FOR CHILD CARE

- Town Zoning Department
- Town Building Department
- Town Fire Marshal
- Director of Health

- AN** Inspection
 Architectural Review
 Administrative Review

Reason for Approval Request

For increase capacity
for children under 3 yrs old

HAS BEEN COMPLETED ON:

- Child Care Center – Program Name: CIFC/HSNFC Head^{start} Lic.# 16641
- Group Care Home – Program Name: _____ Lic.# _____

LOCATED AT: 37 Foster St.
(Street Address)

DANBURY CT 06810
(Town) (State) (Zip)

IS CONSTRUCTED IN ACCORDANCE WITH APROPRIATE USE GROUPS AND:

- Connecticut State Building Code (CGS sec. 29-252-1c)
- Connecticut State Fire Safety Code (CGS sec. 29-292-8d)
- New Child Care Occupancies
- Existing Child Care Occupancies
- Other _____
(list code title, edition, and section)
- Town Zoning Regulations
- Health Ordinances

- PRELIMINARY APPROVAL IS GRANTED
- FINAL APPROVAL IS GRANTED

Signed: Timothy S. H.

Title: Deputy Fire Marshal

Town: DANBURY

Date: 3/21/2022

APPROVAL FOR CHILD CARE

- Town Zoning Department
- Town Building Department
- Town Fire Marshal
- Director of Health

- AN Inspection
 Architectural Review
 Administrative Review

Reason for Approval Request
For increase capacity
for children under 3.

HAS BEEN COMPLETED ON:

- Child Care Center – Program Name: Headstart of ^{Fairfield county} Northern Lic.# DCCC. 1664
- Group Care Home – Program Name: _____ Lic.# _____

LOCATED AT: 37 Foster Street
(Street Address)

Danbury Ct 06810
(Town) (State) (Zip)

IS CONSTRUCTED IN ACCORDANCE WITH APROPRIATE USE GROUPS AND:

- Connecticut State Building Code (CGS sec. 29-252-1c)
- Connecticut State Fire Safety Code (CGS sec. 29-292-8d)
- New Child Care Occupancies
- Existing Child Care Occupancies
- Other _____
(list code title, edition, and section)
- Town Zoning Regulations
- Health Ordinances

- PRELIMINARY APPROVAL IS GRANTED
- FINAL APPROVAL IS GRANTED

Signed: Michelle [Signature]

Title: Headstart Inspector

Town: Danbury

Date: 03/28/22