

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

### SUPPLEMENTAL REPORT OF INSPECTION

Name of Program/Provider: Three Little Bears Day Care Date: 7-22-22 Time: 9am

Location Address: 2004 Eastman St Bridgeport Telephone #: 203-610-2699

e-mail address: three.little.bears.day.care@gmail.com License #: Pending Expiration Date: Pending

Capacity: 31 # of Children Present: 0 # of Staff Present: 1

<b>Consent to Inspect Family Child Care Home</b>	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 <u>NA</u>
--	---

Purpose of visit: Follow up on these violations that were cited on 7-18-22

Observations/Corrections needed: √ = in compliance at this inspection

- 44 - ✓
- 45 - ✓
- 89 - ✓
- 93 - ✓

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 Adams  
(OEC Representative)

Print Name: Cathy Adams

Signature: Alina Gutierrez  
(Person in Charge)

Print Name: Alina Gutierrez