

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

SUPPLEMENTAL REPORT OF INSPECTION

Name of Program/Provider: Town + Country ELC Date: 11/30/22 Time: 9:15 am
Location Address: 1137 West St. Southington Telephone #: 860 628 7900
e-mail address: erin@townandcountryelc.com License #: 16398 Expiration Date: 7/31/25
Capacity: 144/88 # of Children Present: 76 # of Staff Present: 22

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: N/A

Purpose of visit: Follow up Case 2022-859

Observations/Corrections needed:
NS 19a-79-4a(c)(4) - Staffing - Ratios - Walk through conducted - No violations at this visit.

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: Lauren Hull
Signature: [Signature]
(Person in Charge)
Print Name: Erin L. Welch