

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

SUPPLEMENTAL REPORT OF INSPECTION

Name of Program/Provider: Elizabeth Lawal Date: 8/10/23 Time: 9:02am
Location Address: 77 Davis Ave, Apt 1 Bridgeport Telephone #: 203-218-4407
e-mail address: Lizlearnandplay@gmail.com License #: 57225 Expiration Date: 7/31/27
Capacity: 6+3 # of Children Present: 2 (0018 mos) # of Staff Present: 1

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: Follow up to inspection dated 7/6/23

Observations/Corrections needed:

- #14 First Aid Certificate current 7/23/23.
- #15 CPR Certificate current 7/23/23.
- #21 BCIS Access; Roster completed 8/10/23
- #23 Environment is now hazard/clutter free; Room has been decluttered with items stored away; No tripping hazards at today's visit; Rusty broken plane has been removed from outside; New one has been purchased.
- #29 Exits are free + clear.
- #33 Observed fire drill log
- #36 Fire extinguisher is brand new + mounted
- #48 Emergency numbers posted are up to date for all children enrolled.

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: Rebecca Couelles
(OEC Representative)
Print Name: Rebecca Couelles
Signature: _____
(Person in Charge)
Print Name: Elizabeth Lawal

SUPPLEMENTAL REPORT OF INSPECTION

Name of Program/Provider: Elizabeth Lawal License # 51225 Date: 8/10/23

Observations/Corrections needed:

Everything in compliance at today's visit; No violations.

S = Substantiated NS = Not Substantiated P = Pending (if applicable)

Operators/providers are required by regulations and statutes to be in compliance at all times.

Signature: Rebecca Gaudin (OEC Representative)

Print Name: Rebecca Gaudin

CORRECTIVE PLAN SHALL BE RETURNED TO

Signature: Elizabeth Lawal (Person in Charge)

OEC BY: N/A

Print Name: Elizabeth Lawal