

Connecticut Office of Early Childhood

Division of Licensing

450 Columbus Boulevard, Suite 302, Hartford, Connecticut 06103

Phone (800)282-6063 www.ctoec.org Fax (860)326-0552

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

SUPPLEMENTAL REPORT OF INSPECTION

Name of Program/Provider: Amparo Pichardo Date: 11/29/23 Time: 11<sup>17</sup>am

Location Address: 69 Clairmont Ave Apt 1, Wtlg 06108 Telephone #: 2035284443

e-mail address: huellita\_huellitasfamilydaycare@gmail.com License #: 50496 Expiration Date: 7/31/26

Capacity: 6+3 # of Children Present: 7 # of Staff Present: 2

**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: Amparo Pichardo

Purpose of visit: Safe Sleep Partial

Observations/Corrections needed:

No violations observed during inspection.

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: Alexander G  
(OEC Representative)

CORRECTIVE PLAN SHALL BE RETURNED TO OEC BY: N/A

Signature: Amparo Pichardo  
(Person in Charge)