



DIVISION OF LICENSING

450 Columbus Boulevard, Suite 302, Hartford, Connecticut 06103

Phone (800)282-6063 or (860)500-4450 Fax (860)326-0552

Email: oeclicensing@ct.gov Website: www.ctoec.org

FAMILY CHILD CARE HOME – FOLLOW UP/PARTIAL

Provider	ALEXANDRA LARA			License Number	DCFH.56821	Date of Inspection	01/02/2024
				Expiration Date	6/30/2024	Time of Inspection	09:20 AM
Address	82 MARLBORO ST WATERBURY CT 06705-1115			Telephone	(203) 982-9321	Regular Capacity	6
				Days and Hours	Monday- Friday 24 hours	School Age Capacity	3
# Children Present	1	# Under 18 months present	1			Summer Care	Open
Purpose of Inspection	Follow up from full			Name of Inspector	Janarish Lopez		
Provider's Email	alexandralara309@gmail.com			Inspector's Email	janarish.lopez@ct.gov		

CONSENT TO INSPECT: I agree to allow the Commissioner or an authorized representative to have access to and inspect the facility and child care records during home inspections as required by Regulations Section 19a-87b-5(h).

A L A R A

Signature of Provider/Applicant/Substitute/Emergency Caregiver

Violations

Statute and/or Regulation	Description	Comments
[-]	000 No Violations	No violations were cited during this inspection

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Other Findings-In Compliance		
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Statute and/or Regulation	Description	Comments
[19a-87b-9(b)]	023-Freedom of Hazards	
[19a-87b-9(d)(8)]	036-Fire Extinguisher	
[19a-87b-9(o)]	051-Pets	
[19a-87b-10(c)]	062-Meeting the Child's Needs	

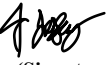
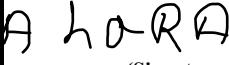
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YES/NO: No	WERE VIOLATIONS CITED DURING THIS VISIT?
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Discussions:

Comments:

NOTE: Items left blank on this form were not monitored during this visit.
 Only the regulations marked as compliant or non-compliant were monitored or discussed.
APPLICANTS: You MAY NOT OPERATE until all requirements have been met and a license has been issued by the Agency.

 (Signature of OEC Representative)	 (Signature of OEC Representative)	DATE CORRECTIONS DUE BY:	 (Signature of Person in Charge)
Janarish Lopez (Printed Name)	 (Printed Name)		ALEXANDRA LARA (Printed Name)