



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	IRIS POLANCO		License Number	DCFH.57130	Date of Inspection	01/09/2024
			Expiration Date	12/31/2026	Time of Inspection	01:50 PM
Address	193 CAPITOL AVE WATERBURY CT 06705-2407		Telephone	(203) 527-7648	Regular Capacity	6
			Days and Hours	MONDAY-FRIDAY 6:30AM- 6:00PM	School Age Capacity	3
# Children Present	1	# Under 18 months present	1	Summer Care	Open	
Purpose of Inspection	Safe Sleep Follow Up		Name of Inspector	Alexandra Rodriguez		
Provider's Email	irispolanco711@gmail.com		Inspector's Email	alexandra.rodriguez@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).

Signature of Provider/Applicant/Substitute/Emergency Caregiver

Violations

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

--	--	--

Other Findings-In Compliance		
-------------------------------------	--	--

Statute and/or Regulation	Description	Comments
[19a-87b-10(a)]	004-Capacity	
[19a-87b-10(f)(1) and/or 19a-87b-10(f)(4)]	073-Infants Placed in Safe Crib/Snug Mattress/Tight Sheet	

--	--	--




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

Discussions:

No violations found at time of inspection. Provider in compliance with all safe sleep requirements.

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)
Alexandra Rodriguez (Printed Name)	 (Printed Name)		IRIS POLANCO (Printed Name)