



Connecticut Office of  
Early Childhood

## 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](mailto:oeclicensing@ct.gov) Website: [www.ctoec.org](http://www.ctoec.org)

### CHILD CARE CENTER/GROUP CHILD CARE HOME SUPPLEMENTAL INSPECTION

Program Name	CARRIAGE HOUSE DAY CARE CENTER				License Number	DCCC.15403	Date of Inspection	01/26/2024
					Expiration Date	2/28/2026	Time of Inspection	12:42 PM
Address	320 COLONY ST  MERIDEN CT 06451-2053				Telephone	(203) 235-4859	Total Capacity	94
					Days and Hours	MONDAY-FRIDAY 7:00AM-6:00PM	Under Three Capacity	32
#Children Present	45	# Under 3 Present	25	# Staff Present	12	Summer Care	Open	
Purpose of Inspection	3 month follow up for case 2023-834				Name of Inspector	Kevin Eddy		
Program's Email	pam@carriagehousedaycare.com				Inspector's Email	kevin.eddy@ct.gov		

### Violations

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

<b>Other Findings - In Compliance</b>		
<b>Statute and/or Regulation</b>	<b>Description</b>	<b>Comments</b>
19a-79-4a(c)(4)(D)	021b-Supervision	Observed all children being properly supervised in all classrooms

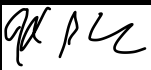

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<u>YES/NO:</u> <b>No</b>	<b>WERE VIOLATIONS CITED DURING THIS VISIT?</b>
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<b>Discussions:</b>

<b>Comments:</b>

**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)	<b>DATE CORRECTIONS DUE BY:</b>	 (Signature of Person in Charge)
<b>Kevin Eddy</b> (Printed Name)	 (Printed Name)		<b>PAMELA CAREY</b> (Printed Name)