



Connecticut Office of  
Early Childhood

## DIVISION OF LICENSING

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

Program Name	BRIGHT HORIZONS CHILDRENS CTR @ ENTERPRISE CO TWR				License Number	DCCC.15402	Date of Inspection	04/24/2024
					Expiration Date	12/31/2025	Time of Inspection	01:01 PM
Address	3 CORPORATE DRIVE  SHELTON CT 06484				Telephone	(203) 926-1398	Total Capacity	136
					Days and Hours	MONDAY-FRIDAY 7:00AM-6:00PM SCHOOL AGE - Preschool 1 in summer	Under Three Capacity	56
#Children Present	63	# Under 3 Present	33	# Staff Present	12	Summer Care	Open	
Purpose of Inspection	Partial inspection on safe sleep				Name of Inspector	Kristi Morgan		
Program's Email	ect@brighthorizons.com				Inspector's Email	kristi.morgan@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-79-10(g)(3) and/or 19a-79-7a(g)(1)]	130-Crib/Bed Free from Observable Hazards	



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<u>YES/NO:</u> <b>No</b>	<b>WERE VIOLATIONS CITED DURING THIS VISIT?</b>
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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)
<b>Kristi Morgan</b> (Printed Name)	(Printed Name)		<b>Laura Kim</b> (Printed Name)