



**FAMILY CHILD CARE HOME SUPPLEMENTAL INSPECTION**

<b>Provider</b>	JACQUELINE TORRES			<b>License Number</b>	DCFH.56690	<b>Date of Inspection</b>	06/05/2024
				<b>Expiration Date</b>	9/30/2027	<b>Time of Inspection</b>	12:45 PM
<b>Address</b>	156 STANDISH ST HARTFORD CT 06114-2936			<b>Telephone</b>	(860) 995-0553	<b>Regular Capacity</b>	6
				<b>Days and Hours</b>	M-F 5:00 AM - 5:00 PM	<b>School Age Capacity</b>	3
<b># Children Present</b>	2	<b># Under 18 months present</b>	2			<b>Summer Care</b>	Open
<b>Purpose of Inspection</b>	Partial - Monitoring Visit			<b>Name of Inspector</b>	Carmen Valenzuela		
<b>Provider's Email</b>	torresjacqueline76@yahoo.com			<b>Inspector's Email</b>	carmen.valenzuela@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

**Regulatory Violations**

<b>Statute and/or Regulation:</b> [-]	<b>Description:</b> 000 No Violations
No violations were cited during this inspection	
<b>Statute and/or Regulation:</b>	<b>Description:</b>
<b>Statute and/or Regulation:</b>	<b>Description:</b>
<b>Statute and/or Regulation:</b>	<b>Description:</b>
<b>Statute and/or Regulation:</b>	<b>Description:</b>

Statute and/or Regulation:	Description:
Statute and/or Regulation:	Description:
Statute and/or Regulation:	Description:
Statute and/or Regulation:	Description:
Statute and/or Regulation:	Description:
Statute and/or Regulation:	Description:
Statute and/or Regulation:	Description:
<b>Other Findings-Regulations In Compliance</b>	
Statute and/or Regulation: [19a-87b-10(a)]	Description: 004-Capacity
Statute and/or Regulation: [19a-87b-5(e)]	Description: 006-Infant/Toddler Restriction

Statute and/or Regulation:	Description:
----------------------------	--------------

--	--

Statute and/or Regulation:	Description:
----------------------------	--------------

--	--

Statute and/or Regulation:	Description:
----------------------------	--------------

--	--

Statute and/or Regulation:	Description:
----------------------------	--------------

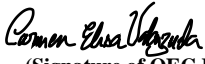


--	--

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

**DISCUSSIONS/COMMENTS**

Walk through completed during this visit.

**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>Carmen Valenzuela</b> (Printed Name)	 (Printed Name)		<b>JACQUELINE TORRES</b> (Printed Name)