



## FAMILY CHILD CARE HOME SUPPLEMENTAL INSPECTION

<b>Provider</b>	SONIA NUNEZ COLON			<b>License Number</b>	DCFH.57270	<b>Date of Inspection</b>	07/25/2024
				<b>Expiration Date</b>	10/31/2027	<b>Time of Inspection</b>	09:56 AM
<b>Address</b>	229 AUTUMN ST MANCHESTER CT 06040-5553			<b>Telephone</b>	(860) 890-7730	<b>Regular Capacity</b>	6
				<b>Days and Hours</b>	MON- FRI 7:00AM-5:00PM AVAILABLE 2ND SHIFT	<b>School Age Capacity</b>	3
<b># Children Present</b>	6	<b># Under 18 months present</b>	1			<b>Summer Care</b>	Open
<b>Purpose of Inspection</b>	Follow up capacity , background checks and access			<b>Name of Inspector</b>	Alexandra Rodriguez		
<b>Provider's Email</b>	sonianunez45@gmail.com			<b>Inspector's Email</b>	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*

### Regulatory Violations

<b>Statute and/or Regulation:</b>	[19a-87b-8a]	<b>Description:</b>	021-Background Check
Failed to ensure comprehensive background checks have been conducted for two household members.			
<b>Statute and/or Regulation:</b>		<b>Description:</b>	
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<b>Other Findings-Regulations In Compliance</b>	
Statute and/or Regulation: [19a-87b-10(a)]	Description: 004-Capacity
Statute and/or Regulation: [19a-87b-13]	Description: 093-Access

