



FAMILY CHILD CARE HOME SUPPLEMENTAL INSPECTION

Provider	TASHIEANNA A O'CONNOR			License Number	DCFH.55058	Date of Inspection	09/05/2024
				Expiration Date	5/31/2025	Time of Inspection	01:40 PM
Address	35 CROSSWINDS LN WATERBURY CT 06705-3043			Telephone	(203) 347-9720	Regular Capacity	6
				Days and Hours	24 hour care	School Age Capacity	3
# Children Present	0	# Under 18 months present	0			Summer Care	Open
Purpose of Inspection	Follow up to check pool gate			Name of Inspector	Jannie Thornton		
Provider's Email	candkenterprise@gmail.com			Inspector's Email	jannie.thornton@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).

Johanne O'Connell

Signature of Provider/Applicant/Substitute/Emergency Caregiver

Regulatory Violations

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

Statute and/or Regulation:	Description:
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Statute and/or Regulation:	Description:
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Other Findings-Regulations In Compliance	
Statute and/or Regulation: [19a-87b-10(a)]	Description: 004-Capacity
Statute and/or Regulation: [19a-87b-9(f)(2) and/or 19a-87b-9(f)(4)]	Description: 040-Body of Water

Statute and/or Regulation: [-]	Description: 114-CO/NCAP Compliance Violations
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Statute and/or Regulation:	Description:
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Statute and/or Regulation:	Description:
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Statute and/or Regulation:	Description:
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<u>YES/NO:</u> No	WERE VIOLATIONS CITED DURING THIS VISIT?
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DISCUSSIONS/COMMENTS

Checked the pool gate and found it to be locked.
No children present today.

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)
Jannie Thornton (Printed Name)	 (Printed Name)		TASHIEANNA A O'CONNOR (Printed Name)