



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 Website: www.ctoec.org

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

Program Name	GUIDEPOST MONTESSORI AT WILTON				License Number	DCCC	Date of Inspection	09/13/2024
					Expiration Date		Time of Inspection	09:00 AM
Address	221 DANBURY RD WILTON CT 06897-4090				Telephone	(475) 259-3001	Total Capacity	44
					Days and Hours	Monday Though Friday 7:00 to 6:00pm	Under Three Capacity	24
#Children Present	0	# Under 3 Present	0	# Staff Present	2	Summer Care	Open	
Purpose of Inspection	Adding room 4 to licensed space 8 under three, 2 toilets and 2 sinks				Name of Inspector	Terri Ruducha-Roberts		
Program's Email	wilton@guidepostmontessori.com				Inspector's Email	terri.ruducha-roberts@ct.gov		

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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Other Findings – Regulations In Compliance	
Statute and/or Regulation: [19a-79-3a(k) and/or 19a-79-10(b)]	Description: 109-Under Three Endorsement: Approved Endorsement
Statute and/or Regulation: [19a-79-10(c)(2) and/or 19a-79-4a(c)(6)]	Description: 110-Under Three Endorsement: Ratio: 1 Staff to 4 Children

Statute and/or Regulation: [19a-79-10(c)(3)]	Description: 111-Under Three Endorsement: Group Size no Larger than 8
Statute and/or Regulation: [19a-79-10(c)(4)]	Description: 112-Under Three Endorsement: Physical Barriers/Groups of 8 (Indoors/Outdoors)
Statute and/or Regulation: [19a-79-10(d)(1)]	Description: 113-Adequate Sinks in Program Space
YES/NO: No	WERE VIOLATIONS CITED DURING THIS VISIT?
DISCUSSIONS/COMMENTS	
<p>Room 4 29.3x29.1=852.63-160.95=691.6/35=19 children (program requesting 8) -11.3x4.6=51.9 -11x9.3=102.3 -2.7x2.5=6.75 Total deductions =160.9 2 new toilets and 2 new handwashing sinks Total capacity=52 Under three=32</p>	

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 Person in Charge)	DATE CORRECTIONS DUE BY:	
Terri Ruducha-Roberts (Printed Name)	Vernee Butterfield (Printed Name)		