



FAMILY CHILD CARE HOME SUPPLEMENTAL INSPECTION

Provider	DENISE GASTON		License Number	DCFH.53182	Date of Inspection	09/18/2024
			Expiration Date	11/30/2025	Time of Inspection	01:30 PM
Address	103 WALEK FARMS RD MANCHESTER CT 06040-7091		Telephone	(860) 533-8418	Regular Capacity	6
			Days and Hours	MONDAY THROUGH FRIDAY 7:30 TO 5:00 P.M.	School Age Capacity	3
# Children Present	2	# Under 18 months present	1	Summer Care	Open	
Purpose of Inspection	Follow up to complete inspection		Name of Inspector	Jannie Thornton		
Provider's Email	deesgarden2020@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).

Signature of Provider/Applicant/Substitute/Emergency Caregiver

Regulatory Violations

Statute and/or Regulation: [-]	Description: 000 No Violations
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-87b-10(a)]	Description: 004-Capacity
Statute and/or Regulation: [19a-87b-5(c)]	Description: 005-Nontransferability

Statute and/or Regulation: [19a-87b-5(e)]	Description: 006-Infant/Toddler Restriction
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Statute and/or Regulation: [19a-87b-5(f)(2)]	Description: 007-License Posted
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Statute and/or Regulation: [19a-87b-5(g)]	Description: 008-Access to OEC Phone Number
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Statute and/or Regulation: [19a-87b-5(h)]	Description: 009-Photo ID
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<u>YES/NO:</u> No	WERE VIOLATIONS CITED DURING THIS VISIT?
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DISCUSSIONS/COMMENTS

This is part 2 of a 2 day inspection.

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)		DENISE GASTON (Printed Name)