



DIVISION OF LICENSING
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**CHILD CARE CENTER/GROUP CHILD CARE HOME
 SUPPLEMENTAL INSPECTION**

Program Name	STORK CLUB- MERIDEN				License Number	DCCC.13130	Date of Inspection	10/16/2024
					Expiration Date	1/31/2026	Time of Inspection	12:24 PM
Address	186 POMEROY AVE MERIDEN CT 06450-7102				Telephone	(203) 235-8461	Total Capacity	64
					Days and Hours	MONDAY-FRIDAY 6:30AM-6:00PM	Under Three Capacity	28
#Children Present	48	# Under 3 Present	23	# Staff Present	10	Summer Care	Open	
Purpose of Inspection	Partial inspection to case 2024-524				Name of Inspector	Carolynne DeLoreto		
Program's Email	storkclubs@gmail.com				Inspector's Email	carolynne.deloreto@ct.gov		

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-79-10(c)(2) and/or 19a-79-4a(c)(6)]	Description: 110-Under Three Endorsement: Ratio: 1 Staff to 4 Children
<p>Program is in compliance with ratios at todays visit.</p>	

Statute and/or Regulation:	Description:

Statute and/or Regulation:	Description:

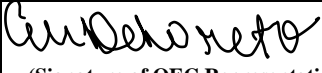

Statute and/or Regulation:	Description:

Statute and/or Regulation:	Description:

YES/NO: No	WERE VIOLATIONS CITED DURING THIS VISIT?
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DISCUSSIONS/COMMENTS

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)		DATE CORRECTIONS DUE BY:	 (Signature of Person in Charge)
Carolynne DeLoreto (Printed Name)	(Printed Name)		Amber Disdiel (Printed Name)