



FAMILY CHILD CARE HOME SUPPLEMENTAL INSPECTION

Provider	LUCILLE SAPONARE				License Number	DCFH.33291	Date of Inspection	02/28/2025
					Expiration Date	1/31/2026	Time of Inspection	11:00 AM
Address	40 HOGAN TRL WESTPORT CT 06880-5726				Telephone	(203) 227-1358	Regular Capacity	6
					Hours of Operation	8:30 AM 5:00 PM	School Age Capacity	3
Is this a Change of Address?	Yes?		No?	X	Days of Operation	Mon-Fri	Summer Hours	Open
New Address					# Under 18 mths present	2	Weekend Hours	No
					Total children present	4	Night Hours	No
Type of Inspection	Follow up for outdoor play srea				Inspector's Name	Rebecca LaRosa		
Provider's Email	littleangels955@gmail.com				Inspector's Email	rebecca.larosa@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
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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-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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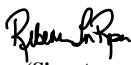

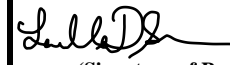
YES/NO: No	WERE VIOLATIONS CITED DURING THIS VISIT?
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DISCUSSIONS/COMMENTS

Follow up for outdoor play area as it was snow covered at full inspection.

IMPORTANT NOTES

- It is the provider's responsibility to ensure compliance with all local codes and/or ordinances applicable to single and multi-family dwellings. This includes but is not limited to renovation, construction or expansion of the facility as well as the installation of a swimming pool or auxiliary heater.
- 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 Provider/Substitute/Applicant)
Rebecca LaRosa (Printed Name)	 (Printed Name)		LUCILLE SAPONARE (Printed Name)