



FAMILY CHILD CARE HOME SUPPLEMENTAL INSPECTION

Provider	ANA ADAMES			License Number	DCFH.57561	Date of Inspection	03/12/2025
				Expiration Date	10/31/2025	Time of Inspection	03:55 PM
Address	16 CAMP ST WATERBURY CT 06704-3928			Telephone	(475) 689-9219	Regular Capacity	6
				Hours of Operation	6:00 AM 10:00 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	1	Weekend Hours	No
				Total children present	6	Night Hours	No
Type of Inspection	Capacity- Full follow up			Inspector's Name	Janarish Lopez		
Provider's Email	anaadamesmendoza@gmail.com			Inspector's Email	janarish.lopez@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).

Ana Adames

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:
Statute and/or Regulation:	Description:
Statute and/or Regulation:	Description:
Statute and/or Regulation:	Description:

Statute and/or Regulation:	Description:
Statute and/or Regulation:	Description:
Statute and/or Regulation:	Description:
Statute and/or Regulation:	Description:
Statute and/or Regulation:	Description:
Statute and/or Regulation:	Description:
Statute and/or Regulation:	Description:
OTHER FINDINGS-REGULATIONS IN COMPLIANCE	
Statute and/or Regulation: [19a-87b-10(a)]	Description: 004-Capacity
Statute and/or Regulation: [19a-87b-5(e)]	Description: 006-Infant/Toddler Restriction

Statute and/or Regulation: [19a-87b-8, 19a-87b-8(d) and/or 19a-87b-8(e)]	Description: 019-Substitute/Assistant
---	--

Statute and/or Regulation:	Description:
-----------------------------------	---------------------

Statute and/or Regulation:	Description:
-----------------------------------	---------------------

Statute and/or Regulation:	Description:
-----------------------------------	---------------------

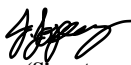
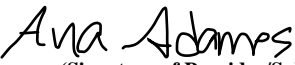
YES/NO: No	WERE VIOLATIONS CITED DURING THIS VISIT?
-------------------	---

DISCUSSIONS/COMMENTS

Defs: 92525
 -no violations found at time of visit- provider was within the capacity ratio

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)
Janarish Lopez (Printed Name)	(Printed Name)		ANA ADAMES (Printed Name)