

- Initial  
  Unannounced Full/Partial  
  Follow-up  
  Location Change  
  Investigation  
  Other \_\_\_\_\_

**SUPPLEMENTAL REPORT OF INSPECTION**

Name of Program/Provider: Over The Rainbow      Date: 3/7/25 Time: 11:30am  
 Location Address: 1481 Highland Ave Cheshire, Ct. 06410      Telephone #: (203)699-9900  
 e-mail address: info@Overtherainbowkids.com      License #: 16547      Expiration Date: 7-31-26  
 Capacity: 88      # of Children Present: 42      # of Staff Present: 9

<b>Consent to Inspect Family Child Care Home</b>	I agree to allow the Office of Early Childhood to have access to and inspect this facility and all child care records as required by Family Child Care Home Regulations. <b>Provider/Applicant/Substitute's Signature</b>
--	--

Purpose of visit: Partial - Naptice Supervision

Observations/Corrections needed:

No Violations at this visit

**S = Substantiated      NS = Not Substantiated      P = Pending (if applicable)**

Operators/providers are required by regulations and statutes to be in compliance at all times.

CORRECTIVE PLAN SHALL BE RETURNED TO OEC BY: N/A

Signature: [Signature]  
 (OEC Representative)  
 Print Name: Terri K Roberts  
 Signature: [Signature]  
 (Person in Charge)  
 Print Name: Tammy Vertucci