



FAMILY CHILD CARE HOME SUPPLEMENTAL INSPECTION

Provider	ZENEYDA MARTINEZ				License Number	DCFH.57303	Date of Inspection	03/24/2025
					Expiration Date	1/31/2028	Time of Inspection	08:45 AM
Address	61 JUNIPER RD BETHEL CT 06801-1812				Telephone	(475) 777-6784	Regular Capacity	6
					Hours of Operation	7:00 AM 6:00 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	3	Weekend Hours	No
					Total children present	8	Night Hours	No
Type of Inspection	Day 2 full inspection				Inspector's Name	Janarish Lopez		
Provider's Email	Zeneydam2@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).

Zeneyda Martinez

Signature of Provider/Applicant/Substitute/Emergency Caregiver

REGULATORY VIOLATIONS

Statute and/or Regulation: [19a-87b-10(b)(2)(A)(v) and/or 19a-87b-10(l)]	Description: 055-Immunizations
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Failed to maintain current immunization record, 2 children need current flu vaccines

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(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
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Statute and/or Regulation: [19a-87b-8(c)]	Description: 020-Emergency Caregiver
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Statute and/or Regulation: [19a-87b-10(b)(1)]	Description: 053-Enrollment Form
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Statute and/or Regulation: [19a-87b-10(b)(2)]	Description: 054-Child Health Record
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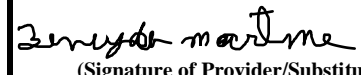
YES/NO: Yes	WERE VIOLATIONS CITED DURING THIS VISIT?
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DISCUSSIONS/COMMENTS

-Discussed ensuring all children have the flu vaccine, if the child does not have a current vaccine the child cannot attend the daycare until flu season is over ending March 31st.
 -Discussed ensuring nonprescription topical medication permissions are filled out completely.
 Dcfs:91960 Jorge Ynoa

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: 04/07/2025	 (Signature of Provider/Substitute/Applicant)
Janarish Lopez (Printed Name)	 (Printed Name)		ZENEYDA MARTINEZ (Printed Name)