



**DIVISION OF LICENSING**  
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**FAMILY CHILD CARE HOME SUPPLEMENTAL INSPECTION**

<b>Provider</b>	MADELYN VACHIER				<b>License Number</b>	DCFH.56677	<b>Date of Inspection</b>	04/08/2025
					<b>Expiration Date</b>	8/31/2027	<b>Time of Inspection</b>	09:07 AM
<b>Address</b>	135 ATKINS ST MERIDEN CT 06450-3403				<b>Telephone</b>	(203) 514-9648	<b>Regular Capacity</b>	6
					<b>Hours of Operation</b>	6:00 AM 6:00 PM	<b>School Age Capacity</b>	3
<b>Is this a Change of Address?</b>	<b>Yes?</b>		<b>No?</b>	X	<b>Days of Operation</b>	Mon-Sun	<b>Summer Hours</b>	Open
<b>New Address</b>					<b># Under 18 mths present</b>	3	<b>Weekend Hours</b>	Yes
					<b>Total children present</b>	8	<b>Night Hours</b>	No
<b>Type of Inspection</b>	Follow-up for Safe Sleep Violation Cited During Full Inspection				<b>Inspector's Name</b>	Melina Perez		
<b>Provider's Email</b>	maddysteddybear177@gmail.com				<b>Inspector's Email</b>	melina.perez@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**

<b>Statute and/or Regulation:</b> [-]	<b>Description:</b> 000 No Violations
No violations were cited during this inspection	
<b>Statute and/or Regulation:</b>	<b>Description:</b>
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<b>Statute and/or Regulation:</b>	<b>Description:</b>
<b>Statute and/or Regulation:</b>	<b>Description:</b>
<b>OTHER FINDINGS-REGULATIONS IN COMPLIANCE</b>	
<b>Statute and/or Regulation:</b> [19a-87b-10(a)]	<b>Description:</b> 004-Capacity
<b>Statute and/or Regulation:</b> [19a-87b-5(e)]	<b>Description:</b> 006-Infant/Toddler Restriction

<b>Statute and/or Regulation:</b> [19a-87b-10(f)(1) and/or 19a-87b-10(f)(4)]	<b>Description:</b> 073-Infants Placed in Safe Crib/Snug Mattress/Tight Sheet
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<b>Statute and/or Regulation:</b>	<b>Description:</b>
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<b>Statute and/or Regulation:</b>	<b>Description:</b>
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<b>Statute and/or Regulation:</b>	<b>Description:</b>
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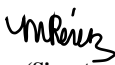

<b>YES/NO:</b> No	<b>WERE VIOLATIONS CITED DURING THIS VISIT?</b>
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<b>DISCUSSIONS/COMMENTS</b>
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The following was observed during today's follow-up visit:  
 # 73 - There were no soft mattress inserts observed in the 2 pack n plays that are used to nap 2 infants. Only tight fitted sheets were observed on the mattresses during today's follow-up visit.  
 \*\*\*DCFS. 92736 was also present today.  
 \*\*\*Provider was observed to be in compliance during today's follow-up visit\*\*\*

<b>IMPORTANT NOTES</b>
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- *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)	<b>DATE CORRECTIONS DUE BY:</b>	 (Signature of Provider/Substitute/Applicant)
<b>Melina Perez</b> (Printed Name)	 (Printed Name)		<b>MADELYN VACHIER</b> (Printed Name)