



FAMILY CHILD CARE HOME SUPPLEMENTAL INSPECTION

Provider	ROCIO PENA VALDEZ				License Number	DCFH.57081	Date of Inspection	04/21/2025
					Expiration Date	7/31/2026	Time of Inspection	01:20 PM
Address	37 SOUTHWICK AVE WATERBURY CT 06705-1233				Telephone	(347) 499-4225	Regular Capacity	6
					Hours of Operation	24 HOURS 24 HOURS	School Age Capacity	3
Is this a Change of Address?	Yes?		No?	X	Days of Operation	Mon-Sat	Summer Hours	Open
New Address					# Under 18 mths present	3	Weekend Hours	Yes
					Total children present	8	Night Hours	Yes
Type of Inspection	Follow up- safe exit				Inspector's Name	Alexandra Rodriguez		
Provider's Email	rociofamilydaycarellc@gmail.com				Inspector's Email	alexandra.rodriguez@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
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(e)]	Description: 006-Infant/Toddler Restriction

Statute and/or Regulation: [19a-87b-9(d)(4)]	Description: 029-Safe Exits
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Provider in compliance. Observed 3 cribs in main childcare area. Provider removed all cribs from room next to childcare area.

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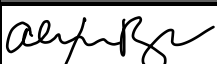

YES/NO: No	WERE VIOLATIONS CITED DURING THIS VISIT?
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DISCUSSIONS/COMMENTS

Substitute Present DCFS 92464

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. Providers are required by statutes and regulations to be in compliance at all times.
- **APPLICANTS –You MAY NOT OPERATE until all requirements have been met and a license has been issued by the Agency.**

 (Signature of OEC Representative)		DATE CORRECTIONS DUE BY:	 (Signature of Provider/Substitute/Applicant)
Alexandra Rodriguez (Printed Name)			ROCIO PENA VALDEZ (Printed Name)