



FAMILY CHILD CARE HOME SUPPLEMENTAL INSPECTION

Provider	BELLANDE DOMERCANT				License Number	DCFH.57636	Date of Inspection	05/13/2025
					Expiration Date	4/30/2026	Time of Inspection	11:19 AM
Address	25 OAK HILL ST STAMFORD CT 06902-3707				Telephone	(203) 428-7435	Regular Capacity	6
					Hours of Operation	7:00 AM 9:00 PM	School Age Capacity	3
Is this a Change of Address?	Yes?	X	No?		Days of Operation	Mon-Fri	Summer Hours	Open
New Address	54 Anderson Street #Basement Stamford CT 06902				# Under 18 mths present	0	Weekend Hours	No
					Total children present	0	Night Hours	No
Type of Inspection	Follow Up on Safe Exits				Inspector's Name	Candy Vargas		
Provider's Email	BellandeDomercant@rocketmail.com				Inspector's Email	candy.vargas@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-6(b)]	Description: 013-Medical Statement
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Statute and/or Regulation: [19a-87b-6(c)]	Description: 014-First Aid Certificate
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Statute and/or Regulation: [19a-87b-6(c)]	Description: 015-CPR Certificate
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Statute and/or Regulation: [19a-87b-9(d)(4)]	Description: 029-Safe Exits
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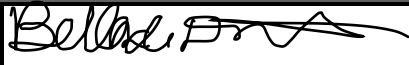
<u>YES/NO:</u> No	WERE VIOLATIONS CITED DURING THIS VISIT?
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DISCUSSIONS/COMMENTS

Medical updated at the time of inspection, as well as cpr/FA certification. Safe exits is in compliance staircase built , with handrails exit through window. Gate also installed at the entrance of staircase. Pictures are attached.

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)	 (Signature of OEC Representative)	DATE CORRECTIONS DUE BY:	 (Signature of Provider/Substitute/Applicant)
Candy Vargas (Printed Name)	 (Printed Name)		BELLANDE DOMERCANT (Printed Name)