

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

### SUPPLEMENTAL REPORT OF INSPECTION

Name of Program/Provider: Noroton Presbyterian Child Care Date: 6/6/25 Time: 12:45pm  
Location Address: 2011 Post Road Darien, CT 06820 Telephone #: (203) 309-5605  
e-mail address: beth.aparicio@norotonchurch.org License #: 16373 Expiration Date: 12-31-25  
Capacity: 51 # of Children Present: 44 # of Staff Present: 11

**Consent to Inspect  
Family Child Care Home**

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.  
Provider/Applicant/Substitute's Signature

Purpose of visit: Supervision Follow Up

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: 

Print Name: Terri K Roberts (OEC Representative)

Signature: 

Print Name: Beth Aparicio (Person in Charge)