



FAMILY CHILD CARE HOME SUPPLEMENTAL INSPECTION

Provider	ROSANA MATEO RIOS				License Number	DCFH	Date of Inspection	06/25/2025
					Expiration Date		Time of Inspection	07:16 AM
Address	186 CLINTON AVE FL 2 NEW HAVEN CT 06513-3144				Telephone	(203) 887-7264	Regular Capacity	6
					Hours of Operation	6:30 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	0	Weekend Hours	No
					Total children present	0	Night Hours	No
Type of Inspection	Update and collect application form with residency clarification				Inspector's Name	Jenny Ferreira		
Provider's Email	mateo.rosana@myyahoo.com				Inspector's Email	jenny.ferreira@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).

Rosana Mateo Rios

Signature of Provider/Applicant/Substitute/Emergency Caregiver

REGULATORY VIOLATIONS

Statute and/or Regulation:	Description:
Statute and/or Regulation:	Description:
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Statute and/or Regulation:	Description:
OTHER FINDINGS-REGULATIONS IN COMPLIANCE	
Statute and/or Regulation:	Description:
Statute and/or Regulation:	Description:

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


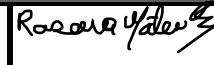
YES/NO: No	WERE VIOLATIONS CITED DURING THIS VISIT?
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DISCUSSIONS/COMMENTS

Provider updated the application form with clarification on residency and program's location.

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)
Jenny Ferreira (Printed Name)	 (Printed Name)		ROSANA MATEO RIOS (Printed Name)