



**FAMILY CHILD CARE HOME SUPPLEMENTAL INSPECTION**

<b>Provider</b>	LEORA BLAIR				<b>License Number</b>	DCFH.50527	<b>Date of Inspection</b>	07/09/2025
					<b>Expiration Date</b>	3/31/2026	<b>Time of Inspection</b>	09:01 AM
<b>Address</b>	22 ADDISON ST HARTFORD CT 06120-1101				<b>Telephone</b>	(860) 816-5955	<b>Regular Capacity</b>	6
					<b>Hours of Operation</b>	24 HOURS – 24 HOURS	<b>School Age Capacity</b>	3
<b>Is this a Change of Address?</b>	Yes?		No?	X	<b>Days of Operation</b>	Mon-Sun	<b>Summer Hours</b>	Open
<b>New Address</b>					<b># Under 18 mths present</b>	0	<b>Weekend Hours</b>	Yes
					<b>Total children present</b>	0	<b>Night Hours</b>	Yes
<b>Type of Inspection</b>	Follow Up Corrective Action Plan				<b>Inspector's Name</b>	Silvana Carreon Zegarra		
<b>Provider's Email</b>	blairleora@gmail.com				<b>Inspector's Email</b>	silvana.carreon-zegarra@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>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>	<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>Statute and/or Regulation:</b>	<b>Description:</b>
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<b>WERE VIOLATIONS CITED DURING THIS VISIT?</b>	<b>YES/NO:</b> <b>No</b>
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<b>DISCUSSIONS/COMMENTS</b>
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<p>The provider created/completed a new Corrective Action Plan during the visit because she could not find the previous one.</p>
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<b>IMPORTANT NOTES</b>
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| <ul style="list-style-type: none"> <li>• It is the <u>provider's responsibility</u> to ensure <u>compliance with all local codes and/or ordinances</u> 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.</li> <li>• 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.</li> <li>• <b>APPLICANTS</b> –You <u>MAY NOT OPERATE</u> until all requirements have been met and a license has been issued by the Agency.</li> </ul> |
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 (Signature of OEC Representative)	 (Signature of OEC Representative)	<b>DATE CORRECTIONS DUE BY:</b>	 (Signature of Provider/Substitute/Applicant)
<b>Silvana Carreon Zegarra</b> (Printed Name)	 (Printed Name)		<b>LEORA BLAIR</b> (Printed Name)