



DIVISION OF LICENSING

450 Columbus Boulevard, Suite 302, Hartford, Connecticut 06103
 Phone (800)282-6063 or (860)500-4450 Fax (860)326-0552
 Email: oc.licensing@ct.gov Website: www.ctoec.org

CHILD CARE CENTER/GROUP CHILD CARE HOME FOLLOW UP – PARTIAL INSPECTION

Program Name	PRECIOUS TREASURERS ACADEMY					License Number	DCCC.70625		Date of Inspection	10/02/2025	
						Expiration Date	9/30/2029		Time of Inspection	10:12 AM	
Address	999 FOXON RD STE 2 & 3 NORTH BRANFORD CT 06471					Telephone	(203) 208-4164		Licensed Capacity	29	
						Hours of Operation	7:00 AM – 5:30 PM		Under Three Capacity	24	
Is this a Change of Address?		Yes?		No?	X	Days of Operation	Mon-Fri		Ages Served	6 – 10 weeks years	
New Address						Night Hours	No	Summer Hours	Open	Weekend Hours	No
						Program's Email	ptacademy2020@gmail.com				
Operator	PRECIOUS TREASURERS ACADEMY, LLC					Director	TAHJI ELISE SMITH-PRINGLE				
Endorsements	Pre-School, School Age, Under Three					Name of Inspector	Fil Montanye				
Numbers of Staff/Children Present	# Children Present under age 3	9	# Total Children Present	8	# of Staff Present	4	Purpose of Visit	Ratios for under and over 3 and supervision			

REGULATIONS NOT IN COMPLIANCE

Statute and/or Regulation and Description:	[-] 000 No Violations
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No violations were cited during this inspection

Statute and/or Regulation and Description:	
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REGULATIONS IN COMPLIANCE	
Statute and/or Regulation and Description:	[19a-79-4a(d)(4)(A-B) and (d)(6)] 027- Ratios
Statute and/or Regulation and Description:	[19a-79-4a(d)(4)(D)] 028- Supervision

Statute and/or Regulation and Description:		[19a-79-10(c)(2)]	118- Ratios- 1:4 (6wks-24mths), 1:5 (24-36mths)	
Statute and/or Regulation and Description:				
Statute and/or Regulation and Description:				
Statute and/or Regulation and Description:				
DISCUSSIONS/COMMENTS				
Were Violations cited during this visit? Y or N?		No	NOTE: * It is the operator's responsibility to ensure compliance with all local codes and ordinances.	
Signature of OEC Representative				Signature of Person in Charge
Printed Name	Fil Montanye		Kebrianna	Printed Name
2 nd OEC Representative			APPLICANTS: You <u>MAY NOT OPERATE</u> until all requirements have been met <u>and</u> a license has been issued by the Agency.	
Printed Name	Chaelyn Lombardo		THIS INSPECTION SHALL BE POSTED OR SHALL BE AVAILABLE FOR REVIEW UPON REQUEST.	
		Written Corrective Action Plan due by:		DIVISION OF LICENSING 450 Columbus Boulevard, Suite 302, Hartford, Connecticut 06103 Phone (800)282-6063 or (860)500-4450 Fax (860)326-0552 Email: cec.licensing@ct.gov Website: www.ctoec.org
OEC Representative's Email:		filomena.montanye@ct.gov		CAP: https://www.ctoec.org/forms-documents/corrective-action-plan-and-resolving-disputed-violations.pdf