



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	LITTLE BLESSINGS CHRISTIAN CHILDCARE CENTER				License Number	DCCC.70581		Date of Inspection	03/09/2026		
					Expiration Date	10/31/2028		Time of Inspection	08:45 AM		
Address	503 OLD TOLL RD MADISON CT 06443-1836				Telephone	(203) 421-2878		Licensed Capacity	51		
					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 – 5 weeks – years		
New Address					Night Hours	No	Summer Hours	Open	Weekend Hours	No	
					Program's Email	director@littleblessingsmadison.com					
Operator	LITTLE BLESSINGS CHRISTIAN CHILDCARE CENTER, INC.				Director	ROBIN COSTA					
Endorsements	Pre-School, Under Three				Name of Inspector	Bridget Merrill					
Numbers of Staff/Children Present	# Children Present under age 3	16	# Total Children Present	28	# of Staff Present	12	Purpose of Visit	Partial inspection for under 3 group size only			

REGULATIONS NOT IN COMPLIANCE

Statute and/or Regulation and Description: [-] 000 No Violations

No violations were cited during this inspection

Statute and/or Regulation and Description:

Statute and/or Regulation and Description:

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

REGULATIONS IN COMPLIANCE

Statute and/or Regulation and Description:	[19a-79-10(c)(3)]	119- Group size- max 8 (6wks-24mths), max 10 (24-36mths)
---	-------------------	--

Observed group size to be in compliance with regulations.



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

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

DISCUSSIONS/COMMENTS

Observed not violations of under 3 group size.

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	Bridget Merrill	Robin Costa	Printed Name
2 nd OEC Representative	APPLICANTS: You <i>MAY NOT OPERATE</i> until all requirements have been met and a license has been issued by the Agency.		
Printed Name	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: oc.licensing@ct.gov Website: www.ctoec.org
---	--	---

OEC Representative's Email: bridget.merrill@ct.gov	CAP: https://www.ctoec.org/forms-documents/corrective-action-plan-and-resolving-disputed-violations.pdf
---	--