



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	ALL ABOUT KIDS OF NORWALK				License Number	DCCC.70775		Date of Inspection	03/13/2026		
					Expiration Date	8/31/2028		Time of Inspection	01:24 PM		
Address	131 STRAWBERRY HILL AVE NORWALK CT 06851-5930				Telephone	(203) 570-2415		Licensed Capacity	33		
					Hours of Operation	7:30 AM – 6:00 PM		Under Three Capacity	16		
Is this a Change of Address?	Yes?		No?	X	Days of Operation	Mon-Fri		Ages Served	12 – 5 month years		
New Address					Night Hours	No	Summer Hours	Open	Weekend Hours	No	
					Program's Email	Glekasn@gmail.com					
Operator	ALL ABOUT KID OF NORWALK, LLC				Director	NIKOLETTA GLEKAS					
Endorsements	Pre-School, Under Three				Name of Inspector	Cathy Anderson					
Numbers of Staff/Children Present	# Children Present under age 3	14	# Total Children Present	27	# of Staff Present	7	Purpose of Visit	playground inspection could not inspect at the full inspection due to being snow covered			

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-79-7a(h)(1-9)]	111- Outdoor space
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The regulation regarding outdoor space was found to be in compliance during this visit.

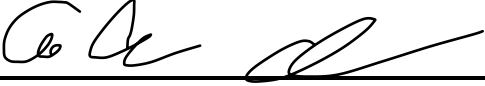

Statute and/or Regulation and Description:	
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DISCUSSIONS/COMMENTS

Discussed bottom of shed is worn in areas_S hooks are open

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.
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Signature of OEC Representative			Signature of Person in Charge
Printed Name	Cathy Anderson	Dayanne Quito	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
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OEC Representative's Email: catherine.anderson@ct.gov	CAP: https://www.ctoec.org/forms-documents/corrective-action-plan-and-resolving-disputed-violations.pdf
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