



**FAMILY CHILD CARE HOME SUPPLEMENTAL INSPECTION**

<b>Provider</b>	PAULINA MENDOZA				<b>License Number</b>	DCFH.53821	<b>Date of Inspection</b>	03/19/2026
					<b>Expiration Date</b>	12/31/2028	<b>Time of Inspection</b>	10:15 AM
<b>Address</b>	89 WILLOW ST APT 1 WATERBURY CT 06710-2041				<b>Telephone</b>	(203) 465-2519	<b>Regular Capacity</b>	6
					<b>Hours of Operation</b>	8:30 AM – 7:30 PM	<b>School Age Capacity</b>	3
<b>Is this a Change of Address?</b>	<b>Yes?</b>	<input checked="" type="checkbox"/>	<b>No?</b>	<input type="checkbox"/>	<b>Days of Operation</b>	Mon-Fri	<b>Summer Hours</b>	Open
<b>New Address</b>	140 Edgewood Ave Waterbury CT 06706				<b># Under 18 mths present</b>	0	<b>Weekend Hours</b>	Yes
					<b>Total children present</b>	2	<b>Night Hours</b>	No
<b>Type of Inspection</b>	Follow up to COA, outside play area				<b>Inspector's Name</b>	Alexandra Rodriguez		
<b>Provider's Email</b>	Lamodelopau102090@gmail.com				<b>Inspector's Email</b>	alexandra.rodriquez@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).*

*Paulina Mendoza*

*Signature of Provider/Applicant/Substitute/Emergency Caregiver*

**REGULATORY VIOLATIONS**

<b>Statute and/or Regulation:</b> [19a-87b-9(b)]	<b>Description:</b> 023-Freedom of Hazards
Observed outdoor play area- observed a sharp broken fence panel. Per provider, she wants to use back deck on upper level for outdoor play until outside playarea is remodeled with new fence. Gaps between wooden slats are wider than 4inches. Continued in discussion._	
<b>Statute and/or Regulation:</b>	<b>Description:</b>
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<b>OTHER FINDINGS-REGULATIONS IN COMPLIANCE</b>	
<b>Statute and/or Regulation:</b> [19a-87b-5(d) and/or 10(a)]	<b>Description:</b> 004-Capacity
Two grandchildren present	
<b>Statute and/or Regulation:</b>	<b>Description:</b>

<b>Statute and/or Regulation:</b>	<b>Description:</b>

<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> Yes
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**DISCUSSIONS/COMMENTS**

#23) continued- Per provider she will purchase a cover to cover large gaps on deck. Provider understands that based on the limited space observed on deck her capacity will decrease to 6+0. She may request an increase in capacity once she completes repairs on outdoor play area on ground level. Observed a sharp broken fence panel on ground level. Discussed the following: During inspection provider's adult son was present(per provider: new household member who plans to move in at the end of the month.) licensing specialist reminded provider new household member must have a current adult medical statement and current background check. She stated he has an appointment today 3/19/26. Observed three windows on a porch leading to deck. Three windows are missing screens and provider understands she must keep them locked or install window guards. Provider stated will maintain windows locked and plans to seal them completely to create a pantry.

**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.**

		<b>DATE CORRECTIONS DUE BY:</b>	
(Signature of OEC Representative)	(Signature of OEC Representative)	04/02/2026	(Signature of Provider/Substitute/Applicant)
<b>Alexandra Rodriguez</b>			<b>PAULINA MENDOZA</b>
(Printed Name)	(Printed Name)		(Printed Name)