



**DIVISION OF LICENSING**

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

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

Program Name	MY LITTLE RASCALS TOO				License Number	DCCC.70341		Date of Inspection	03/20/2026	
					Expiration Date	12/31/2028		Time of Inspection	01:56 PM	
Address	1850 WEST ST SOUTHINGTON CT 06489-1029				Telephone	(860) 426-9933		Licensed Capacity	79	
					Hours of Operation	6:30 AM – 6:00 PM		Under Three Capacity	46	
Is this a Change of Address?	Yes?		No?	X	Days of Operation	Mon-Fri		Ages Served	6 – 9 weeks – years	
New Address					Night Hours	No	Summer Hours	Open	Weekend Hours	No
					Program's Email	mylittlerascals32@yahoo.com				
Operator	MY LITTLE RASCALS TOO LLC				Director	KELLY GORAL				
Endorsements	Pre-School, School Age, Under Three				Name of Inspector	Betty Mayer				
Numbers of Staff/Children Present	# Children Present under age 3	32	# Total Children Present	55	# of Staff Present	12	Purpose of Visit	Follow playground inspection		

**REGULATIONS NOT IN COMPLIANCE**

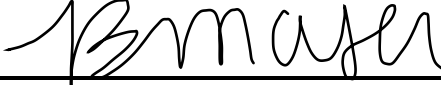

Statute and/or Regulation and Description:	[19a-79-7a(h)(1-9)]	111- Outdoor space
<p>Program not in compliance with ensuring that screws that protrude are covered or protected when observed 10 screws unprotected on exit gate from playground area.</p>		
Statute and/or Regulation and Description:	[19a-79-7a(h)(7)-(A-C)]	112- Outdoor Protected/Fenced
<p>Program not in compliance with ensuring that barriers/fencing is four feet in height when fencing along the back of the playground area and on the side near parking lot observed at 3.5 to 3.9 feet.</p>		
Statute and/or Regulation and Description:		


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**DISCUSSIONS/COMMENTS**

Were Violations cited during this visit? Y or N?	<b>Yes</b>	<b>NOTE:</b> * 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	<b>Betty Mayer</b>	<b>Kelly Goral</b>	Printed Name
2 <sup>nd</sup> OEC Representative	<b>APPLICANTS:</b> You <i>MAY NOT OPERATE</i> until all requirements have been met and a license has been issued by the Agency.		
Printed Name	<b>THIS INSPECTION SHALL BE POSTED OR SHALL BE AVAILABLE FOR REVIEW UPON REQUEST.</b>		

	Written Corrective Action Plan due by:  <b>04/03/2026</b>	<b>DIVISION OF LICENSING</b> 450 Columbus Boulevard, Suite 302, Hartford, Connecticut 06103 Phone (800)282-6063 or (860)500-4450 Fax (860)326-0552 Email: <a href="mailto:oc.licensing@ct.gov">oc.licensing@ct.gov</a> Website: <a href="http://www.ctoec.org">www.ctoec.org</a>
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OEC Representative's Email: <b>elizabeth.mayer@ct.gov</b>	CAP: <a href="https://www.ctoec.org/forms-documents/corrective-action-plan-and-resolving-disputed-violations.pdf">https://www.ctoec.org/forms-documents/corrective-action-plan-and-resolving-disputed-violations.pdf</a>
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