



**FAMILY CHILD CARE HOME SUPPLEMENTAL INSPECTION**

<b>Provider</b>	SHARI IVES				<b>License Number</b>	DCFH.57079	<b>Date of Inspection</b>	04/06/2026
					<b>Expiration Date</b>	7/31/2026	<b>Time of Inspection</b>	01:46 PM
<b>Address</b>	4B STONEGATE CIRCLE BRANFORD CT 06405-7311				<b>Telephone</b>	(203) 443-0446	<b>Regular Capacity</b>	6
					<b>Hours of Operation</b>	6:30 AM – 6:00 PM	<b>School Age Capacity</b>	3
<b>Is this a Change of Address?</b>	Yes?		No?	X	<b>Days of Operation</b>	Mon-Fri	<b>Summer Hours</b>	Open
<b>New Address</b>					<b># Under 18 mths present</b>	2	<b>Weekend Hours</b>	No
					<b>Total children present</b>	7	<b>Night Hours</b>	No
<b>Type of Inspection</b>	Partial for safe sleep				<b>Inspector's Name</b>	Melissa Lohr		
<b>Provider's Email</b>	shari.ives@yahoo.com				<b>Inspector's Email</b>	melissa.lohr@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).

*Diana Ellyson*

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

**REGULATORY VIOLATIONS**

<b>Statute and/or Regulation:</b> [-]	<b>Description:</b> 000 No Violations
No violations were cited during this inspection	
<b>Statute and/or Regulation:</b>	<b>Description:</b>
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<b>Statute and/or Regulation:</b>	<b>Description:</b>
<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
<b>Statute and/or Regulation:</b> [19a-87b-5(e)]	<b>Description:</b> 006-Infant/Toddler Restriction

Statute and/or Regulation: [19a-87b-8(c)]	Description: 020-Emergency Caregiver
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Statute and/or Regulation: [19a-87b-9(f)(1-2)]	Description: 039-Indoor/Outdoor Space-Safe and Sufficient
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Statute and/or Regulation: [19a-87b-9(f)(2) and/or 19a-87b-9(f)(4)]	Description: 040-Body of Water
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Statute and/or Regulation: [19a-87b-9(f)(3)]	Description: 041-Hot Tubs
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WERE VIOLATIONS CITED DURING THIS VISIT?	<u>YES/NO:</u> No
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**DISCUSSIONS/COMMENTS**

Emergency caregiver was present at arrival and had to bring her granddaughter with her, which made the capacity 7. Provider had an emergency and returned shortly after walkthrough was conducted. Provider's adult cousin was also present. Discussed having children's records readily available for emergency caregiver.

**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.**

 (Signature of OEC Representative)	 (Signature of OEC Representative)	DATE CORRECTIONS DUE BY:	 (Signature of Provider/Substitute/Applicant)
<b>Melissa Lohr</b> (Printed Name)	 (Printed Name)		<b>SHARI IVES</b> (Printed Name)