



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	HAPPY HANDS PREP					License Number	DCCC.70366		Date of Inspection	04/08/2026	
						Expiration Date	8/31/2029		Time of Inspection	08:40 AM	
Address	421 WOLCOTT RD WOLCOTT CT 06716-2661					Telephone	(203) 441-4455		Licensed Capacity	36	
						Hours of Operation	9:00 AM – 2:00 PM		Under Three Capacity	10	
Is this a Change of Address?		Yes?		No?	X	Days of Operation	Mon-Fri		Ages Served	2 – 12 years	
New Address						Night Hours	No	Summer Hours	Open	Weekend Hours	No
						Program's Email	l.murray@happyhandsprep.com				
Operator	HAPPY HANDS PREP					Director	LORI MURRAY				
Endorsements	Pre-School, School Age, Under Three					Name of Inspector	Johanne Dalo				
Numbers of Staff/Children Present	# Children Present under age 3	0	# Total Children Present	1	# of Staff Present	6	Purpose of Visit	Follow up to inspection conducted on 03/10/206 for playground due to snow coverage			

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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Statute and/or Regulation and Description:	
REGULATIONS IN COMPLIANCE	
Statute and/or Regulation and Description:	[19a-79-7a(h)(1-9)] 111- Outdoor space
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			
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	Johanne Dalo		 Lori murray
2 nd OEC Representative			APPLICANTS: You <i>MAY NOT OPERATE</i> until all requirements have been met <u>and</u> a license has been issued by the Agency. THIS INSPECTION SHALL BE POSTED OR SHALL BE AVAILABLE FOR REVIEW UPON REQUEST.
Printed Name			
		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:		CAP: https://www.ctoec.org/forms-documents/corrective-action-plan-and-resolving-disputed-violations.pdf	