



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
 INVESTIGATION**

Program Name	HOLLY HILL CHILD DEVELOPMENT & LEARNING CENTER				License Number	DCCC.16790		Date of Inspection	05/08/2026	
					Expiration Date	4/30/2030		Time of Inspection	09:57 AM	
Address	308 PECK LN ORANGE CT 06477-3325				Telephone	(203) 799-6300		Licensed Capacity	112	
					Hours of Operation	6:30 AM - 6:30 PM		Under Three Capacity	76	
Is this a Change of Address?	Yes?		No?	X	Days of Operation	Mon-Fri		Ages Served	6 - 10 weeks - years	
New Address					Night Hours	No	Summer Hours	Open	Weekend Hours	No
					Program's Email	hollyhillchildcare2010@gmail.com				
Operator	HOLLY HILL CHILD DEV & LEARNING CENTER LLC				Director	DEBORAH FEDORKO				
Endorsements	Pre-School, School Age, Under Three				Name of Inspector	Karen Hicks				
Numbers of Staff/Children Present	# Children Present under age 3	35	# Total Children Present	55	# of Staff Present	13	Purpose of Visit	Follow-up 2026-414; safe sleep		

SUBSTANTIATED VIOLATIONS

Statute and/or Regulation and Description:

Statute and/or Regulation and Description:



Statute and/or Regulation and Description:

Statute and/or Regulation and Description:	
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Statute and/or Regulation and Description:	
NOT SUBSTANTIATED or PENDING	
Statute and/or Regulation and Description:	[19a-79-3a(b)(7)(A)] Pending 006-Child behavior management
Child behavior management compliance is pending further investigation. Provide picture by Monday 5/11.	
Statute and/or Regulation and Description:	[19a-79-10(g)(1-8)] Not Substantiated 130- Safe Sleep
The regulation regarding infant sleeping was found to be in compliance during this visit.	

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.
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Signature of OEC Representative			Signature of Person in Charge
Printed Name	Karen Hicks	Deborah fedorko	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: karen.hicks@ct.gov	CAP: https://www.ctoec.org/forms-documents/corrective-action-plan-and-resolving-disputed-violations.pdf
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