



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 Website: www.ctoec.org

FAMILY CHILD CARE HOME SUPPLEMENTAL INSPECTION

| | | | | | | | | |
|-------------------------------------|--|--|-----|---|--------------------------------|---------------------|----------------------------|------------|
| Provider | NIO SOTI MASSIEL VALLADOLID | | | | License Number | DCFH.58329 | Date of Inspection | 06/22/2026 |
| | | | | | Expiration Date | 3/31/2030 | Time of Inspection | 09:29 AM |
| Address | 141 WOLCOTT ST BRISTOL CT 06010-6555 | | | | Telephone | (929) 294-5633 | Regular Capacity | 6 |
| | | | | | Hours of Operation | 7:00 AM – 5:00 PM | School Age Capacity | 3 |
| Is this a Change of Address? | Yes? | | No? | X | Days of Operation | Mon-Sat | Summer Hours | Open |
| New Address | | | | | # Under 18 mths present | 1 | Weekend Hours | Yes |
| | | | | | Total children present | 2 | Night Hours | No |
| Type of Inspection | Follow-Up for Outdoor Play Area that was Covered in Snow During Initial Inspection | | | | Inspector's Name | Melina Perez | | |
| Provider's Email | niosoticc@gmail.com | | | | Inspector's Email | melina.perez@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).

Melina Perez

Signature of Provider/Applicant/Substitute/Emergency Caregiver

REGULATORY VIOLATIONS

| | |
|---------------------------------------|---------------------------------------|
| Statute and/or Regulation: [-] | Description: 000 No Violations |
|---------------------------------------|---------------------------------------|

No violations were cited during this inspection

| | |
|-----------------------------------|---------------------|
| Statute and/or Regulation: | Description: |
|-----------------------------------|---------------------|

| | |
|-----------------------------------|---------------------|
| Statute and/or Regulation: | Description: |
|-----------------------------------|---------------------|

| | |
|-----------------------------------|---------------------|
| Statute and/or Regulation: | Description: |
|-----------------------------------|---------------------|

| | |
|-----------------------------------|---------------------|
| Statute and/or Regulation: | Description: |
|-----------------------------------|---------------------|

| | |
|---|--|
| Statute and/or Regulation: | Description: |
| | |
| Statute and/or Regulation: | Description: |
| | |
| Statute and/or Regulation: | Description: |
| | |
| Statute and/or Regulation: | Description: |
| | |
| Statute and/or Regulation: | Description: |
| | |
| Statute and/or Regulation: | Description: |
| | |
| Statute and/or Regulation: | Description: |
| | |
| OTHER FINDINGS-REGULATIONS IN COMPLIANCE | |
| Statute and/or Regulation: [19a-87b-5(d) and/or 10(a)] | Description: 004-Capacity |
| | |
| Statute and/or Regulation: [19a-87b-5(e)] | Description: 006-Infant/Toddler Restriction |
| | |

| | |
|---|--|
| Statute and/or Regulation: [19a-87b-9(f)(1-2)] | Description: 039-Indoor/Outdoor Space-Safe and Sufficient |
|---|--|

| | |
|-----------------------------------|---------------------|
| Statute and/or Regulation: | Description: |
|-----------------------------------|---------------------|

| | |
|-----------------------------------|---------------------|
| Statute and/or Regulation: | Description: |
|-----------------------------------|---------------------|

| | |
|-----------------------------------|---------------------|
| Statute and/or Regulation: | Description: |
|-----------------------------------|---------------------|

| | |
|-----------------------------------|---------------------|
| Statute and/or Regulation: | Description: |
|-----------------------------------|---------------------|

| | |
|-----------------------------------|---------------------|
| Statute and/or Regulation: | Description: |
|-----------------------------------|---------------------|

| | |
|-----------------------------------|---------------------|
| Statute and/or Regulation: | Description: |
|-----------------------------------|---------------------|


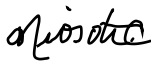
| | |
|---|-------------------|
| WERE VIOLATIONS CITED DURING THIS VISIT? | YES/NO: No |
|---|-------------------|

DISCUSSIONS/COMMENTS

Follow-up visit was completed today as specialist was unable to conduct a thorough inspection of the outdoor play area during initial inspection on 2/26/2026 as it was covered in snow. Specialist was able to conduct a thorough inspection of the outdoor play area today. It is also important to note that while the provider's backyard is already entirely fenced in; specialist observed today that she has also created an additional smaller enclosed play area specifically for the daycare children as the backyard has a small hill. No hazards observed during today's visit and provider was advised she may begin use of the outdoor play area. *Visit also documented as an announced partial and not follow-up visit as initial inspection was closed out on 3/03/2026.*

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) | | DATE CORRECTIONS DUE BY: |  (Signature of Provider/Substitute/Applicant) |
| Melina Perez (Printed Name) | (Printed Name) | | NIOSOTI MASSIEL VALLADOLID (Printed Name) |