DEPARTMENT OF PUBLIC HEALTH AND SOCIAL SERVICES
DIVISION OF ENVIRONMENTAL HEALTH

CHILD CARE FACILITY INSPECTION REPORT

REASON		GRADE	Inspection Date:	ESTABLISHMENT NAME:
Regular	✓	Ø	8/23/16	DEDEDO CHILDCARE & LEARNING CENTER
Follow-Up			Time In/Out:	OWNER/OPERATOR:
Complaint			11:50 / 12:30	L. T. DIGI-TELL ENTERPRISES INC
Investigation		RATING		LOCATION: DEDEDO / Establishment Type: CCC/NURSERY
Other:		A	Sanitary Permit No.: 20000-60002125	PERMIT STATUS: ✓ Valid ____ Temporary ____ Expired
No. of Children: 14 Male 14 Female ____ Total				Child Care License: No.: 150158 / ✓ Valid / / Provisional / / Expired

The following items identify violations found this day in the operations and facilities which must be corrected by the next inspection or sooner as the Department indicates. Non-compliance may result in downgrading or permit suspension. To appeal a written request for hearing must be submitted before the indicated correction date.

ITEM*	REMARKS	DEMERIT	CORRECT BY
	A REGULAR INSPECTION WAS CONDUCTED.		
	PREVIOUS INSPECTION ON 5/16/16 (C.A)		
	THE FOLLOWING WAS OBSERVED:		
	NO VIOLATIONS		
	"A" PLACARD #02361 ISSUED		
	BRIEFED PIC THERESA HALLADAY ON ABOVE.		

I have read and understand the above violation(s) and I am aware of the corrective measures to be taken.

*Note: When any of the following items are cited above, they shall be corrected within 10 days of this inspection: (2), (4), (6), (14), (21), (23), (24), (27), (28), (39) & (40).

Received By (Name & Title): Teresa S Halladay Director 8/22/16

DEH Inspector (Name & Title): James Cruz 12PH01