DEPARTMENT OF PUBLIC HEALTH AND SOCIAL SERVICES
DIVISION OF ENVIRONMENTAL HEALTH

CHILD CARE FACILITY INSPECTION REPORT

REASON	✓	GRADE	Inspection Date: 9/21/17	ESTABLISHMENT NAME: PRECIOUS ONES CHILDCARE & LEARNING CENTER
Regular	✓	O	Time In/Out: 3:45 PM / 4:50 PM	OWNER/OPERATOR: PRECIOUS ONE'S CHILD CARE CENTER
Follow-Up				LOCATION: 642 CHALAN KANTON TASI SINA VANA / Establishment Type: CCC/NURSERY
Complaint				
Investigation		RATING A	Sanitary Permit No.: 20000-170000777	PERMIT STATUS: ✓ Valid ___ Temporary ___ Expired
Other:				
No. of Children: 32 Male 23 Female 55 Total				Child Care License: No.: 150062 ✓ 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 CONDUCTED ON 6/22/17		
	(6,A).		
	ALL PREVIOUS VIOLATIONS HAVE BEEN		
	CORRECTED. ITEMS # 12, 29 & 31.		
	NO NEW VIOLATIONS WERE OBSERVED.		
	"A" PLACARD # 02544 ISSUED.		
	PIC BRIEFED 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): RACHAEL SABLAN DIRECTOR

DEH Inspector (Name & Title): J. GARCIA EPHO I