South Carolina Department of Social Services Office of Child Care Licensing INSPECTION VISIT FORM FOR REGISTERED FAMILY CHILD CARE HOMES

	Date of Inspection: 4/20/2	3 Time of Inspection	n: _	11:1	כגי
rmit #: 25280	Type of Inspection: Annual Complaint Renewal Follows	ow up (onginai inspe ollow up: □pending de	ction	_essep	
dress: 144 General Road MARION	, SC 29571 Hours of Ope		BTICIE	Incles	□ sen-re į
lephone #: 843-319-0722	Any changes in contact info (Phone/Email/Fax)? Yes No			ر ام	Ma.
ange in address? □ Yes □ No al Capacity: 6	Zoning restrictions : Yes Registration	Overnight Care?		es or	NO
	surance 63-13-210 Yes No If no, verify signed statements from p	sconto -Alco - No			
my die lenetring. Vermee Liability in	scrance os-15-210 in tes wino intro, verily signed statements from p	erents. Er tes 🗆 No			
H	OME INSPECTION (HEALTH, SANITATION, & SAFETY)				
			С	N	N/A
Kitchen (sharp objects, cleaning	ng supplies, etc. inaccessible to children)		ω/		
Living room (no excessive clut		· · ·	7		-
Bedrooms (no children unsup	Bedrooms (no children unsupervised, guns or drugs, etc)				-
Sleep Arrangements (no Pack-N-Plays)			፼ ′	<u> </u>	-
Cribs meet CPSC requirements			~		
Bathrooms (no visible mold, etc.)			<u>~</u>		
	Garage/Shed (secured if harmful items inside)				
Outside/Playground (sharp edges, rusty points, fence if ditches, accessible to street)			☑		
Multiple floor levels?					D Ala
No suffocation /Poisonous hazardous materials around the house					
No major structural damages (Holes in floors or walls, etc.)				0	
Pets/Animals? Yes No Up to date vaccination records?			D /	0	
Smoke Detectors/Fire Extinguishers? If not, TA provided Yes No			N N		
Any serious injuries requiring		71			
Any fatalities?			□ Yes ⊠∕No □ Yes ∞/No		
	DOCUMENTATION			100 13	110
<i>(</i> €)	= 0 0011/2111/111011				11 17 A
			\sim	M	
	profiled children?		C Z	N	N/A
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