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

ne /	Date of Inspection, 194 19 Ori	Lime of Inspection	n. 1()	SXA
Type of Inspection: Annual	Date of Inspection: 13 13 13 13 13 13 13 13 13 13 13 13 13	Jp (original inspec	tion da	ite
	Reason for Follow	w up: □pending de	ficienc	ies ⊓self-
5 A 1 1 A 1 A 1 A 1 A 1 A 1 A 1 A 1 A 1	Hours of Operati	on: 7 days6:30a-8	:00p	
Any changes in contact info (Pho	one/Email/Fax)? □ Yes 🗑 No			No.
Zoning restrictions □ Yes V No _				4110
Items to be posted: Registration	No. of the second			
surance 63-13-210 D Yes of No If no	o, verify signed statements from paren	ts. √ ⊔ Yes □ No		
OME INSPECTION (HEALTH, SAN	ITATION, & SAFETY)	130		
		10000000	CI	N/A
Kitchen (sharp objects, cleaning supplies, etc. inaccessible to children)]
Living room (no excessive clutter, etc.)			8 [
Bedrooms (no children unsupervised, guns or drugs, etc)			1	
Sleep Arrangements (no Pack-N-Plays)			1	
Cribs meet CPSC requirements				
Bathrooms (no visible mold, etc.)			7	
Garage/Shed (secured if harmful items inside)				-
Outside/Playground (sharp edges, rusty points, fence if ditches, accessible to street)			/	
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zardous materials around the hous	e		/	
No major structural damages (Holes in floors or walls, etc.)				
Pets/Animals? ☐ Yes ☐ No Up to date vaccination records?				
			7	
medical attention?				1
DOCUMENTATIO	N		L 103	U QIO
				I N/A
DSS 2909 completed for all enrolled children?				
Emergency Preparedness Plan?			-	
Yes No If yes, is the medica	tion expired?			
Permission forms from parents signed and dated?				
Field Trips? If yes, signed parental permissions forms? ☐ Yes ☐ No				
ental permissions forms? Yes	□ No	Г		
ental permissions forms? ☐ Yes STAFFING & SUPERVI		С		
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