



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

ORLENE HAWKS
DIRECTOR

August 17, 2022

Vivian Cooper
Emagination Station Child Care Center LLC
12451 East 8 Mile Road
Warren, MI 48089

RE: License #:	DC500397102
RE: SI LOG #:	Emagination Station Child Care Ctr 12451 East 8 Mile Road Warren, MI 48089

Dear Ms. Cooper:

This letter is to advise you that the corrective action plan you submitted, regarding each rule violation cited in the recently completed Interim Inspection Report, is approved.

You can find a copy of this corrective action approval letter and the associated report on our [website](#) under [Statewide Search for Licensed Child Care Centers and Homes](#). A description of each type of report and corrective action plans can be found under [Overview of Licensing Reports](#).

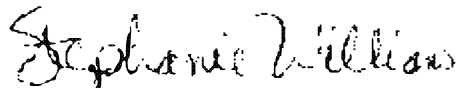
Violation cited	Noncompliance observed	Plan to correct	Date to be completed
R400.8134(4)	I observed that a handwashing sign was not posted in the restroom.	Licensee designee will obtain handwashing sign and post.	08/16/2022
R400.8315(1)	Thermometer missing from refrigerator.	Licensee designee will purchase thermometer and place in refrigerator.	08/16/2022
R400.8545(1)	I observed the center had a 1A10BC fire extinguisher in the kitchen.	Licensee designee will purchase a 2A10BC fire extinguisher for the kitchen.	08/16/2022

It is expected that the corrective action plan will be implemented within the time frames as outlined in your plan.

A follow-up evaluation may be made to verify compliance. Should the corrections not be implemented in the specified time, it may be necessary to reevaluate the status of your license.

The office provides technical assistance to meet the licensing requirements and consultation to improve services. Please contact me with any questions. In the event that I am not available and you need to speak to someone immediately, you may contact the local office at (517) 284-9730.

Sincerely,

A handwritten signature in black ink that reads "Stephanie Williams". The signature is written in a cursive, flowing style.

Stephanie A. Williams, Licensing Consultant
Bureau of Community and Health Systems
611 W. Ottawa Street
P.O. Box 30664
Lansing, MI 48909
(586) 744-8940