



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF  
LIFELONG EDUCATION, ADVANCEMENT, AND POTENTIAL  
LANSING

Dr Beverly Walker Griffea  
ACTING DIRECTOR

**Report Type** : Addendum to Original Report  
**Inspection Type:** Modification

**Date of Inspection:** 7/9/2024  
**Date of Report:** 7/11/2024

Licensee Name(s)	License Number	Capacity
Patricia Hudecz	DF290031644	7
Facility Name	Program Type	
Patricia Hudecz	Family Home	
Facility Address	Mailing Address	
922 River Street, Alma, MI, 48801	922 River Street, Alma, MI, 48801	
Facility Phone Number	Facility Email Address	
9897630652	sophias_closet1@hotmail.com	

### Findings of the Inspection

**Purpose of Addendum:** The addition of the main floor Master Bedroom and the 2nd floor Bedroom (E) to the approved child use space.

**Findings and Conclusions:** I recommend the addition of the main floor Master Bedroom and the 2nd floor Bedroom (E) to the approved child use space.

If you have questions regarding the report, please contact licensing consultant, Dana M. Hart at (517) 388-4625 or hartd8@michigan.gov. In the event that Dana M. Hart is not available and you need to speak to someone immediately, please contact the Child Care Licensing Bureau at 517-284-9730.

Description of Facility
The home is a two-story home with an unfinished basement, in the city of Alma.

Approved Child Use Space	
Room	Notes
Kitchen	
Room	Notes
Living Room	
Room	Notes

Dining Room	
<i>Room</i>	<i>Notes</i>
Bedroom (W)	
<i>Room</i>	<i>Notes</i>
Bathroom	
<i>Room</i>	<i>Notes</i>
Master Bedroom	
<i>Room</i>	<i>Notes</i>
Bedroom (E)	
Exits in the Home	There are two exits available on the main floor of the home: the front door and the back door. There are two exits available on the second level of the home: the main stairway and a designated exit window, located in the bedroom (W).
Spaces Not Approved	The basement, main floor master bedroom and the second floor bedroom (E).
Restroom(s) Used By Children in Care	The bathroom on the main floor, located off of the kitchen.
Fireplaces/Wood Burning Stoves	No.
Pets	Two cats.

#### Documentation of Required Inspections

<i>Type of Inspection</i>	<i>Date of Inspection</i>	<i>Findings</i>
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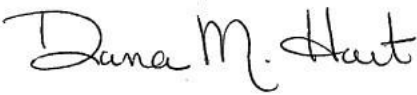
#### Description of Outdoor Play Area

<i>Location</i>	<i>Fenced</i>	<i>Outdoor Hazards</i>
Side yard and the front yard.	Not enclosed	None.

#### Hours of Operation

<i>Monday</i>	<i>Tuesday</i>	<i>Wednesday</i>	<i>Thursday</i>	<i>Friday</i>	<i>Saturday</i>	<i>Sunday</i>
12:00 AM To 11:59 PM	12:00 AM To 11:59 PM	12:00 AM To 11:59 PM	12:00 AM To 11:59 PM	12:00 AM To 11:59 PM	12:00 AM To 11:59 PM	12:00 AM To 11:59 PM

Terms, Program Components, and Variances					
Full Time or Part Time Care	Months of Operation	Care Before 6 AM	Care After 6 PM	Overnight Care	Weekend Care
	Year Round	No	No	No	No
<b>Ages of Children Served</b>	Birth - 12 years				
<b>Previous or Concurrent Licenses, Including Children's Foster Care</b>					
<b>Variances</b>	Yes.				

Recommendation	
I recommend the addition of the main floor Master Bedroom and the 2nd floor Bedroom (E) to the approved child use space.	
<b>Approved By:</b>	
	
Dana M. Hart <b>Licensing Consultant</b>	07/11/2024 <b>Date</b>