



Andy Beshear
GOVERNOR

CABINET FOR HEALTH AND FAMILY SERVICES
OFFICE OF INSPECTOR GENERAL

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Inspection Report

Provider Name: Denise's Childcare	Provider Information	CLR No: L356406
Provider Address: 700 Main Street, Gamaliel, KY, 42140	Provider Type: LICENSED TYPE II	Capacity: 12
Owner(s): Taylor, Tammy Denise		Director(s): Taylor, Tammy Denise

Inspection Type: Investigation	Inspection Information	Inspection No: 219906
Date Initiated: 04/24/2017 3:41 PM	Date Concluded: 04/25/2017 2:17 PM	
	No. of Children Present: 5	

Inspection Report	
General Administration	Not In Compliance
60 - Zoning	Not In Compliance
922 KAR 2:090. Section 6. License Issuance.	
(11) To qualify for a preliminary license, or maintain a regular license, a child-care center shall:	
(a) Provide written documentation from the local authority showing compliance with local zoning requirements;	
Findings:	
General: Based on review of documentation, this Type II child care center is not currently compliant with the local zoning/ordinances, i.e., the child care center is located inside the city limits and according to the current ordinance, they are required to have a business license. Based on interview, the child care center does not have a current business license and has never obtained a business license.	
Programming	Not In Compliance
410 - Infant/Toddler Combined with Older Children	Not In Compliance
922 KAR 2:120. Section 5. Infant and Toddler Play Requirements.	
(2) Except in accordance with subsection (3) of this section, an infant or toddler shall participate in an activity with an older child for no more than one (1) hour per day.	
Findings:	
General: Based on observation, there was one (1) staff member and three (3) children present during the surveyor's visit. The youngest child present was twenty (20) months of age and the oldest child present was four (4) years of age. The children were all present in one (1) room and based on interview, the director stated that the twenty-month-old child was combined with the other children for longer than one (1) hour.	

Signature of Provider/Representative

Title

Date