



Andy Beshear
GOVERNOR

CABINET FOR HEALTH AND FAMILY SERVICES
OFFICE OF INSPECTOR GENERAL

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Inspection Report

Provider Name: Aaron, Terry Lynn	Provider Information Provider Type: CERTIFIED	CLR No: C2057
Provider Address: 139 Clifton Parrigin Road, Albany, KY, 42602, 9520		Capacity: 6

Inspection Type: Annual Inspection	Inspection Information	Inspection No: 293045
Date Initiated: 07/29/2020 3:15 PM	Date Concluded: 07/29/2020 4:00 PM	
No. of Children Enrolled: 13	No. of Children Present: 4	

Inspection Report	
Background Checks	In Compliance
Supervision	In Compliance
General Administration	In Compliance
Provider Requirements	In Compliance
Provider Records	In Compliance
Programming	In Compliance
Premises	In Compliance
Hygienic Practices	In Compliance
First Aid/Medication	In Compliance
Outdoor Play Area	In Compliance
Equipment	In Compliance
Transportation	In Compliance
Food Service/Food Program	In Compliance
Food Service	In Compliance
Children's Records	In Compliance
Written Documentation	In Compliance
Posted/Available Documentation	In Compliance
Animals	In Compliance
Posted Requirements	In Compliance
Emergency Regulation	In Compliance

Signature of Provider/Representative

Title

Date