



Andy Beshear
GOVERNOR

CABINET FOR HEALTH AND FAMILY SERVICES
OFFICE OF INSPECTOR GENERAL

Eric Friedlander
SECRETARY

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Adam Mather
INSPECTOR GENERAL

Inspection Report

| | | |
|---|---------------------------------|----------------------|
| Provider Name: Curtis, Michelle Lynn | Provider Information | CLR No: C6686 |
| Provider Address: 3384 Carriage Lane, Lexington, KY, 40517 | Provider Type: CERTIFIED | Capacity: 6 |

| | | |
|---|---|------------------------------|
| Inspection Type: Annual Inspection | Inspection Information | Inspection No: 221223 |
| Date Initiated: 09/22/2017 7:45 AM | Date Concluded: 09/22/2017 9:00 AM | |
| No. of Children Enrolled: 7 | No. of Children Present: 2 | |

| Inspection Report | | |
|-------------------------------|--|-----------------------|
| 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 | | Not Applicable |
| Food Service | | In Compliance |
| Children's Records | | In Compliance |
| Written Documentation | | In Compliance |
| Posted Documentation | | In Compliance |
| Animals | | Not Applicable |
| Posted Requirements | | In Compliance |

Signature of Provider/Representative

Title

Date