

# Family Day Care Inspection Compliance Plan

Provider's Name: **Nicole Allen**

City: **Sisseton**

Provider Number: **016533811**

Inspector: **Julie Hermansen**

Date of Inspection: **04/30/2020**

Time of Inspection: **12:45 PM**

**Provider was found to be in full compliance**

**Nicole Allen**

Provider Signature

**05/04/2020**

Date

**Julie Hermansen**

Inspector Signature

**05/04/2020**

Date