South Carolina Department of Social Services Office of Child Care Licensing INSPECTION VISIT FORM FOR REGISTERED FAMILY CHILD CARE HOMES

erator Name: Jessica Williams		Date of Inspection: 8-1	25 Time of Inspe	ction: _	10.0	10am
mit #: 25589	Type of Inspection: Annual	□ Complaint □ Renewal □ F				
ress: 200 Pine Creek Court Ext.	C 07 CDEENIVILLE CC 20606		Follow up: pending	-		
ress. 200 Pine Creek Court Ext.	G 97 GREENVILLE, SC 29005		Operation: M-12:00AI W-12:00AM-11:55P			
			W-12:00AM-11:55P M-11:55PM	IVI I N-T	Z:UUAI	VI-11:
phone #: 864-516-0456	Any changes in contact info /F	Phone/Email/Fax)? □ Yes المحرد		r02 12/5	Too -	Mo
nge in address? PYes 12-No	Zoning restrictions - Yes A No	illollerchialirax): Li res	o Overnight Car	e: ea 1	es 🗆	IVO
Capacity: 6	Items to be posted PRegistration	on .				
	nsurance 63-13-210 - Yes No If		parents, o Yes o No	,		
E Dest City, Tenny	HOME INSPECTION (HEALTH, SA	NITATION & SAFETY)	10 Nov. 10	J. Hill		
AND DESCRIPTION OF THE PARTY OF	IONE INSPECTION (HEALTH, SA	MINITATION, & SAFETT)				
				С	N	N/A
	ing supplies, etc. inaccessible to c	hildren)		į į		
Living room (no excessive clutter, etc.)						
Bedrooms (no children unsupervised, guns or drugs, etc)				in		
Sleep Arrangements (no Pack-N-Plays)				0		
Cribs meet CPSC requirements				10-	В	
Bathrooms (no visible mold, etc.)				<u>B</u>		
Garage/Shed (secured if harmful items inside)					0	<u>.</u>
Outside/Playground (sharp edges, rusty points, fence if ditches, accessible to street)						002
Multiple floor levels?					Yes □	No
No suffocation /Poisonous hazardous materials around the house				12		
No major structural damages (Holes in floors or walls, etc.)				سنتل		_
Pets/Animals? ☐ Yes ☐ No Up to date vaccination records?						
Smoke Detectors/Fire Extinguishers? If not, TA provided ☐ Yes ☐ No					-	
Any serious injuries requiring					Yes 🗗	_
Any fatalities?				-	Yes 👨	
HITCH STATE OF STREET	DOCUMENTAT	ION	Ellis Nathanio	Second 1		N. Pari
CONTRACTOR OF THE PROPERTY OF THE PARTY OF T	The Assessment of the Control of the			С	N	N/A
DSS 2909 completed for all e	prolled children?	Control of the Contro	the state of the state of the state of	-		
Emergency Preparedness Pla				1		
Is medication administered? Yes No If yes, is the medication expired?				 		<u> </u>
Permission forms from parents signed and dated?						
Field Trips? If yes, signed parental permissions forms? No						12
riela irips: Il yes, signea pa	STAFFING & SUPER			W.		
NAME OF TAXABLE PARTY.	STAFFING & SUPER				HOLES OF	
and the fraction of the second				С	N	
Staff observed were qualified				10		
Training hours up-to-date? 63-13-825				19		
Is provider over capacity?					Yes p	No-
Number of children observed	:			1		
C = Compliant with Regulation -	N = Noncompliant with Regulation	No violations noted at the time	of visit 🗓			
	14 AAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAA	The violations income at the cities	01 11011			
Supervision: Care provided to an ind	ividual child or group of children. Adequ	iate supervision requires awareness	of and responsibility for th	e ongoin	g activit	y of ea
hild, knowledge of activity requirement	nts and children's needs and accountab	ility for their care. Adequate supervis	ion also requires the oper	ator and	or staff	being r
ind having ready access to children in Signature of Operator/Emerge		Illiams Dal	te: 8-17-2	50	Doft-o-	.d +
organization of operator/Emerge	TICY F 613011.	///.			Neiuse	นเบร
Signature of Child Care Licens	sing Specialist:	Outs Date	te: 8-7-25	-		
-		CO		_		