



CCLP/CCDF PROVIDER ASSESSMENT REPORT



Business Name: Green Mocha School (PL 1) Physical Address: Chapin Key

Primary Contact Person: Lorick Mullari Contact Number: 235-2185

2nd Contact Person: _____ Email Address: _____

Capacity: _____ Maximum: _____ Enrolled: _____ Category(s): Center: _____ Group Home: _____

Date of Assessment: 6/7/18 Assessed By: George R. Fleming
Print Name

Announced: Unannounced: _____ Visit/Monitoring: _____

Type of Assessment: _____ Preliminary _____ Renewal

CCLP#: 1021 1022 Date of issue: 6/24/17 Expiration Date: 6/24/18 Capacity: _____

Grouping Clause Monitoring Inspection:

- | | | | | |
|----------------|---------------|--------------|---------------|-----------|
| (1) Electrical | (3) Emergency | (5) Outdoor | (7) Health | (9) Other |
| (2) Signage | (4) Sanitary | (6) Capacity | (8) Documents | |

- Staff:
- 1.
 - 2.
 - 3.
 - 4.
 - 5.
 - 6.
 - 7.
 - 8.
 - 9.

Notes:

K4

- 2 electrical outlet sockets not protected / corrected on-site
- "Exit" sign requires ~~framing~~

K5

- Mult-outlet / corrected ✓

Infant and Toddler

K3

- Restroom door has inward handles

Safety Inspector Signature: _____

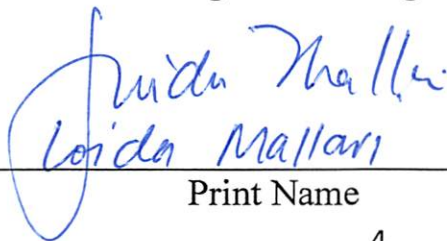


George R. Fleming

6/7/18

Date

Provider's Signature: _____


Loida Mallari

Print Name

6/7/18

Date