

Child Care Encounter

District 7 Date 12/19/07

Name Betty Johnson License No. _____

Address 107 Burks St, McComb
Center/Organization/Individual

Purpose Initial site visit Director _____

County Pike Telephone No. _____

Time In 1:00 Time Out _____ Total Time _____

Findings/Comments Before temporary license issued:

- 1 - Director's qualifications on file ✓
- 2 - Director, burners - 121, FBI Letters, CACR ✓ (all staff working alone & children)
- 3 - Fire insp. form ✓
- 4 - Certified Food manager training ✓
- 5 - Copy of city water bill showing water/sewer svc. ✓
- 6 - zoning approval ✓
- 7 - Lead testing for building + playground soil ✓
- 8 - Proof of CPR ✓
- 9 - Proof of First Aid ✓
- 10 - 2 wk. cycle of menus ✓
- 11 - Floor plans ✓
- ~~12~~ 12 - All items corrected on form #286 ✓

Capacity set at 30 for 2 Toilets / 2 Lavatories. One Toilet / lavatory needed for each 15 children. ✓

Betty Johnson
Center Director/Individual

Paige Ward
Child Care Representative
Cathy McCoy

White Copy - Facility File
Yellow Copy - Encounter File
Pink Copy - Individual