



MISSISSIPPI STATE DEPARTMENT OF HEALTH

Child Care Encounter

District 10Date 6/24/20

Name <u>Tiny Tot Daycare</u>	License No. <u>DTCCPFA-41536</u>
Address <u>117 Crocher Street, Bruce, MS 38915</u>	Center/Organization/Individual
Purpose <u>Virtual Mid-Year Inspection Waiver</u>	Director <u>Holly White</u>
Mileage Start _____	Mileage End _____
County <u>Calhoun</u>	Telephone No. <u>662-983-2930</u>
Time In _____	Time Out _____
Total Time _____	

Findings/Comments

Received acknowledgment by facility operator assuring review of records and building compliance are all up-to-date and that the facility is free of hazards.

 Center Director/Designee/Individual

Pauline Gervais
Child Care Representative

White Copy - Facility File
Yellow Copy - Operator

Please sign the acknowledgment below and send back to your licensing official.

This letter is an acknowledgment from the Mississippi State Health Child Care Licensure Division to the person(s) who will be held responsible for any violations that may be found while conducting any type of inspection.

I, Kelly White (name), serve in the capacity of owner, director, or director designee of Tiny Tot Daycare (center name). I acknowledge that I was instructed to review my records and building to assure that all documents are up-to-date and that the facility is free of hazards.

I realize that by signing this document that I am agreeing that all required documents that are needed for a temporary, mid-year, and renewal inspection for a license are in place at this time.

Kelly White
Director Signature

6/20/20
Date of Signature