DEPARTMENT OF PUBLIC HEALTH AND SOCIAL SERVICES
DIVISION OF ENVIRONMENTAL HEALTH

CHILD CARE FACILITY INSPECTION REPORT

REASON		GRADE	Inspection Date:	ESTABLISHMENT NAME:
Regular		Ø	7/26/16	NENE CHILD CARE CENTER
Follow-Up	✓		Time In/Out: 2:15 / 2:20	OWNER/OPERATOR: SORIANO, DORIS T.
Complaint				
Investigation		RATING		LOCATION: MANGILAO — Establishment Type: CCC/NURSERY
Other:		A	Sanitary Permit No.: ~~20000~~ 160003267	PERMIT STATUS: ✓ Valid ___ Temporary ___ Expired

No. of Children: 10 Male 18 Female 28 Total

Child Care License: No.: 16008 / ✓ Valid / / Provisional / / Expired

The following items identify violations found this day in the operations and facilities which must be corrected by the next inspection or sooner as the Department indicates. Non-compliance may result in downgrading or permit suspension. To appeal a written request for hearing must be submitted before the indicated correction date.

ITEM*	REMARKS	DEMERIT	CORRECT BY
	A FOLLOWUP INSPECTION WAS CONDUCTED.		
	PREVIOUS INSPECTION ON 7/25/16 (6, B)		
	THE FOLLOWING WAS OBSERVED:		
	PREVIOUS VIOLATION ITEM # 24 CORRECTED.		
	NO NEW VIOLATIONS		
	"B" PLACARD # 00750 REMOVED		
	"A" PLACARD # 02389 ISSUED		
	BRIEFED PIC JOSEPH SORIANO ON ABOVE		

I have read and understand the above violation(s) and I am aware of the corrective measures to be taken.

*Note: When any of the following items are cited above, they shall be corrected within 10 days of this inspection: (2), (4), (6), (14), (21), (23), (24), (27), (28), (39) & (40).

Received By (Name & Title): J. SORIANO OWNER

DEH Inspector (Name & Title): J. CRUZ JL 12 PAO1

Rev: 08/2/05
DEH-06

White Copy - DEH Yellow Copy - Establishment