

Family Day Care Inspection Compliance Plan

Provider's Name: **Carrie Selchert**

City: **Watertown**

Provider Number: **011516390**

Inspector: **Eric Anderson**

Date of Inspection: **04/24/2023**

Time of Inspection: **10:55 AM**

The items listed below are those that the provider was not in compliance with at the time of the inspection.

B. Record Keeping/Fire Safety & Emergency Weather Drills

30. Does each child's record contain all required information? 67:42:16:13

Corrections To Be Made:

BG - Immunization Records

Agency Action:

Compliance Plan

Suggested
Completion
Date:

Actual
Completion
Date:

05/15/2023

05/09/2023

Status: **Corrected**

Carrie Selchert

Provider Signature

04/24/2023

Date

Eric Anderson

Inspector Signature

04/24/2023

Date