

FACILITY VISIT

Facility Name: Becky Owens

Date: 06/14/2021

Time: 09:30

Provider: \_\_\_\_\_

Certificate #: 016848

Phone: 307-746-9611

Address: 1655 Sage Street

City: Newcastle

Facility Type:  FCCH  FCCC  CCC

Comments/TA Provided:

Unannounced visit conducted. 5yr, 1yr, 3yr - 3 total children & 1 staff. No questions & no changes at this time.

Director/Provider:



Date: 06/14/2021

Childcare Licensor:



Date: 06/14/2021