

Date Correction Plan Due 5/19/2025	NONCOMPLIANCE STATEMENT AND CORRECTION PLAN	TO FILE A COMPLAINT CALL 262-448-7800
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Use of Form: This form is used by certification / licensing staff to identify statute and / or administrative rule violation(s) and to outline imposed plans of correction. If applicable, this form is used by certified operators / licensed centers to meet the requirements of DCF 202.065, DCF 250.04(2)(i) and (3)(d), DCF 251.04(2)(L) and (3)(f), DCF 252.41(1) and (2)(k). Failure to submit an appropriate correction plan by the due date listed above may result in sanctions identified in the statute and / or administrative rule. Public Schools may submit plans of correction however are not required to do so.

Instructions: The Noncompliance Statement below identifies the violation(s) of child care statute and / or administrative rule identified by the certification / licensing specialist. Complete the section labeled "Correction Plan" by indicating the steps that will be taken to address and correct each of the listed noncompliance(s). Identify expected completion date(s) for each item. Return the original to your certification / licensing specialist for approval and retain a copy. If this is a licensed child care, post your copy of noncompliance statement and correction plan near the license in accordance with Wis. Stat. 48.657. This request for a correction plan is not an order imposing a sanction or penalty pursuant to Wis. Stat. 48.716. If the department decides to apply a statutory sanction and / or penalty for facts arising from this finding or a future finding, you will be given notice of the sanction and / or penalty and your appeal rights.

Name - Certified Operator / Licensed Center Peggy's Place	Provider Number / Facility ID Number 3000574033 / 001 - 294048
Address - Facility (Street, City, State, Zip Code) N57w39521 Wisconsin Ave Oconomowoc WI 530662147	Telephone Number 262-567-4277
Date - Regulation Visit 5/5/2025	

	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
1	250.04(5)(a) Child Record - Maintenance, Availability Description: Child #5 does not have an enrollment form on file for review. Repeat violation: Previously cited on 5/30/2024	changed	5/13/25	
2	250.04(5)(a)4.a. Child Record - Physical Exam - Under 2 Description: Child #2 does not have an updated physical examination on file for review (last updated 10/2024). Repeat violation: Previously cited on 5/30/2024	get one	5/13/25	

Name - Certified Operator / Licensed Center

Provider Number / Facility ID Number

Peggy's Place

3000574033 / 001 - 294046

Address - Facility (Street, City, State, Zip Code)

N57w38621 Wisconsin Ave Oconomowoc WI 530662147

Telephone Number

262-587-4277

Date - Regulation Visit

5/5/2025

	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
3	250.08(9)(j) Meals & Snacks - Records Description: Menu not available for date of licensing visit.	<i>made current</i>	<i>5/19</i>	<i>5/19</i>

NAME - Agency Worker

Laure Taylor

Date Issued

5/5/2025

SIGNATURE - Certified Operator or Designee / Licensee or Designee

Peggy Ireland

Date Signed

5/12/25