

<b>Date Correction Plan Due</b> 4/22/2026	<b>NONCOMPLIANCE STATEMENT AND CORRECTION PLAN</b>	<b>TO FILE A COMPLAINT CALL</b> 608-422-6765
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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)(L) 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 the 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. 48.715. 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 a notice of the sanction and / or penalty and your appeal rights.

<b>Name - Certified Operator / Licensed Center</b> Sunny Flowers		<b>Provider Number / Facility ID Number</b> 0000588470 / 001 - 2002280		
<b>Address - Facility (Street, City, State, Zip Code)</b> 5379 Gettle Ave Madison WI 537052605		<b>Telephone Number</b> 608-338-5148	<b>Date - Regulation Visit</b> 4/7/2026	
	<b>Rule/Statute Number</b> <b>Noncompliance Statement</b>	<b>Correction Plan</b>	<b>Expected Completion Date</b>	<b>Verification Date</b>
1	251.04(2)(L)1.a. <b>Monitoring Results Posted</b>  Description: Monitoring results were not posted near the license and visible to parents.	<i>The results will be posted near the license to be visible for parents.</i>	<i>05/01/2026</i>	<i>05/08/2026</i>
2	251.04(6)(a)6m. <b>Child Record - Immunization History</b>  Description: Child #2 did not have documentation of immunization history on file.  Repeat violation: Previously cited on 3/17/2025	<i>The parents will be asked to bring an immunisation records for the child.</i>	<i>05/01/2026</i>	<i>04/20/2026</i>

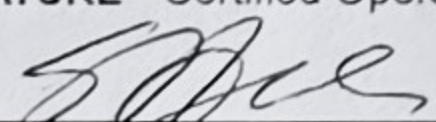
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3	251.05(2)(a)3.a. <b>Staff Record - Physical Examination</b>  Description: Staff B did not have a physical examination report on file and has been working longer than 30 days.	The staff member will be asked to bring a medical record of an examination.	05/01/2026	
4	251.05(3)(b) <b>Abusive Head Trauma Prevention Training</b>  Description: Staff B did not have documentation of completion of Abusive Head Trauma Prevention Training.  Repeat violation: Previously cited on 4/9/2024	The staff member will complete an AHTP training	05/01/2026	05/07/2026
5	251.06(4)(a) <b>Fire Extinguishers - Operable, Inspected, Labeled</b>  Description: Fire extinguisher was not inspected once a year by a qualified person when the last inspection date was March 2025.  Repeat violation: Previously cited on 4/9/2024	The fire extinguisher will be inspected.	05/20/2026	

NAME - Agency Worker  
Rebecca Brickson

Date Issued  
4/8/2026

SIGNATURE - Certified Operator or Designee / Licensee or Designee

Date Signed

 Svetlana Amireva

05/08/2026