Date Correction Plan Due	NONCOMPLIANCE STATEMENT AND CORRECTION PLAN	TO FILE A COMPLAINT CALL
8/25/2026		608-422-6765

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.

Name - Certified Operator / Licensed Center	Provider Number / Facility ID Number
Blue's Family Child Care	7000574287 / 001 - 1008700

Address - Facility (Street, City, State, Zip Code)	Telephone Number	Date - Regulation Visit
5 Arther Ct Madison WI 53713	608-320-0249	8/7/2026

	Rule/Statute Number Noncompliance Statement	Correction Plan	Expected Completion Date	Verification Date
1	250.06(2)(m) **Premises - Condition & Repair** Description: Indoor and outdoor rusty equipment were accessible to children. Habian equipos oxidados accesibles a los ninos en las areas interiores y exteriores del centro.	Los equipos oxidados accesibles a los ninos en las areas interiores y exteriores del centro serantratados con papel de lija y posteriormente cubieros con pintura anti-oxido	09-30-2026	
2	250.06(3)(b) **Emergency Plans - Practice** Description: Provider was missing documentation of having conducted fire evacuation drills with children for the month of July 2026. El proveedor no documento la práctica del simulacro de evacuación por incendio con los ninos durante el mes de Julio del 2026.	La practica del simulacro de evacuacion por incendio con los ninos correspondiente al me de Julio de 2026 ya fue documentada.	De inmediato	

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	Rule/Statute Number Noncompliance Statement	Telephone Number 608-320-0249 Correction Plan	Date - Regulation Visit 8/7/2026 Expected Completion Date	Verification Date

Date Issued
8/10/2026

NAME - Agency Worker
Luzdarys Marquez

SIGNATURE - Certified Operator or Designee / Licensee or Designee

Date Signed
09-29-2026