

**ALABAMA DEPARTMENT OF HUMAN RESOURCES
CHILD CARE PERFORMANCE STANDARDS DEFICIENCY REPORT**

SECTION A- IDENTIFYING INFORMATION

Facility Name: KIDTOWNE MADISON	Type of Facility : Center [X] Day [X] OST [] Night [X] Family [] University [] Group []	Date of Visit: 9/26/2025
Facility Address: 97 HUGHES RD, MADISON, AL 35758, Madison	Licensee: KID TOWNE, INC.	Telephone #: (256) 617-0765
Ages: 6 Weeks to 12 Years/6 Weeks to 12 Years	Director (if applicable): ERICA SHARP	Capacity: 62 62 Day Night

SECTION B - DEFICIENCY INFORMATION

Performance Standard Deficiency HAZARDS MUST BE CORRECTED IMMEDIATELY*	Date Corrected by Licensee
Deficiency Summary	
[InspectionSummaryDescription]	
Failed - *Balls-3, Inspection Form Comments: 2 of 3 observed	Pending Correction
Failed - *Digging or sand area, Inspection Form Comments: none observed	Pending Correction
Failed - *Toys for digging, Inspection Form Comments: none observed	Pending Correction
Failed - Director authorized to conduct center business, Inspection Form Comments: need In Service and H&S hours	Pending Correction
Failed - CA/N Clearance Form (Every Five Years), Staff Checklist Comments: expired	Pending Correction
Failed - Ongoing Training, Staff Checklist Comments: expired	Pending Correction
Failed - Health and Safety Training, Staff Checklist Comments: none observed	Pending Correction
Failed - References, Staff Checklist Comments: observed 2 of 3	Pending Correction
Failed - Verification of Education, Staff Checklist Comments: not in file	Pending Correction
Failed - Medical, Staff Checklist Comments: none observed	Pending Correction
Failed - *Pots, pans, buckets, large plastic spoons, Classroom Checklist / mnths18-24	Pending Correction

INSTRUCTIONS TO LICENSEE: Column 2, Date Corrected by Licensee, is to be completed by the facility representative after each deficiency is corrected. The facility representative must put the date of correction and his/her initials in Column 2. This form must be returned to the Department of Human Resources on or before 10/10/25, as verification that deficiencies have been corrected.

NOTICE: Any misleading or any false statements or reports made to the Department and/or failure to correct the listed deficiencies can be the basis for adverse action. None of these requirements are to be interpreted to allow anyone to operate in violation of Performance Standards. A facility licensed by the Department must always meet Performance Standards applicable to that facility. It is the responsibility of the licensee to operate in compliance with Performance Standards.

Erica Sharp
Signature of Facility Representative

9/26/25
Date

Lea Rae Gaines

Signature of DHR Licensing Representative

9/26/25
Date

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