

Plan of Correction

SECTION A - IDENTIFYING INFORMATION

Facility Name: PURPOSE KIDSZ 3.0	Type of Facility: Center <input checked="" type="checkbox"/> OST <input type="checkbox"/> Day <input checked="" type="checkbox"/> Family <input type="checkbox"/> University <input type="checkbox"/> Night <input type="checkbox"/> Group <input type="checkbox"/>
Physical Address: 830 S. MEMORIAL DRIVE PRATTVILLE, AL 36067	Mailing Address: 830 S. MEMORIAL DRIVE PRATTVILLE, AL, 36067
Telephone Number: (334) 922-0092	Licensee: DAVINA TOLVER
Capacity: 30	Director: DAVINA TOLVER
Age Range: 12 Years	Date Prepared: 6/23/2026

SECTION B - BASIS FOR PLAN OF CORRECTION

List each deficiency, the plan of action, and the target date for each item:

Deficiency Plan of Correction	Date to be completed
Failed - Hazardous substances under lock and key or combination lock, Inspection Form Plan of Action - Corrected during visit	6/23/2026
Failed - Exposed electrical outlets have protective covers, Inspection Form Plan of Action - Corrected during visit	6/23/2026