ALABAMA DEPARTMENT OF HUMAN RESOURCES
CHILD CARE PERFORMANCE STANDARDS DEFICIENCY REPORT

SECTION A- IDENTIFYING INFORMATION

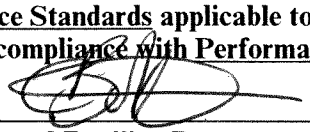
Facility Name: HAMPTON COVE KINDERCARE	Type of Facility : Center [X] Day [X] OST [] Night [] Family [] University [] Group []	Date of Visit: 9/3/2026
Facility Address: 351 OLD HIGHWAY 431, HAMPTON COVE, AL 35763, Madison	Licensee: REE SOUTHEAST INC.	Telephone #: (256) 539-3773
Ages: 6 Weeks to 12 Years	Director (if applicable): CARMALETHIA BOLAN	Capacity: 217 / NA Day Night

SECTION B - DEFICIENCY INFORMATION

Performance Standard Deficiency ***HAZARDS MUST BE CORRECTED IMMEDIATELY****	**Date Corrected by Licensee**
Deficiency Summary	
Failed - Individual records on each child on file on first day of attendance, Inspection Form Comments: The center did not receive a preadmission on the first day of attendance.	Pending Correction
PARENT NOTIFIED PROCEDURE, Allegation Comments: The parent was not notified of the child's lip injury.	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 _____, 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.



Signature of Facility Representative

9/3/26.
Date

BRANDUL PERINE