

NEBRASKA

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DEPT. OF HEALTH AND HUMAN SERVICES



Pete Ricketts, Governor

December 21, 2017

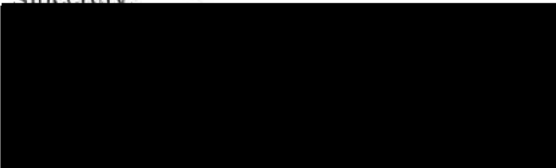
Tonya Chandler
1251 S. 48th Street
Lincoln, NE 68510

Dear Ms. Chandler:

This letter is to inform you that the Licensing Agreement you signed on September 18, 2017 has been terminated effective December 7, 2017.

If you have any questions, please contact me at 402 471 9102.

Sincerely,



Lori Pflanz, Child Care Inspection Specialist
Office Children's Services Licensing
Nebraska Department of Health and Human Services
P.O. Box 94986
Lincoln NE 68509

Cc: Chris Kort, Administrative Assistant II
Kathe Sanchez, Child Care Licensing Supervisor

Helping People Live Better Lives



DEPT. OF HEALTH AND HUMAN SERVICES **INTERIM LICENSING AGREEMENT**

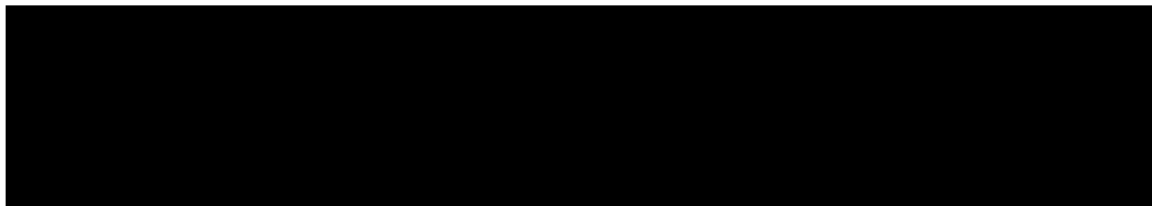
I, Tonya Chandler, operating Monday through Friday, 6:15 AM to 5:30 PM as a Family Child Care Home I, 1251 S. 48th St. Lincoln, NE 68510, hereby voluntarily state and declare: I have read and understand the Regulations governing licensure of Family Child Care Child Home I.

I agree to comply with each of the Child Care Home I Regulations, as long as I am licensed by the State of Nebraska to provide child care services.

I understand and agree to comply with:

391 NAC 1-006.02 D Notification of Law Enforcement Contact:

As soon as the licensee becomes aware of the occurrence, the licensee must notify the Department of any arrest, misdemeanor ticket other than a traffic violation, pending criminal charges, and any felony/misdemeanor convictions of him/ herself, staff, volunteers, or household members. Failure to notify the Department of law enforcement contact as described may result in disciplinary action.



On Monday, September 5, 2017, the Office of Children's Services Licensing (OCSL) became aware of an investigation involving [REDACTED]

I understand and agree that under no circumstances will [REDACTED] be alone with child care children until the investigations by Law Enforcement, [REDACTED] and the OCSL are complete and findings are determined.

I understand and agree that all parents of children currently enrolled have received a copy of this Interim Licensing Agreement within 24 hours and that documentation of each parents receipt will be maintained and available for review upon request.

I will ensure that this Interim Licensing Agreement will be prominently posted with the current Family Child Care Home I license so it is clearly visible to parents and Department representatives.

I understand that the OCSL shall conduct announced or unannounced visits to my facility to determine compliance with this Agreement.

This Agreement is an **Interim Licensing Agreement** which means that the Department reserves the right to take additional action as deemed appropriate. However, any violation of this Interim Licensing Agreement may be grounds for further negative action or discipline as the Department of Health and Human Services, Division of Public Health, OCSL may deem appropriate.

This Agreement shall be in effect from the signing of this Agreement for as long as the Department deems it appropriate and upon completion of an ongoing investigation. Should the Family Child Care Home I license be amended because of a change of address, this Agreement may transfer to the new address if appropriate to the conditions of this Interim Licensing Agreement.



Witness

9-18-17

Date



Provider/Licensee

x 1251 S. 48th

Street/Address

x Sinclair me.

x Sept 18, 2017.

Date