

**Facility Safety Inspection
Fire & Life Safety / Environmental Health
Licensed Day Care Programs
Compliance Plan**

Provider's Name: **Apple Tree East**

City: **Sioux Falls**

Provider Number: **010605673**

Inspector: **Carrie Lewis**

Date of Inspection: **06/17/2020**

Time of Inspection: **3:15 PM**

Provider was found to be in full compliance

Lisa Carson

Provider Signature

06/17/2020

Date

Carrie Lewis

Inspector Signature

06/17/2020

Date