Inspection Report

South Dakota Cosmetology Commission 500 E Capitol Ave Pierre, SD 57501 605-773-6193 cosmetology@state.sd.us

SALON OR BOOTH NAME: Danielle Leader Booth	
ADDRESS: 1,010 Minnesola	CITY: Swy Falls
	TELEPHONE NUMBER: 640 - 7619
SALON or BOOTH LICENSE NUMBER: CB- 0845 - 2 EXPIRATION DATE: 4-24-2/	
B. TYPE OF SALON: 1. Salon 2. Cosmetology (all) TYPE OF INSPECTION: 3. New	Booth Rental Home Limited Hair Esthetics Nails Other Routine Re-Inspection Investigation
C. List of Personal Licensees (first & last)	
	Lic # Expires: Lic # Expires:
Danelle Leader	Lic # <u>Co - 1/236 - 2/</u> Expires: <u>5-6-2/</u>
	Lic # Expires: Lic # Expires:
	Lic#Expires:
	Lic#Expires:
The additional about 15 areas in a dist	Lic # Expires:
Use additional sheet if more space is needed.	
D. During all working hours. YES is satisfactory NO is NOT satisfactory SDCL 36-15 ARSD 20:42 YES NO 1. Current licenses; Rules/Regulations, Unregulated Services Sign - Displayed No is NOT satisfactory SDCL 36-15 ARSD 20:42 Dead to Viview for public	
YES NO 1. Current licenses; Rules/Regulations, Unregulated Services Sign — Displayed — Dis	
NO 10. Floors, walls, ceilings, fixtures, vents clean and in good repair NO 11. Plumbing, hot/cold running water and central sewage system NO 12. Electrical, appliance cords and outlets safe and in good repair NO 13. Ventilation in work area NO 14. Restroom, clean with disposable towels, liquid soap NO 15. Storage cabinet or room for harmful supplies	
YES NO 16. Hair work stations immediately clean and disinfected after each use	
YES NO 25. Hair tools new and/or clean and disinfected	
YES-NO 27. Clean cape used on each client or clean towel or neck strip if reusing a cape	
YES NO 29. Esthetics tools new and/or clean and disinfected	
YES NO 30. All single-use items immediately disposed in trash after each use YES NO 31. All products are clean, closed, and labeled correctly, includes wax	
YES NO 32. Fluids, semifluids, creams and powders kept in clean, closed, labeled containers	
YES NO 37. Home Salons – separate exit – separate from residential area	
E. Comments: Tess labeled some times while present	
F.	2 22 21
Signature: Not meseat	Date: 3-23-2/ Time Inspector signature Naw Rasmusse
Licensee reviewed inspection report with Inspector YES NO (if "no" why not)	
RECHECK PASS	