

Inspection Report

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

A. SALON OR BOOTH NAME: Luxury Nails Salon & Spa
ADDRESS: 3828 9th Ave SE Ste C CITY: Aberdeen
OWNER NAME: Johnny Bui TELEPHONE NUMBER: _____
SALON or BOOTH LICENSE NUMBER: 015-09884-2023 EXPIRATION DATE: 5/15/2023

B. TYPE OF SALON: ☒ 1. Salon ☐ Booth Rental ☐ Home ☐ Limited
TYPE OF INSPECTION: ☐ 2. Cosmetology (all) ☐ Hair ☒ Esthetics ☐ Nails ☐ Other _____
☐ 3. New ☐ Routine ☒ Re-Inspection ☐ Investigation

C. List of Personal Licensees (first & last)

<u>Anthony Hoang Vinh</u>	Lic # <u>NT-15554-2023</u>	Expires: <u>4/12/2023</u>
<u>Nguyen Thi Nguyen</u>	Lic # <u>NT-15470-2023</u>	Expires: <u>1/7/2023</u>
<u>Michelle Kim Dang</u>	Lic # <u>NT-14534-2023</u>	Expires: <u>5/20/2023</u>
<u>Bach Huynh Nguyen</u>	Lic # <u>NT-15020-2023</u>	Expires: <u>2/17/2023</u>
<u>(vacation)</u>	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 _____
YES NO 2. Fire Extinguisher, ABC type, 5 lbs., easily accessible, charged _____
YES NO 3. First aid kit that contains adhesive dressings, gloves, antiseptic, gauze, tape, blood spill procedures _____
YES NO 4. Certified for microdermabrasion and/or electric nail files and/or eyelash extensions _____
YES NO 5. Disinfectant available at each work station and includes manufacturer label _____
YES NO 6. Disinfectant meets virucidal, fungicidal, and bactericidal requirements _____
YES NO 7. Disinfectant container labeled, closed and large enough to completely immerse all implements _____
YES NO 8. Disinfectant (if mixed) fresh, clean and free from contaminants _____
YES NO 9. Pedicure spa and tools clean and disinfected immediately after each use _____
YES NO 10. Floors, walls, ceilings, fixtures, vents clean and in good repair Clipping all over the floor.
YES NO 11. Plumbing, hot/cold running water and central sewage system _____
YES NO 12. Electrical, appliance cords and outlets safe and in good repair _____
YES NO 13. Ventilation in work area _____
YES NO 14. Restroom, clean with disposable towels, liquid soap _____
YES NO 15. Storage cabinet or room for harmful supplies _____
YES NO 16. Hair work stations immediately clean and disinfected after each use _____
YES NO 17. Nail work stations immediately clean and disinfected after each use _____
YES NO 18. Esthetics work stations immediately clean and disinfected after each use _____
YES NO 19. Waste containers closed, labeled and emptied when full or at least daily _____
YES NO 20. Sinks clean and disinfected immediately after each use, no hair or soap scum _____
YES NO 21. Hand sanitizer or hand-washing facilities available for use _____
YES NO 22. Clean closed labeled containers to store only cleaned and disinfected implements and tools _____
YES NO 23. Clean closed labeled containers to store only clean towels _____
YES NO 24. Closed, labeled containers for soiled towels, linens, implements _____
YES NO 25. Hair tools new and/or clean and disinfected _____
YES NO 26. Wigs covering used to prevent direct contact of client's scalp or hair _____
YES NO 27. Clean cape used on each client or clean towel or neck strip if reusing a cape _____
YES NO 28. Nail tools new and/or clean and disinfected don't mix tools with things you don't disinfect
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 files one time use only
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 33. Items listed in 30. dispensed with a disinfected spatula, shaker, pump, spray dispenser or single-use item _____
YES NO 34. Equipment for waxing hair removal services kept clean and disinfected _____
YES NO 35. Electrical equipment clean and disinfected after each service (electric clippers, electric files or curling irons) _____
YES NO 36. Attachments for electrical equipment clean and disinfected and stored in a clean, closed labeled container Please don't leave attachments on electric files
YES NO 37. Home Salons – separate exit – separate from residential area _____
YES NO 38. Other laws and/or rules that apply (list) _____

E. Comments:

Needs to label cabinets & lot more.

F.

Date: 7/13/2022 Time: 2:00pm

Signature: _____ Inspector signature: Nancy Kapke
Licensee reviewed inspection report with Inspector: YES NO (if "no" why not)

RECHECK _____ FAIL Yellow Form PASS _____

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A. SALON OR BOOTH NAME: Luxury Nail Salon & Spa
ADDRESS: _____ CITY: Abundant
OWNER NAME: _____ TELEPHONE NUMBER: _____
SALON or BOOTH LICENSE NUMBER: 8509884-2023 EXPIRATION DATE: 5/15/2023

B. TYPE OF SALON: 1. Salon 2. Cosmetology (all) 3. New
Booth Rental Hair Routine
Home Esthetics Re-Inspection
Limited Nails Investigation
Other _____
TYPE OF INSPECTION: _____

C. List of Personal Licensees (first & last)

<u>Thung Due Nguyen</u>	Lic # <u>NT-15621-2022</u>	Expires: <u>11/13/2022</u>
<u>Molly Sun Cao</u>	Lic # _____	Expires: _____
<u>Thuan Van Hoang</u>	Lic # <u>NT-15629-2023</u>	Expires: <u>10/27/2022</u>
<u>Thoa Dang Vu (vacation)</u>	Lic # _____	Expires: _____
	Lic # <u>NT-14855-2023</u>	Expires: <u>5/8/2023</u>
	Lic # _____	Expires: _____
	Lic # <u>NT-14914-2023</u>	Expires: <u>5/28/2023</u>
	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 _____
YES NO 2. Fire Extinguisher, ABC type, 5 lbs., easily accessible, charged _____
YES NO 3. First aid kit that contains adhesive dressings, gloves, antiseptic, gauze, tape, blood spill procedures _____
YES NO 4. Certified for microdermabrasion and/or electric nail files and/or eyelash extensions _____
YES NO 5. Disinfectant available at each work station and includes manufacturer label _____
YES NO 6. Disinfectant meets virucidal, fungicidal, and bactericidal requirements _____
YES NO 7. Disinfectant container labeled, closed and large enough to completely immerse all implements _____
YES NO 8. Disinfectant (if mixed) fresh, clean and free from contaminants _____
YES NO 9. Pedicure spa and tools clean and disinfected immediately after each use _____
YES NO 10. Floors, walls, ceilings, fixtures, vents clean and in good repair _____
YES NO 11. Plumbing, hot/cold running water and central sewage system _____
YES NO 12. Electrical, appliance cords and outlets safe and in good repair _____
YES NO 13. Ventilation in work area _____
YES NO 14. Restroom, clean with disposable towels, liquid soap _____
YES NO 15. Storage cabinet or room for harmful supplies _____
YES NO 16. Hair work stations immediately clean and disinfected after each use _____
YES NO 17. Nail work stations immediately clean and disinfected after each use _____
YES NO 18. Esthetics work stations immediately clean and disinfected after each use _____
YES NO 19. Waste containers closed, labeled and emptied when full or at least daily _____
YES NO 20. Sinks clean and disinfected immediately after each use, no hair or soap scum _____
YES NO 21. Hand sanitizer or hand-washing facilities available for use _____
YES NO 22. Clean closed labeled containers to store only cleaned and disinfected implements and tools _____
YES NO 23. Clean closed labeled containers to store only clean towels _____
YES NO 24. Closed, labeled containers for soiled towels, linens, implements _____
YES NO 25. Hair tools new and/or clean and disinfected _____
YES NO 26. Wigs covering used to prevent direct contact of client's scalp or hair _____
YES NO 27. Clean cape used on each client or clean towel or neck strip if reusing a cape _____
YES NO 28. Nail tools new and/or clean and disinfected _____
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 33. Items listed in 30. dispensed with a disinfected spatula, shaker, pump, spray dispenser or single-use item _____
YES NO 34. Equipment for waxing hair removal services kept clean and disinfected _____
YES NO 35. Electrical equipment clean and disinfected after each service (electric clippers, electric files or curling irons) _____
YES NO 36. Attachments for electrical equipment clean and disinfected and stored in a clean, closed labeled container _____
YES NO 37. Home Salons – separate exit – separate from residential area _____
YES NO 38. Other laws and/or rules that apply (list) _____

E. Comments:

F. Date: _____ Time: _____

Signature: _____ Inspector signature _____
Licensee reviewed inspection report with Inspector YES NO (if "no" why not) _____

RECHECK _____ FAIL _____ PASS _____

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ADDRESS: _____ CITY: Abundant
OWNER NAME: _____ TELEPHONE NUMBER: _____
SALON or BOOTH LICENSE NUMBER: LS-09884-2023 EXPIRATION DATE: 5/15/2023

B. TYPE OF SALON:

1. Salon
2. Cosmetology (all)
3. New

Booth Rental
Hair
Routine

Home
Esthetics
Re-inspection

Limited
Nails
Investigation

Other _____

TYPE OF INSPECTION:

C. List of Personal Licensees (first & last)

<u>My Trang Hu Nguyen</u>	Lic # <u>NT-15636-2023</u>	Expires: <u>6/10/2023</u>
<u>Vy Nguyen Thong</u>	Lic # <u>NT-14190-2022</u>	Expires: <u>11/1/2022</u>
<u>Johnny Bui</u>	Lic # <u>NT-10135-2022</u>	Expires: <u>11/18/2022</u>
<u>Tuyen Kim Nguyen</u>	Lic # <u>NT-09386-2023</u>	Expires: <u>1/17/2023</u>
<u>Tuyen Kim Nguyen</u>	Lic # <u>EO-14136-2023</u>	Expires: <u>1/17/2023</u>

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- YES NO 6. Disinfectant meets virucidal, fungicidal, and bactericidal requirements _____
- YES NO 7. Disinfectant container labeled, closed and large enough to completely immerse all implements _____
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- YES NO 9. Pedicure spa and tools clean and disinfected immediately after each use _____
- YES NO 10. Floors, walls, ceilings, fixtures, vents clean and in good repair _____
- YES NO 11. Plumbing, hot/cold running water and central sewage system _____
- YES NO 12. Electrical, appliance cords and outlets safe and in good repair _____
- YES NO 13. Ventilation in work area _____
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Signature: _____ Inspector signature _____

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