

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: Michelle Clarys Barber
ADDRESS: 2245 S. Shirley CITY: Sioux Falls
OWNER NAME: Michelle Clarys TELEPHONE NUMBER: 274-6040
SALON or BOOTH LICENSE NUMBER: CB - 07740 14 EXPIRATION DATE: 8-11-16

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. During all working hours. YES is satisfactory NO is NOT satisfactory SDCL 36-15 ARSD 20:42

- automatic fail*
- ~~YES~~ NO 1. Current licenses; Rules/Regulations, Unregulated Services Sign – Displayed _____
~~YES~~ NO 2. Certified for microdermabrasion and/or electric nail files and/or other _____
~~YES~~ NO 3. Fire Extinguisher, ABC type, 5 lbs., easily accessible, charged _____
~~YES~~ NO 4. First aid kit that contains adhesive dressings, gloves, antiseptic, gauze, tape, blood spill procedures _____
~~YES~~ NO 5. Disinfecting agent(s) available at station _____
~~YES~~ NO 6. Disinfecting agent meets virucidal, fungicidal, and bactericidal requirements no barbi-ide or bleach present
~~YES~~ NO 7. Disinfectant container available (large enough) for wet sanitizer - has spray disinfect.
~~YES~~ NO 8. Disinfectant (if mixed) fresh, clean and free from contaminants _____
~~YES~~ NO 9. Clean closed containers - to store only cleaned or disinfected tools _____
~~YES~~ NO 10. Closed, labeled containers for soiled towels, linens, tools _____
~~YES~~ NO 11. Pedicure station and tools clean and disinfected after each use _____

~~YES~~ NO 12. Floors clean (no hair or nail clippings) and in good repair _____
~~YES~~ NO 13. Walls, ceilings, fixtures, vents clean and in good repair _____
~~YES~~ NO 14. Plumbing, hot/cold running water and central sewage system _____
~~YES~~ NO 15. Electrical, appliance cords and outlets safe and in good repair _____
~~YES~~ NO 16. Ventilation in work area _____
~~YES~~ NO 17. Restroom, clean with disposable towels, liquid soap _____
~~YES~~ NO 18. Storage room or cabinet for harmful supplies _____

~~YES~~ NO 19. Hair work stations clean and disinfected Hair Shear cases
~~YES~~ NO 20. Nail work stations clean and disinfected _____
~~YES~~ NO 21. Esthetics work stations clean and disinfected _____
~~YES~~ NO 22. Waste Containers emptied at least daily _____
~~YES~~ NO 23. Sinks clean and disinfected, no hair or soap scum _____
~~YES~~ NO 24. Hand sanitizer or hand-washing facilities available for use _____

~~YES~~ NO 25. Hair tools new and/or clean and disinfected _____
~~YES~~ NO 26. Nail tools new and/or clean and disinfected _____
~~YES~~ NO 27. Esthetics tools new and/or clean and disinfected _____
~~YES~~ NO 28. All single-use items disposed after each use _____
~~YES~~ NO 29. All products are clean, closed, and labeled correctly, includes wax tip needs to be changed - was or not
~~YES~~ NO 30. Dispersal tools or equipment is used for products _____
~~YES~~ NO 31. Electrical equipment clean and disinfected (electric clippers, electric files or curling irons) _____
~~YES~~ NO 32. Attachments for electrical equipment clean and disinfected _____

YES NO 33. Private Residences – separate exit – separate from residential area _____
YES NO 34. Other laws and/or rules that apply (list) _____

D. List of Personal Licensees (first & last)

<u>Michelle Clarys</u>	Lic # <u>CB - 07578-17</u>	Expires: <u>1-22-17</u>
_____	Lic # _____	Expires: _____
_____	Lic # _____	Expires: _____
_____	Lic # _____	Expires: _____
_____	Lic # _____	Expires: _____
_____	Lic # _____	Expires: _____
_____	Lic # _____	Expires: _____
_____	Lic # _____	Expires: _____
_____	Lic # _____	Expires: _____
_____	Lic # _____	Expires: _____

Use additional sheet if more space is needed.

E. Comments:

Return yellow form by May 21st w/ 50 reinspection fee

F.
Date: 5-11-16 Time: 11:45
Signature: not present Inspector signature: Mary Rasmussen
Licensee reviewed inspection report with Inspector YES NO (if "no" why not) _____

RECHECK _____ FAIL is due 21st PASS _____