Inspection Report

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

| A. | Λ | - | | - | | |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------|----------------------------------|-------------------------------------------------------|-----------|
| A. SALON OR BOOTH NAME | Milan Nav | I Studio | | | | |
| ADDRESS: 19 W Main | | | | | | |
| OWNER NAME: Melanier Lun 09510 | | | TELEPHONE NUMBER: 65 - 203 - 1618 | | | |
| SALON or BOOTH LICENS | E NUMBER: NP - | 8610-19 | EXP | IRATION D | ATE: <u>12-2</u> | 8-19 |
| B. TYPE OF SALON: TYPE OF INSPECTION: | 2. Cosmetology (all) 3. New | Booth Rental Hair Routine | Esthetics | Limited Nails Investigatio | Other | |
| C. During all working hours. | YES is sat | tisfactory NO | is NOT satisfac | tory | SDCL 36-15 A | RSD 20:42 |
| YES NO 1. Current license (ES NO 2. Certified for mice (YES NO 3. Fire Extinguish (YES NO 4. First aid kit that (YES NO 5. Disinfecting ago (YES NO 7. Disinfectant cor (YES NO 8. Disinfectant (if of YES NO 9. Clean closed cor (YES NO 10. Closed, labeled (YES NO 11. Pedicure station) | er, ABC type, 5 lbs., ear contains adhesive dresent(s) available at statent meets virucidal, fundatainer available (large mixed) fresh, clean and containers for soiled to | electric nail files sily accessible, ssings, gloves, a ion gicidal, and bace enough) free from contate cleaned or discovels, linens, to | s and/or eyelash chargedantiseptic, gauze, tericidal requiremminantsnfected tools | tape, blood s | spill procedures _ | |
| YES NO 12. Floors clean (no VES NO 13. Walls, ceilings, fi YES NO 14. Plumbing, hot/co YES NO 15. Electrical, appliar YES NO 16. Ventilation in work YES NO 17. Restroom, clean YES NO 18. Storage room or | hair or nail clippings) ar xtures, vents clean and old running water and cence cords and outlets sark areawith disposable towels, | nd in good repar in good repair entral sewage sy afe and in good | rvstem repair | | | |
| VES NO 19. Hair work station 20. Nail work stations 21. Esthetics work st YES NO 22. Waste Container YES NO 23. Sinks clean and YES NO 24. Hand sanitizer or | s clean and disinfected ations clean and disinfe s emptied at least daily disinfected, no hair or so hand-washing facilities | ected oap scum s available for us | 6e | | | |
| YES NO 25. Hair tools new are YES NO 26. Nail tools new and YES NO 27. Esthetics tools new and YES NO 28. All single-use iter YES NO 29. All products are of YES NO 30. Dispersal tools on YES NO 31. Electrical equipm YES NO 32. Attachments for each YES NO 33. Private Residence YES NO 34. Other laws and/o | id/or clean and disinfect ew and/or clean and dis ms disposed after each clean, closed, and labeler r equipment is used for ent clean and disinfected electrical equipment clean es — separate exit — sep | infected use ed correctly, inc products ed (electric clipp an and disinfect parate from resi | ludes waxers, electric files edsa | or curling iron | ns) toff of | <i>y</i> |
| | | 2 | | | | - |
| Use additional sheet if more space | | Lic # Lic # Lic # Lic # Lic # Lic # | | * | Expires: Expires: Expires: Expires: Expires: Expires: | 3-20 |
| E. Comments: Madison Gods NGOC Utyuzen | chalk 609 | 5-359- d worker | 9971 - | Client. | being wo | kilon |
| Signature: Moly Licensee reviewed inspection | report with Inspector | Inspect | //-/2-/G or signature / f "no" why not) | Jany G | | 4:00 |
| RECHECK | _ FAII |) yuel | ow 22 10 | PAS | SS | |