

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: Simply Nails Salon
ADDRESS: 4900 S Louise CITY: Sioux Falls
OWNER NAME: Mang Nguyen Thi Thai TELEPHONE NUMBER: 605 271-7211
SALON or BOOTH LICENSE NUMBER: XS-06224-16 EXPIRATION DATE: 11-10-16

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

C. 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. 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 _____
YES NO 7. Disinfectant container available (large enough) First use barbicide or bleach. Then winter
YES NO 8. Disinfectant (if mixed) fresh, clean and free from contaminants for shine. No lusc / or just windy
YES NO 9. Clean closed containers - to store only cleaned or disinfected tools Must be barbicide or bleach first
YES NO 10. Closed, labeled containers for soiled towels, linens, tools _____
YES NO 11. Pedicure station and tools clean and disinfected after each use looks dingy - surface when run
YES NO 12. Floors clean (no hair or nail clippings) and in good repair nail clippings, soiled, water leaked
YES NO 13. Walls, ceilings, fixtures, vents clean and in good repair on floor
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 _____
YES NO 20. Nail work stations clean and disinfected nail dust, used implements left out
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 Brushes, used implements left out
YES NO 27. Esthetics tools new and/or clean and disinfected mixed w/ 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 _____
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 used sanders left on drill bits
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>Hung Quang Hoang</u>	Lic# <u>NT-12347-16</u>	Expires: <u>3-10-16</u>
<u>Hung Anh Thai</u>	Lic# <u>NT-10194-17</u>	Expires: <u>2-28-17</u>
<u>Mang Nguyen Thi Thai</u>	Lic# <u>NT-08810-16</u>	Expires: <u>12-3-16</u>
<u>Mang Nguyen Thi Thai</u>	Lic# <u>XS-11376-16</u>	Expires: <u>12-3-16</u>
<u>Dea Ai</u>	Lic# <u>NT-08810-17</u>	Expires: <u>2-6-17</u>
_____	Lic# _____	Expires: _____
_____	Lic# _____	Expires: _____

Use additional sheet if more space is needed.

E. Comments: Pedicure stations foot spas have a different surface. When you first look at they look like residue left on. Could be build up of not being disinfected properly or maybe type of surface. When I cleaned myself eventually looked good. I tried several items

F. Date: 5-1-16 Time: 3:45
Signature: [Signature] Inspector signature: Mary Rasmussen
Licensee reviewed inspection report with Inspector YES NO (if "no" why not)

RECHECK _____ FAIL _____ PASS _____