

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: Stephanie Cole Booth
ADDRESS: 609 St. Joseph St CITY: Rapid City
OWNER NAME: Stephanie Cole TELEPHONE NUMBER: _____
SALON or BOOTH LICENSE NUMBER: CB 05916-2002 EXPIRATION DATE: 4-3-2022

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

C. List of Personal Licensees (first & last)

Licensee Name	Lic #	Expires
<u>Stephanie Cole</u>	<u>CO-10474</u>	<u>2-10-2022</u>

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 Did not disinfect cutting tools before starting new client. AS observed during inspection.
- ☒ 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 Drawer not clean
- ☒ 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 files one time 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: All clean implments in drawer in u/money eat - things that are not disinfected. label everything that is clean. Files must be thrown away after each use. Clippers need Black

F. Cap if text out
Signature: Steph Cole Date: 4/22/2021 Time: _____
Inspector signature: Georgiann
Licensee reviewed inspection report with Inspector YES NO (if "no" why not) _____
RECHECK _____ FAIL will reinspect PASS yellow sheet given