Inspection Report 500 E Capitol Ave Pierre, SD 57501 605-773-6193 cosmetology@state.sd.us		
A. SALON OR BOOTH NAME: SUM TOWER SALON OR BOOTH LICENSE NUMBER: C5-05356	city: Brookerigo TELEPHONE NUMBER: 4/3/2022	
2. Cosmetology (all) Hair	Home Limited Esthetics Nails Other Re-Inspection Investigation	
C. List of Personal Licensees (first & last) Megan Lic #	Expires: 7/19/202/ Expires: 5/4/2022 Expires: 5/4/2022 Expires: Expires: 5/16/2023 Expires: Expires: 5/16/2023 Expires:	
D. During all working hours. YES is satisfactory NO i	s 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 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		
VES 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 100 in the number of the number		
	usumunus on (y/n) yrs cars +	
Date:	or signature And Habril	
Licensee reviewed inspection report with Inspector YES NO (if "no" why not) RECHECK FAIL PASS		
RECHECK	I ASS	

South Dakota Cosmetology Commission Inspection Report Pierre, SD 57501 500 E Capitol Ave 605-773-6193 cosmetology@state.sd.us SALON OR BOOTH NAME: ADDRESS: OWNER NAME: TELEPHONE NUMBER SALON or BOOTH LICENSE NUMBER: 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 List of Personal Licensees (first & last) rontera H (kas Expires: Lic# Lic# Expires: Lic# Expires: Lic# Expires: Lic# Expires: Lic # Expires: Expires: Lic # 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 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)_ please Kup Cours on small Clippers or put in Clarid container labeling of Clear Hools too. between Clippers + shears need to be apparate

Licensee reviewed inspection report with Inspector YES NO (if "no" why not)

RECHECK FAIL PASS

Inspector signature

F.

Inspection Report

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

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A. SALON OR BOOTH NAME: SUNG	lower Salon + 2par.	
ADDRESS:	CITY: BOKENG	
OWNER NAME:	TELEPHONE NUMBER:	
SALON or BOOTH LICENSE NUMBER: 05-05352-2020 RATION DATE: 6/3/2022		
B. TYPE OF SALON: 1. Salon 2. Cosmetology (all)	Booth Rental Home Limited Hair Esthetics Nails Other	
TYPE OF INSPECTION: 3. New	Routine Re-Inspection Investigation	
C. List of Personal Licensees (first & last)	Lic#Expires:	
	Lic # Expires:	
-	Lic# Expires: Expires:	
	Lic# Expires:	
	Lic # Expires:	
	Lic#Expires:	
Use additional sheet if more space is needed.	Lic#Expires:	
-		
YES NO 2. Fire Extinguisher, ABC type, 5 lbs., east	Inregulated Services Sign – Displayed sily accessible, charged	
YES NO 3. First aid kit that contains adhesive dres	sings, gloves, antiseptic, gauze, tape, blood spill procedures	
YES NO 5. Disinfectant available at each work state	electric nail files and/or eyelash extensionsion and includes manufacturer label	
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	free from contaminantsected immediately after each use	
723 NO 9. Fedicule spa and tools clean and disini	ected infinediately after each use	
	an and in good repair	
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YES NO 37. Home Salons – separate exit – separate	from residential area	
P. C		
En Comments: The labeling it great thanks, Towells in the esthetician from needs to be in Closed Container + labeled. Trash in was room needs Cover. The Date: Pate: Time		
trashin was belom needs	COLUR.	
F. W. F. T.		
	Date.	
Signature:	Inspector signatureYES NO (if "no" why not)	
RECHECK FAI	L PASS	