A.

Salon or Booth Name: Great Clips Salon

Address: 36 E Sturman Blvd 105

City: Rapid City

Owner Name: Great Clips Inc

Telephone Number: 605-773-4193

Salon or Booth License Number: 05-0681-2020

Expiration Date: 10/6/2020

B.

Type of Salon: 1. Salon

2. Cosmetology (all)

3. New

Type of Inspection: 2. Routine

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

2. Certified for microdermabrasion and/or electric nail files and/or eyelash extensions

3. Fire Extinguisher, ABC type, 5 lbs., easily accessible, charged

4. First aid kit that contains adhesive dressings, gloves, antiseptic, gauze, tape, blood spill procedures

5. Disinfecting agent(s) available at station

6. Disinfecting agent meets virucidal, fungicidal, and bactericidal requirements

7. Disinfectant container available (large enough)

8. Disinfectant (if mixed) fresh, clean and free from contaminants

9. Clean closed containers - to store only cleaned or disinfected tools

10. Closed, labeled containers for soiled towels, linens, tools

11. Pedicure station and tools clean and disinfected after each use

12. Floors clean (no hair or nail clippings) and in good repair

13. Walls, ceilings, fixtures, vents clean and in good repair

14. Plumbing, hot/cold running water and central sewage system

15. Electrical, appliance cords and outlets safe and in good repair

16. Ventilation in work area

17. Restroom, clean with disposable towels, liquid soap

18. Storage room or cabinet for harmful supplies

19. Hair work stations clean and disinfected

20. Nail work stations clean and disinfected

21. Esthetics work stations clean and disinfected

22. Waste Containers emptied at least daily

23. Sinks clean and disinfected, no hair or hair or scum

24. Hand sanitizer or hand-washing facilities available for use

25. Hair tools new and/or clean and disinfected

26. Nail tools new and/or clean and disinfected

27. Esthetics tools new and/or clean and disinfected

28. All single-use items disposed of after each use

29. All products are clean, closed, and labeled correctly, includes wax

30. Dispersal tools or equipment is used for products

31. Electrical equipment clean and disinfected (electric clippers, electric files or curling iron)

32. Attachments for electrical equipment clean and disinfected

33. Private Residences – separate exit – separate from residential area

34. Other laws and/or rules that apply (list )

D.

List of Personal Licensees (first & last)

Cynthia Smith

Barbara Stansel

Dennis Hafey

Tina Jansen

F. 21/12/20

Signature: Date: 1/18/2019

Inspector signature: Nancy Follis

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

RECHECK: FAIL

PASS

JAN 08 2020

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

A.  
SALON OR BOOTH NAME: Great Clips Salon
ADDRESS: Rapid City
OWNER NAME: 
TELEPHONE NUMBER: 605-123-4567

SALON or BOOTH LICENSE NUMBER: CS-0658-1-2020  EXPIRATION DATE: 10/6/2020

B. TYPE OF SALON:  
3. New  
TYPE OF INSPECTION: 
2. Cosmetology (all)  
1. Salon  
Home  
Limited  
Nails  
Esthetics  
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 eyelash extensions
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)
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
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
YES NO 30. Dispensers 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)

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<thead>
<tr>
<th>Lic #</th>
<th>Expired:</th>
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<tbody>
<tr>
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<td>12/31/2019</td>
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<tr>
<td>00-12791-2020</td>
<td>12/31/2020</td>
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</tbody>
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Use additional sheet if more space is needed.

E. Comments:

Inspection and re-inspection attached at station, do not need cleaning.

F.  
Date:  
Time:  
Signature:  
Inspector signature
Licensee reviewed inspection report with Inspector  YES  NO (if “no” why not)  
RECHECK  FAIL  PASS