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: Mirror Perfections Salon
ADDRESS: 303 S 3RD St CITY: Milbank
OWNER NAME: Jessica Zemlicka TELEPHONE NUMBER:
SALON or BOOTH LICENSE NUMBER: CS-04848-2022 EXPIRATION DATE: 12/1/2022

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

C. List of Personal Licensees (first & last)

Jessica Zemlicka	Lic # CO-07884-2022	Expires: 12/27/2022
Courtney Burger	Lic # CO-14547-2021	Expires: 10/5/2021
	Lic #	Expires:
	Lic #	Expires:
	Lic #	Expires:
	Lic #	Expires:
	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 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
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 labeling is great
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)

E. Comments: Looks Good Thanks

F.
Date: 8/12/2021 Time 10:30pm
Signature: [signature] Inspector signature Nancy LaBrie
Licensee reviewed inspection report with Inspector YES NO (if "no" why not)

RECHECK FAIL PASS

Started 1/1/2007. Rev. 1/1/2008. Rev 1/1/2013. Rev 7/3/17. Rev 1/2019 Rev 1/2020

AUG 16 2021