### 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:
Salon 3000

#### ADDRESS:
144 9th Ave E
Watertown, SD 57201

#### CITY:
Watertown

#### OWNER NAME:
Salon 3000

#### TELEPHONE NUMBER:

#### SALON or BOOTH LICENSE NUMBER:
05-0404-0001

#### INSPECTION DATE:

#### B. TYPE OF SALON:
- [ ] Salon Rental
- [X] Booth Rental
- [ ] Home Esthetics
- [ ] Limited Nails
- [ ] Nails
- [X] Limited Cosmetology
- [ ] Other

**Salon**

#### TYPE OF INSPECTION:
- [X] Re-Inspection
- [ ] Investigation
- [ ] Other

#### C. List of Personal Licenses (first & last):

<table>
<thead>
<tr>
<th>Licensee</th>
<th>Lic #</th>
<th>Expires</th>
</tr>
</thead>
<tbody>
<tr>
<td>Susan Love</td>
<td>00-0000-0000</td>
<td>01/01/2023</td>
</tr>
<tr>
<td>Christine Voss</td>
<td>00-0000-0000</td>
<td>01/01/2023</td>
</tr>
<tr>
<td>Tricia Whele</td>
<td>00-0000-0000</td>
<td>01/01/2023</td>
</tr>
</tbody>
</table>

Use additional sheet if more space is needed.

#### D. During all working hours.

<table>
<thead>
<tr>
<th>Item</th>
<th>Requirements</th>
<th>Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Current licenses; Rules/Regulations, Unregulated Services Sign – Displayed</td>
<td>[ ] Yes</td>
<td></td>
</tr>
<tr>
<td>2. Fire Extinguisher, ABC type, 5 lbs., easily accessible, charged</td>
<td>[X] Yes</td>
<td></td>
</tr>
<tr>
<td>3. First aid kit that contains adhesive dressing, gauze, antiseptic, eau de Javel, Band-Aids, and instructions</td>
<td>[X] Yes</td>
<td></td>
</tr>
<tr>
<td>4. Certified for microdermabrasion and/or hydraulic nail files and/or electric extensions</td>
<td>[ ] Yes</td>
<td></td>
</tr>
<tr>
<td>5. Disinfectant available at each work station and includes manufacturer label</td>
<td>[X] Yes</td>
<td></td>
</tr>
<tr>
<td>6. Disinfectant meets virucidal, fungicidal, and bactericidal requirements</td>
<td>[X] Yes</td>
<td></td>
</tr>
<tr>
<td>7. Disinfectant container labeled, closed and large enough to completely immerse all implements</td>
<td>[X] Yes</td>
<td></td>
</tr>
<tr>
<td>8. Disinfectant (if mixed) fresh, clean and free from contaminants</td>
<td>[X] Yes</td>
<td></td>
</tr>
<tr>
<td>9. Pedicure spa and tools clean and disinfected immediately after each use</td>
<td>[X] Yes</td>
<td></td>
</tr>
<tr>
<td>10. Floors, walls, ceilings, fixtures, vents clean and in good repair</td>
<td>[X] Yes</td>
<td></td>
</tr>
<tr>
<td>11. Plumbing, hot/cold running water and central sewage system</td>
<td>[X] Yes</td>
<td></td>
</tr>
<tr>
<td>12. Electrical, appliance cords and outlets safe and in good repair</td>
<td>[X] Yes</td>
<td></td>
</tr>
<tr>
<td>13. Ventilation in work area</td>
<td>[X] Yes</td>
<td></td>
</tr>
<tr>
<td>14. Restroom, clean with disposable towels, liquid soap</td>
<td>[X] Yes</td>
<td></td>
</tr>
<tr>
<td>15. Storage cabinet or room for harmful supplies</td>
<td>[X] Yes</td>
<td></td>
</tr>
<tr>
<td>16. Hair work stations immediately clean and disinfected after each use</td>
<td>[X] Yes</td>
<td></td>
</tr>
<tr>
<td>17. Nail work stations immediately clean and disinfected after each use</td>
<td>[X] Yes</td>
<td></td>
</tr>
<tr>
<td>18. Esthetics work stations immediately clean and disinfected after each use</td>
<td>[X] Yes</td>
<td></td>
</tr>
<tr>
<td>19. Waste containers closed, labeled and emptied when full or at least weekly</td>
<td>[X] Yes</td>
<td></td>
</tr>
<tr>
<td>20. Sinks clean and disinfected immediately after each use, no hair or soap scum</td>
<td>[X] Yes</td>
<td></td>
</tr>
<tr>
<td>21. Hand sanitizer or hand-washing facilities available for use</td>
<td>[X] Yes</td>
<td></td>
</tr>
<tr>
<td>22. Clean closed labeled containers to store only clean and disinfected implements and tools</td>
<td>[X] Yes</td>
<td></td>
</tr>
<tr>
<td>23. Clean closed labeled containers to store only clean towels</td>
<td>[X] Yes</td>
<td></td>
</tr>
<tr>
<td>24. Closed, labeled containers for soiled towels, linens, implements</td>
<td>[X] Yes</td>
<td></td>
</tr>
<tr>
<td>25. Hair tools new and/or clean and disinfected</td>
<td>[X] Yes</td>
<td></td>
</tr>
<tr>
<td>26. Wigs covering used to prevent direct contact of client’s scalp or hair</td>
<td>[X] Yes</td>
<td></td>
</tr>
<tr>
<td>27. Clean cape used on each client or clean towel or other disposable item</td>
<td>[X] Yes</td>
<td></td>
</tr>
<tr>
<td>28. Nail tools new and/or clean and disinfected</td>
<td>[X] Yes</td>
<td></td>
</tr>
<tr>
<td>29. Esthetics tools new and/or clean and disinfected</td>
<td>[X] Yes</td>
<td></td>
</tr>
<tr>
<td>30. All single-use items immediately disposed in trash after each use</td>
<td>[X] Yes</td>
<td></td>
</tr>
<tr>
<td>31. All products are clean, closed, and labeled correctly, includes wax and nail products</td>
<td>[X] Yes</td>
<td></td>
</tr>
<tr>
<td>32. Fluids, semiluidus, creams and powders kept in clean, closed, labeled containers</td>
<td>[X] Yes</td>
<td></td>
</tr>
<tr>
<td>33. Items listed in 30. dispensed with a disinfected spatula, shaker, pump, spray dispenser or single-use item</td>
<td>[X] Yes</td>
<td></td>
</tr>
<tr>
<td>34. Equipment for waxing hair removal services kept clean and disinfected</td>
<td>[X] Yes</td>
<td></td>
</tr>
<tr>
<td>35. Electrical equipment clean and disinfected after each service (cordless clippers, electric files or curling irons)</td>
<td>[X] Yes</td>
<td></td>
</tr>
<tr>
<td>36. Attached for electrical equipment clean and disinfected and stored in a clean, closed labeled container</td>
<td>[X] Yes</td>
<td></td>
</tr>
<tr>
<td>37. Home Salons – separate exit – separate from residential area</td>
<td>[X] Yes</td>
<td></td>
</tr>
<tr>
<td>38. Other laws and/or rules that apply (list )</td>
<td>[X] Yes</td>
<td></td>
</tr>
</tbody>
</table>

#### Comments:

- [ ] Plant needs to be cleaned
- [ ] Small clippers need to be disinfected
- [ ] Large clippers need to be disinfected
- [ ] Hair spray bottles need to be disinfected

#### Signature:

Licensee reviewed inspection report with Inspector.

**RECHECK**

PASS

**Date:** 4/1/2023

**Time:** 9:00 AM

**Inspector signature:** [Signature]

**Licensee signature:** [Signature]

A. SALON OR BOOTH NAME: Salon 2000
ADDRESS: 
OWNER NAME: 
TELEPHONE NUMBER: 
SALON or BOOTH LICENSE NUMBER: 05-04007-2023 EXPIRATION DATE: 01/19/2023

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

C. List of Personal Licenses (first & last) 
- Lic # 00-03590-4023 Expiry: 01/19/2023
- Lic # 00-03911-4023 Expiry: 01/19/2023
- Lic # 00-03819-4023 Expiry: 01/19/2023
- Lic # 00-03818-4023 Expiry: 01/19/2023
- Lic # 00-03819-4023 Expiry: 01/19/2023

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. Work stations immediately clean and disinfected after each use
- YES NO 17. 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, semis, 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 cutting iron)
- 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: 

F. Comments: 

Signature: 
Inspector Signature: 
Licensee reviewed inspection report with Inspector YES NO (If "no" why not)

RECHECK 
FAIL 
PASS 

A.PR 27 2022 

Started 1/1/2007, Rev. 1/1/2008; Rev. 1/1/2013, Rev 7/1/17, Rev 1/2019 Rev 1/2020
A. SALON OR BOOTH NAME: Salon 2000

ADDRESS: 

CITY: Watertown

OWNER NAME: 

TELEPHONE NUMBER: 63-04007-0578


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Signature: 

Inspector signature: 

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RECHECK PASS ENGAGE