

COSMETOLOGY INSPECTION REPORT

Salt Lake County Health Department 788 E Woodoak Lane Murray, UT 84107 Phone: (385) 468-3860 Fax: (385) 468-3861		Total # of Violations: 0	Date: 05/21/2018
		Purpose of Inspection: 01 - Routine	Time In: 10:16 am Time Out: 10:42 am
Establishment: FABULOUS NAILS	Establishment Address: 4419 S 2950 E	City/State/Zip: MILLCREEK TS, UT 84124	Phone: (801) 274-1952
License/Permit #: 35-034645	Mailing Address: 4419 S 2950 E	Mailing City/State/Zip: MILLCREEK TS, UT 84124	
Certified:	Owner's Name: FABULOUS NAILS	Est. Type: Regular Cosmetology	Permit Code: Cosmetology Establishment

Based on an inspection this day, the items marked below identify violations in the operations or construction of this facility. Violations must be corrected immediately unless otherwise specified. Each follow-up inspection will be assessed at \$100.00.

PERMIT REQUIREMENTS

1 Permit to Operate 4.1.1

2 Permit Application Submitted 4.1.2

3 Permit Conspicuously Posted 4.1.3

CONSTRUCTION & OPERATION REQUIREMENTS

4 Approved Access to Toilet and Hand Washing Sink 4.2.1

5 Rooms Used Only for Cosmetology 4.2.2

6 Floors/Walls/Ceiling Easily Cleanable, Clean, Good Repair 4.2.3

7 Hot, Cold Running Water, Installed, Maintained 4.2.4

8 Patron Access to Toilet, Hand Sink, Clean, Soap, Towels 4.2.5

9 Backflow Protection for Shampoo & Pedicure Basins 4.2.6

10 Residential Cosmetology Facility with Dedicated Restroom 4.2.7

11 Clean Instruments, Towels & Linens in Closed Containers 4.2.8

12 Storage of Soiled Linens 4.2.9

13 Solid Waste Containers 4.2.10

14 Sharps Container 4.2.11

15 Immersion in Disinfectant of Reusable Instruments 4.2.12

16 Adequate Ventilation(6 Air Changes/Hour) 4.2.13

17 Adequate Lighting (30 ft Candles at Service Stations) 4.2.14

18 Adequate Supply of Brushes, Combs, Neck Strips, Etc. 4.2.15

CLEANING AND MAINTENANCE REQUIREMENTS

19 Tables, Counters, Chairs Cleanable, Clean, Good Repair 4.3.1

20 Disinfection of Tools, Instruments, Appliances 4.3.2

21 Accumulation of Sediment in Disinfectant, Changed 4.3.3

22 Containers, Drawers, Cabinets Clean and Sanitary 4.3.4

23 Adequate Supply of Towels and Linens 4.3.5

24 Capes Washed Between Use, Neck Strips, Towels Used 4.3.6

25 Single Use Items Discarded After Use 4.3.7

26 Hair Clippings, Cleaned After Each Customer 4.3.8

27 Hairpieces Sanitized, Properly Handled 4.3.9

COSMETOLOGISTS AND PATRONS

28 Proof of State Licensure 4.4.1

29 Clean Outer Garments, Personal Cleanliness, Hand Washing Performed 4.4.2

30 Combs Not Kept in Pockets 4.4.3

COSMETOLOGISTS AND PATRONS (CONT)

31 No Service if Scalp or Hair Affliction 4.4.4

32 No Removal of Wart, Mole, No Treatment of Disease 4.4.5

33 Cosmetologist Health 4.4.6

34 Predisposition Test Given, Analine Derivative Tint 4.4.7

35 Disease Reporting 4.4.8

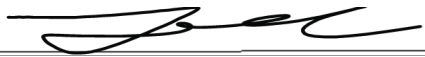
36 Styptic Pencils, Lump Alum Not Used 4.4.9

37 Talc and Powders Properly Dispensed 4.4.10

38 Ointments and Creams Properly Dispensed 4.4.11

39 Animals Not Allowed 4.4.12

40 Utah Indoor Clean Air Act Regarding Smoking R392-510

Person in Charge (Signature) 
 Print Name Lynna DAO

Inspector Signature 
 PLUTA, JAMIE
 Inspection Result: Advise & Educate

COSMETOLOGY INSPECTION REPORT

Salt Lake County Health Department 788 E Woodoak Lane Murray, UT 84107 Phone: (385) 468-3860 Fax: (385) 468-3861		License/Permit #: 35-034645	Date: 05/21/2018
Establishment FABULOUS NAILS	Address: 4419 S 2950 E	City/State/Zip: MILLCREEK TS, UT 84124	Phone: (801) 274-1952

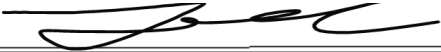

OBSERVATIONS AND CORRECTIVE ACTIONS

Contact 1 Title/Name/Phone: OWNER / LYNNA DAO / (801) 859-3764

Comments:

GENERAL COMMENTS

Medication stored with tools. Corrected on site.

Person in Charge (Signature)		Inspector Signature:	
Print Name:	<u>Lynna DAO</u>		PLUTA, JAMIE