

**Northeast District Department of Health  
SALON/BARBERSHOP INSPECTION REPORT**

Name: Angel Nails  
Town: Plainfield

Address: 780 Nonwch Road  
No. of Chairs: Hair 0 Nails \_\_\_\_\_

<input checked="" type="checkbox"/> Annual Inspection	<input type="checkbox"/> Complaint
<input type="checkbox"/> Reinspection	
<input type="checkbox"/> Other: _____	

<input type="checkbox"/> Barbershop	<input type="checkbox"/> Hairdressing/Cosmetology
<input checked="" type="checkbox"/> Pedicures	<input checked="" type="checkbox"/> Other <u>Waxing</u>
<input checked="" type="checkbox"/> Nails	

Based on an inspection this day, the items circled below identify violations of the *Northeast District Department of Health Barbershops, Hairdressing and Cosmetology Shops Ordinance*, which must be corrected by the date specified.

1. **WATER/SEPTIC**
- Water supply adequate, safe.....  Public
  - Approved method of sewage disposal.....
  - No potential cross connection or back siphonage.....
2. **RESTROOMS**
- Toilets and washbasins fixtures are clean and in good repair.....
  - Hot and cold water under pressure, provided as required.....
  - Soap in dispensers and single-service paper towels provided.....
  - Covered refuse containers provided, clean.....
3. **PHYSICAL BUILDING CONDITION**
- Permit properly displayed.....
  - Residential Salon - living quarters are separate. Salon has own entrance.....  NA
  - Floors, walls and ceilings properly constructed and in good repair.....
  - Adequate lighting provided as required.....
  - Adequate ventilation, no excess heat or odors.....
  - Outside disposal area clean.....
  - No foods or beverages prepared, stored, or sold on premises unless permitted.....
  - No animals / pets.....
  - Aisles/work spaces properly maintained.....

4. **INDIVIDUAL SERVICE STATIONS UTENSILS/EQUIPMENT HANDLING**
- All personnel properly licensed as required by State.....  MA
  - Hair clippings removed frequently and in proper manner.....  MA
  - Headrest covered with clean towels or paper. Sanitary paper strip placed around neck before protective device.....  MA
  - Shaker-top container used for dispensing lotion or powders.....
  - Alum or other material available to stop the flow of blood.....
  - Clean outer garments and hygienic practices.....
  - The following items are prohibited: neck dusters, powder puffs, sponges, shaving brushes, shaving mugs.....
  - Attached equipment, fixtures, properly constructed, maintained, clean and free of hair clippings.....  MA
  - All chemical containers are properly labeled.....

5. **UTENSILS/EQUIPMENT SANITIZING**
- Utility sink provided for instrument cleaning.....
  - Equipment/utensils used are cleaned and disinfected after each customer.....
  - Proper use of recommended sanitizing/sterilizing device after thorough cleansing of implements.....
  - Disinfected utensils kept in sanitary covered containers when not in use.....
  - Linens and towels properly sanitized and stored correctly. Covered receptacle provided for soiled linens and towels only.....

6. **PEDICURE/MANICURE STATIONS**
- Foot spas are properly sanitized after each client and at end of day. Drains and screens free of debris.....
  - Tabletops, armrests, footrests and pedicure chairs/manicure stations are disinfected after each client.....
  - Manicure table and surrounding areas maintained in a sanitary condition.....
  - Clean towels or disposable paper covers are placed over manicure cushion and/or footrests before each client.....
  - Single-use items such as; emery boards, disposable files, and sanding bands from electric file mandrels are discarded after each client.....
  - EPA Registered hospital disinfectant available at each station.....
  - Razors & Credo blades prohibited.....

**Comments:**

- 6.1 Debris on screen - Red - Pedicure Chair - last
- 6.1 Debris build up - Basin - Spa #4
- 6.1 Debris build up - Spa #1 Basin
- 6.5 Used Emery Board / Lofah (scrubber) at station
- Between Foot Spa 1+2
- 6.3 Debris build up - drawer / exterior of
- Manicure table - Spa #1
- 5.4 Nail brushes - Lofahs sitting out on manicure
- table - SPA #11
- 4.6 Purses / coffee cups (full) stored in
- Waxing room
- 2.3 No paper towels in restroom -
- 6.4 Eye lashes on towel / chair - Room across from
- Pedicure station

Date of Inspection: 1/6/15 Time: 12:05

Date of Required Compliance: 2 weeks

[Signature]  
Signature of Sanitarian

[Signature]  
Signature of Person in Charge

Cont - pg 2



INSPECTION REPORT  
FOOD SERVICE ESTABLISHMENTS  
CONTINUATION SHEET

STATE OF CONNECTICUT  
DEPARTMENT OF PUBLIC HEALTH

NAME OF ESTABLISHMENT <i>Angel Nails</i>	TOWN <i>Plainfield</i>	DATE OF INSPECTION <i>1-6-15</i>
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INSPECTION FORM #	REMARKS
4.9	Unlabeled chemical container - Manicure table 1st row (L)
5.2	Unclean clippers stored in drawer → same table
6.5	Used sanding bits on drill heads - manicure stations
6.3	Unclean manicure table - last row on (R)
5.5	Unclean towel in towel warmer - Hair
<del>2.3</del>	No paper towels @ hand sink (OK) Towels in Towel Warmer
4.6	Employee did not wash hands prior to working on customer
3.5	Back laundry room unclean - odor present / appears to be garbage.
	Facials - Waxed ?? (NOT IN CT)

INITIAL (INSPECTOR) <i>JF</i>	INITIAL (PERSON IN CHARGE) <i>RH</i>
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Sub  
DA 1/23/15

# Northeast District Department of Health SALON/BARBERSHOP INSPECTION REPORT

Name: Angel Nails  
Town: Plainfield

Address: 780 Norwich Rd  
No. of Chairs: Hair 0 Nails \_\_\_\_\_

<input type="checkbox"/> Annual Inspection	<input type="checkbox"/> Complaint
<input checked="" type="checkbox"/> Reinspection	
<input type="checkbox"/> Other: _____	

<input type="checkbox"/> Barbershop	<input type="checkbox"/> Hairdressing/Cosmetology
<input checked="" type="checkbox"/> Pedicures	<input checked="" type="checkbox"/> Other <u>waxing</u>
<input checked="" type="checkbox"/> Nails	

Based on an inspection this day, the items circled below identify violations of the *Northeast District Department of Health Barbershops, Hairdressing and Cosmetology Shops Ordinance*, which must be corrected by the date specified.

1. **WATER/SEPTIC**
- Water supply adequate, safe.....
  - Approved method of sewage disposal..... Public
  - No potential cross connection or back siphonage.....
2. **RESTROOMS**
- Toilets and washbasins fixtures are clean and in good repair.....
  - Hot and cold water under pressure, provided as required.....
  - Soap in dispensers and single-service paper towels provided.....
  - Covered refuse containers provided, clean.....
3. **PHYSICAL BUILDING CONDITION**
- Permit properly displayed.....
  - Residential Salon - living quarters are separate. Salon has own entrance..... MA
  - Floors, walls and ceilings properly constructed and in good repair.....
  - Adequate lighting provided as required.....
  - Adequate ventilation, no excess heat or odors.....
  - Outside disposal area clean.....
  - No foods or beverages prepared, stored, or sold on premises unless permitted.....
  - No animals / pets.....
  - Aisles/work spaces properly maintained.....

4. **INDIVIDUAL SERVICE STATIONS UTENSILS/EQUIPMENT HANDLING**
- All personnel properly licensed as required by State.....
  - Hair clippings removed frequently and in proper manner.....
  - Headrest covered with clean towels or paper. Sanitary paper strip placed around neck before protective device..... MA
  - Shaker-top container used for dispensing lotion or powders.....
  - Alum or other material available to stop the flow of blood.....
  - Clean outer garments and hygienic practices.....
  - The following items are prohibited: neck dusters, powder puffs, sponges, shaving brushes, shaving mugs.....
  - Attached equipment, fixtures, properly constructed, maintained, clean and free of hair clippings..... MA
  - All chemical containers are properly labeled.....
5. **UTENSILS/EQUIPMENT SANITIZING**
- Utility sink provided for instrument cleaning.....
  - Equipment/utensils used are cleaned and disinfected after each customer.....
  - Proper use of recommended sanitizing/sterilizing device after thorough cleansing of implements.....
  - Disinfected utensils kept in sanitary covered containers when not in use.....
  - Linens and towels properly sanitized and stored correctly. Covered receptacle provided for soiled linens and towels only.....

6. **PEDICURE/MANICURE STATIONS**
- Foot spas are properly sanitized after each client and at end of day. Drains and screens free of debris.....
  - Tabletops, armrests, footrests and pedicure chairs/manicure stations are disinfected after each client.....
  - Manicure table and surrounding areas maintained in a sanitary condition.....
  - Clean towels or disposable paper covers are placed over manicure cushion and/or footrests before each client.....
  - Single-use items such as; emery boards, disposable files, and sanding bands from electric file mandrels are discarded after each client.....
  - EPA Registered hospital disinfectant available at each station.....
  - Razors & Credo blades prohibited.....

**Comments:**

6.1 Plastic covering on waxing chair - Paper roll  
New cover put on for each client  
 6.4 Unclean towel on Manicure station - a (B)  
used for excess dust from Acrylic Nails - Customers  
do not put arms/hands on it  
 Note: All items from previous inspection have been addressed.  
Check on new permit - 2as

Date of Inspection: 1/22/15 Time: 1:05  
Jane Bombard  
Signature of Sanitarian

Date of Required Compliance: Immediately  
[Signature]  
Signature of Person in Charge

## Northeast District Department of Health SALON/BARBERSHOP INSPECTION REPORT

Name: Image Nails  
Town: Plainfield

Address: 727 Norwich Rd  
No. of Chairs: Hair 0 Nails 11

<input checked="" type="checkbox"/> Annual Inspection	<input type="checkbox"/> Complaint
<input type="checkbox"/> Reinspection	
<input type="checkbox"/> Other: _____	

<input type="checkbox"/> Barbershop	<input type="checkbox"/> Hairdressing/Cosmetology
<input checked="" type="checkbox"/> Pedicures	<input checked="" type="checkbox"/> Other <u>Waxing</u>
<input checked="" type="checkbox"/> Nails	

Based on an inspection this day, the items circled below identify violations of the *Northeast District Department of Health Barbershops, Hairdressing and Cosmetology Shops Ordinance*, which must be corrected by the date specified.

1. **WATER/SEPTIC**
  1. Water supply adequate, safe..... Public
  2. Approved method of sewage disposal.....
  3. No potential cross connection or back siphonage.....
2. **RESTROOMS**
  1. Toilets and washbasins fixtures are clean and in good repair.....
  2. Hot and cold water under pressure, provided as required.....
  3. Soap in dispensers and single-service paper towels provided.....
  4. Covered refuse containers provided, clean.....
3. **PHYSICAL BUILDING CONDITION**
  1. Permit properly displayed.....
  2. Residential Salon - living quarters are separate. Salon has own entrance..... N/A
  3. Floors, walls and ceilings properly constructed and in good repair.....
  4. Adequate lighting provided as required.....
  5. Adequate ventilation, no excess heat or odors.....
  6. Outside disposal area clean.....
  7. No foods or beverages prepared, stored, or sold on premises unless permitted.....
  8. No animals / pets.....
  9. Aisles/work spaces properly maintained.....

4. **INDIVIDUAL SERVICE STATIONS UTENSILS/EQUIPMENT HANDLING**
  1. All personnel properly licensed as required by State..... MA
  2. Hair clippings removed frequently and in proper manner..... N/A
  3. Headrest covered with clean towels or paper. Sanitary paper strip placed around neck before protective device..... N/A
  4. Shaker-top container used for dispensing lotion or powders.....
  5. Alum or other material available to stop the flow of blood.....
  6. Clean outer garments and hygienic practices.....
  7. The following items are prohibited: neck dusters, powder puffs, sponges, shaving brushes, shaving mugs .....
  8. Attached equipment, fixtures, properly constructed, maintained, clean and free of hair clippings ..... MA
  9. All chemical containers are properly labeled.....

5. **UTENSILS/EQUIPMENT SANITIZING**
  1. Utility sink provided for instrument cleaning.....
  2. Equipment/utensils used are cleaned and disinfected after each customer.....
  3. Proper use of recommended sanitizing/sterilizing device after thorough cleansing of implements.....
  4. Disinfected utensils kept in sanitary covered containers when not in use.....
  5. Linens and towels properly sanitized and stored correctly. Covered receptacle provided for soiled linens and towels only.....

6. **PEDICURE/MANICURE STATIONS**
  1. Foot spas are properly sanitized after each client and at end of day. Drains and screens free of debris.....
  2. Tabletops, armrests, footrests and pedicure chairs/manicure stations are disinfected after each client..... N/A
  3. Manicure table and surrounding areas maintained in a sanitary condition.....
  4. Clean towels or disposable paper covers are placed over manicure cushion and/or footrests before each client. See Note.....
  5. Single-use items such as; emery boards, disposable files, and sanding bands from electric file mandrels are discarded after each client.....
  6. EPA Registered hospital disinfectant available at each station.....
  7. Razors & Credo blades prohibited.....

Comments:  
5.3 Nail Brushes to be fully submerged in Barbicide - Jar - Bathroom  
6.4 One Manicure Station - No Clean towel put over table prior to working on customer.

Date of Inspection: 1/8/15 Time: 12:30  
[Signature]  
Signature of Sanitarian

Date of Required Compliance: As Soon As Possible  
[Signature]  
Signature of Person in Charge

# Northeast District Department of Health SALON/BARBERSHOP INSPECTION REPORT

Name: MD Nails & Spa

Address: 628 School Street

Town: Putnam

No. of Chairs: Hair 0 Nails \_\_\_\_\_

<input type="checkbox"/> Annual Inspection	<input type="checkbox"/> Complaint
<input type="checkbox"/> Reinspection	
<input type="checkbox"/> Other: _____	

<input type="checkbox"/> Barbershop	<input type="checkbox"/> Hairdressing/Cosmetology
<input checked="" type="checkbox"/> Pedicures	<input checked="" type="checkbox"/> Other <u>Waxing</u>
<input checked="" type="checkbox"/> Nails	

Based on an inspection this day, the items circled below identify violations of the *Northeast District Department of Health Barbershops, Hairdressing and Cosmetology Shops Ordinance*, which must be corrected by the date specified.

1. **WATER/SEPTIC**
1. Water supply adequate, safe..... Public
  2. Approved method of sewage disposal..... Public
  3. No potential cross connection or back siphonage.....

2. **RESTROOMS**
1. Toilets and washbasins fixtures are clean and in good repair.....
  2. Hot and cold water under pressure, provided as required.....
  3. Soap in dispensers and single-service paper towels provided.....
  4. Covered refuse containers provided, clean.....

3. **PHYSICAL BUILDING CONDITION**
1. Permit properly displayed.....
  2. Residential Salon - living quarters are separate. Salon has own entrance..... N/A
  3. Floors, walls and ceilings properly constructed and in good repair.....
  4. Adequate lighting provided as required.....
  5. Adequate ventilation, no excess heat or odors.....
  6. Outside disposal area clean.....
  7. No foods or beverages prepared, stored, or sold on premises unless permitted.....
  8. No animals / pets.....
  9. Aisles/work spaces properly maintained.....

4. **INDIVIDUAL SERVICE STATIONS UTENSILS/EQUIPMENT HANDLING**
1. All personnel properly licensed as required by State.....
  2. Hair clippings removed frequently and in proper manner..... N/A
  3. Headrest covered with clean towels or paper. Sanitary paper strip placed around neck before protective device..... N/A
  4. Shaker-top container used for dispensing lotion or powders.....
  5. Alum or other material available to stop the flow of blood.....
  6. Clean outer garments and hygienic practices.....
  7. The following items are prohibited: neck dusters, powder puffs, sponges, shaving brushes, shaving mugs..... N/A
  8. Attached equipment, fixtures, properly constructed, maintained, clean and free of hair clippings..... N/A
  9. All chemical containers are properly labeled.....

5. **UTENSILS/EQUIPMENT SANITIZING**
1. Utility sink provided for instrument cleaning.....
  2. Equipment/utensils used are cleaned and disinfected after each customer.....
  3. Proper use of recommended sanitizing/sterilizing device after thorough cleansing of implements.....
  4. Disinfected utensils kept in sanitary covered containers when not in use.....
  5. Linens and towels properly sanitized and stored correctly. Covered receptacle provided for soiled linens and towels only.....

6. **PEDICURE/MANICURE STATIONS**
1. Foot spas are properly sanitized after each client and at end of day. Drains and screens free of debris.....
  2. Tabletops, armrests, footrests and pedicure chairs/manicure stations are disinfected after each client.....
  3. Manicure table and surrounding areas maintained in a sanitary condition.....
  4. Clean towels or disposable paper covers are placed over manicure cushion and/or footrests before each client.....
  5. Single-use items such as; emery boards, disposable files, and sanding bands from electric file mandrels are discarded after each client.....
  6. EPA Registered hospital disinfectant available at each station.....
  7. Razors & Credo blades prohibited.....

**Comments:** - floors need sweeping  
 - Dust Build up on main Stations  
 + shelf behind mani Stations w/ customer tools.  
 6.5# 9 mani station - used file blocks.  
 - Waxing Bed. Sheet very Dirty must be changed Daily. Paper used each customer.  
 - Light Switch wax Room needs to be wiped clean Black debris also Magnify light.  
 3.3 - floors in wax room need cleaning  
 3.3 - Water Stained ceiling tiles.  
 4.9 - Pedicure Carts along wall unlabeled bottles + used files.  
 dk - NO Hospital grade cleaner/Dis. for Pedi Stations. - in storage Room

Date of Inspection: 5/4/15 Time: 12:40

Date of Required Compliance: ASAP.

[Signature]  
Signature of Sanitarian

[Signature]  
Signature of Person in Charge

Northeast District Department of Health  
SALON/BARBERSHOP INSPECTION REPORT

Name: Nail Arts

Address: 83 Westcott Road

Town: Killingly

No. of Chairs: Hair \_\_\_\_\_ Nails \_\_\_\_\_

<input checked="" type="checkbox"/> Annual Inspection	<input type="checkbox"/> Complaint
<input type="checkbox"/> Reinspection	
<input type="checkbox"/> Other: _____	

<input type="checkbox"/> Barbershop	<input type="checkbox"/> Hairdressing/Cosmetology
<input checked="" type="checkbox"/> Pedicures	<input type="checkbox"/> Other _____
<input checked="" type="checkbox"/> Nails	

Based on an inspection this day, the items circled below identify violations of the *Northeast District Department of Health Barbershops, Hairdressing and Cosmetology Shops Ordinance*, which must be corrected by the date specified.

- 1. **WATER/SEPTIC**
  - 1. Water supply adequate, safe.....
  - 2. Approved method of sewage disposal.....
  - 3. No potential cross connection or back siphonage.....
- 2. **RESTROOMS**
  - 1. Toilets and washbasins fixtures are clean and in good repair.....
  - 2. Hot and cold water under pressure, provided as required.....
  - 3. Soap in dispensers and single-service paper towels provided.....
  - 4. Covered refuse containers provided, clean.....
- 3. **PHYSICAL BUILDING CONDITION**
  - 1. Permit properly displayed.....
  - 2. Residential Salon - living quarters are separate. Salon has own entrance.....
  - 3. Floors, walls and ceilings properly constructed and in good repair.....
  - 4. Adequate lighting provided as required.....
  - 5. Adequate ventilation, no excess heat or odors.....
  - 6. Outside disposal area clean.....
  - 7. No foods or beverages prepared, stored, or sold on premises unless permitted.....
  - 8. No animals / pets.....
  - 9. Aisles/work spaces properly maintained.....

Public

- 4. **INDIVIDUAL SERVICE STATIONS UTENSILS/EQUIPMENT HANDLING**
  - 1. All personnel properly licensed as required by State.....
  - 2. Hair clippings removed frequently and in proper manner.....
  - 3. Headrest covered with clean towels or paper. Sanitary paper strip placed around neck before protective device.....
  - 4. Shaker-top container used for dispensing lotion or powders.....
  - 5. Alum or other material available to stop the flow of blood.....
  - 6. Clean outer garments and hygienic practices.....
  - 7. The following items are prohibited: neck dusters, powder puffs, sponges, shaving brushes, shaving mugs .....
  - 8. Attached equipment, fixtures, properly constructed, maintained, clean and free of hair clippings .....
  - 9. All chemical containers are properly labeled.....
- 5. **UTENSILS/EQUIPMENT SANITIZING**
  - 1. Utility sink provided for instrument cleaning.....
  - 2. Equipment/utensils used are cleaned and disinfected after each customer..... autoclave
  - 3. Proper use of recommended sanitizing/sterilizing device after thorough cleansing of implements.....
  - 4. Disinfected utensils kept in sanitary covered containers when not in use.....
  - 5. Linens and towels properly sanitized and stored correctly. Covered receptacle provided for soiled linens and towels only.....
- 6. **PEDICURE/MANICURE STATIONS**
  - 1. Foot spas are properly sanitized after each client and at end of day. Drains and screens free of debris.....
  - 2. Tabletops, armrests, footrests and pedicure chairs/manicure stations are disinfected after each client.....
  - 3. Manicure table and surrounding areas maintained in a sanitary condition.....
  - 4. Clean towels or disposable paper covers are placed over manicure cushion and/or footrests before each client. ....
  - 5. Single-use items such as; emery boards, disposable files, and sanding bands from electric file mandrels are discarded after each client.....
  - 6. EPA Registered hospital disinfectant available at each station.....
  - 7. Razors & Credo blades prohibited.....

Comments:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
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\_\_\_\_\_

Date of Inspection: 5.28.15 Time: 10:28a

[Signature]  
Signature of Sanitarian

Date of Required Compliance: ASAP

[Signature]  
Signature of Person in Charge

# Northeast District Department of Health SALON/BARBERSHOP INSPECTION REPORT

Name: Selina Nails

Address: 72 Prospect Street

Town: Plainfield

No. of Chairs: Hair 0 Nails 4 +

<input checked="" type="checkbox"/> Annual Inspection	<input type="checkbox"/> Complaint
<input type="checkbox"/> Reinspection	
<input type="checkbox"/> Other: _____	

<input type="checkbox"/> Barbershop	<input type="checkbox"/> Hairdressing/Cosmetology
<input checked="" type="checkbox"/> Pedicures	<input checked="" type="checkbox"/> Other <u>Waxing</u>
<input checked="" type="checkbox"/> Nails	

Based on an inspection this day, the items circled below identify violations of the *Northeast District Department of Health Barbershops, Hairdressing and Cosmetology Shops Ordinance*, which must be corrected by the date specified.

1. **WATER/SEPTIC**
  1. Water supply adequate, safe. Tested 12/14
  2. Approved method of sewage disposal. Public
  3. No potential cross connection or back siphonage.
2. **RESTROOMS**
  1. Toilets and washbasins fixtures are clean and in good repair.
  2. Hot and cold water under pressure, provided as required.
  3. Soap in dispensers and single-service paper towels provided.
  4. Covered refuse containers provided, clean.
3. **PHYSICAL BUILDING CONDITION**
  1. Permit properly displayed.
  2. Residential Salon - living quarters are separate. Salon has own entrance. MA
  3. Floors, walls and ceilings properly constructed and in good repair.
  4. Adequate lighting provided as required.
  5. Adequate ventilation, no excess heat or odors.
  6. Outside disposal area clean.
  7. No foods or beverages prepared, stored, or sold on premises unless permitted.
  8. No animals / pets.
  9. Aisles/work spaces properly maintained.

4. **INDIVIDUAL SERVICE STATIONS UTENSILS/EQUIPMENT HANDLING**
  1. All personnel properly licensed as required by State.
  2. Hair clippings removed frequently and in proper manner.
  3. Headrest covered with clean towels or paper. Sanitary paper strip placed around neck before protective device. MA
  4. Shaker-top container used for dispensing lotion or powders.
  5. Alum or other material available to stop the flow of blood.
  6. Clean outer garments and hygienic practices.
  7. The following items are prohibited: neck dusters, MA powder-puffs, sponges, shaving brushes, shaving mugs.
  8. Attached equipment, fixtures, properly constructed, maintained, clean and free of hair clippings.
  9. All chemical containers are properly labeled.

5. **UTENSILS/EQUIPMENT SANITIZING**
  1. Utility sink provided for instrument cleaning.
  2. Equipment/utensils used are cleaned and disinfected after each customer.
  3. Proper use of recommended sanitizing/sterilizing device after thorough cleansing of implements.
  4. Disinfected utensils kept in sanitary covered containers when not in use.
  5. Linens and towels properly sanitized and stored correctly. Covered receptacle provided for soiled linens and towels only.

6. **PEDICURE/MANICURE STATIONS**
  1. Foot spas are properly sanitized after each client and at end of day. Drains and screens free of debris.
  2. Tabletops, armrests, footrests and pedicure chairs/manicure stations are disinfected after each client.
  3. Manicure table and surrounding areas maintained in a sanitary condition.
  4. Clean towels or disposable paper covers are placed over manicure cushion and/or footrests before each client.
  5. Single-use items such as; emery boards, disposable files, and sanding bands from electric file mandrels are discarded after each client.
  6. EPA Registered hospital disinfectant available at each station.
  7. Razors & Credo blades prohibited.

**Comments:**

5.1 - Utensils at Waxing station - sitting out on table

5.2 Manicure station - Utensil on table - Utensils stored in container - unclean / Contains nail clippings

4.9 Unlabeled Chem Bottle c manicure station

Note: No Customers at time of inspection

Alcohol?

Date of Inspection: 3/20/15 Time: 10:15

[Signature]  
Signature of Sanitarian

Date of Required Compliance: As Soon As Possible

[Signature]  
Signature of Person in Charge