

### Cosmetology Inspection Form

Name of Establishment \_\_\_\_\_

Address \_\_\_\_\_

Annual Inspection	Complaint
Reinspection	
Other: _____	

Services:

- Barber Shop       Hairdressing/Cosmetology  
 Nails                 Other \_\_\_\_\_

Based on an inspection this day, the items circled below identify violations of the Ledge Light Health District Regulations for Barbershops, Hairdressing, Cosmetology Shops and Nail Salons.

**A. Water Supply**

- 1. Water supply adequate, safe.....
- 2. Hot and cold water under pressure, provided as required.....

**B. Sewage Disposal**

- 3. Approved method of sewage disposal.....

**C. Plumbing**

- 4. Approved plumbing fixtures, clean, maintained.....
- 5. No potential cross connection, back siphonage, backflow.....

**D. Toilet/Handwashing Facilities**

- 6. Toilets and washbasins adequate, convenient, accessible, designed, installed.....
- 7. Proper fixtures in good repair, clean.....
- 8. Soap in dispensers and single-service paper towels provided.....

**E. Garbage Disposal**

- 9. Adequate number of covered refuse containers provided, clean.....
- 10. Outside disposal area and enclosures properly constructed, clean.....

**F. Floors/Walls/Ceilings**

- 11. Floors properly constructed, in good repair, clean.....
- 12. Ceilings properly constructed, in good repair, clean.....
- 13. Walls properly constructed, in good repair, clean.....
- 14. Attached equipment, fixtures, properly constructed, maintained, clean, free of hair clippings.....

**H. Ventilation**

- 16. Adequate ventilation, no excess heat or odors.....

**I. Storage**

- 17. Cabinets for clean linens and towels are adequate, clean, with tight fitting doors.....
- 18. Covered receptacle provided exclusively for soiled linens and towels....

**J. Housekeeping**

- 19. In-Residence shop completely separate from living/sleeping quarters....
- 20. No foods or beverages on premises unless permitted.....
- 21. No animals / pets in working areas.....
- 22. Aisles/work spaces properly maintained.....

**K. Personnel**

- 23. All personnel properly licensed as required by DPH.....
- 24. No person with infection or communicable disease attended or working.....
- 25. Good hygienic practices, smoking prohibited.....
- 26. Clean outer garments.....
- 27. Hands washed with soap and water before serving each customer.....

**L. Utensils/Equipment – Handling (other than Single Service)**

- 28. The following items are prohibited: neck dusters, powder puffs, sponges, shaving brushes, in proper manner.....
- 29. Hair clippings removed frequently and in proper manner.....
- 30. Head rest covered with clean towels or paper.....
- 31. Sanitary paper strip placed around neck before protective device.....
- 32. Shaker-top container used for dispensing lotion or powders.....
- 33. Alum or other material to stop the flow of blood provided in powder or liquid form.....

**M. Utensils/Equipment - Sanitizing (other than Single Service)**

- 34. Utility sink provided for instrument cleaning.....
- 35. Equipment used on customer cleaned and disinfected after each customer.....
- 36. Utensils used on customers cleaned and sanitized after each customer ..
- 37. Proper use of recommended disinfection techniques/solutions.....
- 38. Disinfected utensils kept in sanitary covered containers when not in use
- 39. Linens and towels properly sanitized when washed on premises.....

Yellow Items are Imminent Health Hazards and must be corrected immediately. All other items must be corrected within 2 weeks.

Date of Inspection: \_\_\_\_\_

Date of Required Compliance: \_\_\_\_\_

Director of Health / Authorized Agent

Signature of Person in Charge

