Cosmetology Inspection Report Annual Demi-Annual Decinspection Description



Stratford Health Department

468 Birdseye Street • Stratford, CT 06615 (203) 385-4090 n/health

□Other	www.townofs	tratford.com
Golden B NEIS	1/12/24	ENT
ESTABLISHMENT NAME	INSPECTION DATE	10
3640 Main Street		JAN 1
ADDRESS	OWNER/OPERATOR	

	(A) Customer Protection					
1	Barbers/Beauticians/Establishment Licensed	5				
2	License Displayed	1				
3	 3 Approved Sanitizer 4 Sanitizer Adequate, Accessible 5 Pedicure Station Properly Cleaned/Sanitized 					
4						
5						
6	Equipment and Implements Clean/Sanitized	4				
7	7 Reuse of Single Use Implements Prohibited					
8	Chemicals/Non-Chemicals Labeled	3				
9	Reuse of Towels Prohibited	2				
10	Credo Blades/Shaving Brushes Prohibited	5				
11	Astringents - Powder or Liquid Form Only	1				
12	Fingerbowl/Paper Liner Utilized	1				
	(B) Employee/Customer Hygiene					
13	Personnel/Customer with Infection Restricted	5				
14	Handwashing Facilities Provided	5				
15	Pump Soap/Drying Device Provided	1				
16	Technician's/Customer's Hands Washed / Clean	5				
17	Good Hygienic Practices/Smoking Restricted	2				
18	Clean Outer Clothes/Aprons Clean	1				
	(C) Plumbing/Sewage Disposal					
19	Cross Connections - Back Siphonage	5				
20	Hot & Cold Water Under Pressure	5				
21	Sewage Disposal Approved	2				
22	Impervious Plumbing Fixtures	1				

OWN	OWNER/OPERATOR					
	(D) Equipment/Storage					
23	Equipment Commercial Grade	3				
24	Cleaning Chemicals Stored Separately	2				
25	Covered Receptacle for Hair & Other Waste	1				
26	Covered Receptacle for Soiled Linens					
27	Adequate Storage Cabinets	1				
	(E) Lighting/Ventilation					
28	Adequate Air Exchange	2				
29	Adequate Lighting	1				
	(F) Toilet Facilities					
30	Adequate, Accessible, Convenient	3				
31	Mechanical Exhaust/Working Window	1				
32	Pump Soap/Drying Device Provided	1				
33	Covered Waste Receptacle Provided	1				
34	Self-closing Toilet Room Door	1				
	(G) Floors/Walls/Ceilings					
35	Floors Clean/Good Repair	1				
36	No Accumulations of Hair Droppings	1				
37	Floor/Wall Juncture Covered	1				
38	Ceilings Clean, Good Repair	1				
	(H) Housekeeping					
40	In-home Establishment Separated	1				
41	Food and Beverage Sales Prohibited Unless Licensed	1				
42	No Pets or Animals	1				

20	Hot & Cold Water Under Pressure	5	L	40	In-home Establishment Separated	1		
21	Sewage Disposal Approved	2		41	Food and Beverage Sales Prohibited Unless Licensed	1		
22	Impervious Plumbing Fixtures	1		42	No Pets or Animals	1		
NOTES:								
Jaina F2- Livence 3411								
Very clean systemized Xia o'vine Wine - 285								
Vice Wing = 283					141			
5 4 3 2 1 Total Score SANITARIAN SIGNATURE								
Man de la companya della companya de								
SIGNAT	URE OF PERSON IN CHARGE				CORRECTIONS DUE			