

Tattoo/Body Piercing Establishment Inspection Form

Niagara County Sanitary Code Chapter XVIII

Establishment Liquid Illusions
 Address 1981 Pine Ave. Date 2/14/2011
 CTV Niagara Falls, NY
 Phone Number(s) 444-5092

	Comments
1. Artist Certifications	<input type="checkbox"/> <u>Posted</u>
2. Permit Requirements	<input type="checkbox"/>
3. Physical Environment	<input type="checkbox"/>
4. Records	<input type="checkbox"/> <u>To be kept for 3yr. min.</u>
5. Tattooing Procedures	<input type="checkbox"/> <u>Shop opens today</u>
6. Dyes/Pigments	<input type="checkbox"/>
7. Sterilization of Tattooing Supplies	<input type="checkbox"/> <u>ultrasonic + autoclave present</u>
8. Tattooing After-Care	<input type="checkbox"/> <u>posted + hardcopy given</u>
9. Body Piercing Procedures	<input checked="" type="checkbox"/> <u>N/A</u>
10. Sterilization of Piercing Supplies	<input checked="" type="checkbox"/> <u>N/A</u>
11. Other	<input checked="" type="checkbox"/> <u>N/A</u>

Key

- 1. No Violations Noted
- 2. Violation(s)
- 3. Not Applicable
- 4. Variance/Waiver Granted
- 5. Correction Made During Inspection

JAMES SIEVER (ARTIST)
 Person Interviewed & Title (Print)

James Siever
 Report Received By & Date (Signature)

[Signature]
 Signature of Inspector(s)