

Tattoo/Body Piercing Establishment Inspection Form

Niagara County Sanitary Code Chapter XVIII

Establishment Tattoo Saints
 Address 389 Division St Date 9/25/09
City N. Tonawanda, NY
 Phone Number(s) 909-1893

	Comments
1. Artist Certifications	<input type="checkbox"/>
2. Permit Requirements	<input type="checkbox"/>
3. Physical Environment	<input type="checkbox"/>
4. Records	<input type="checkbox"/>
5. Tattooing Procedures	<input type="checkbox"/> Disposable
6. Dyes/Pigments	<input type="checkbox"/>
7. Sterilization of Tattooing Supplies	<input type="checkbox"/> All disposable
8. Tattooing After-Care	<input type="checkbox"/> Instructions given (hand copy & verbally and also posted)
9. Body Piercing Procedures	<input checked="" type="checkbox"/> N/A
10. Sterilization of Piercing Supplies	<input checked="" type="checkbox"/> N/A
11. Other	<input type="checkbox"/>

Key

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

Marc Lavery
 Person Interviewed & Title (Print)

Marc Lavery
 Report Received By & Date (Signature)

[Signature]
 Signature of Inspector(s)