

Facility: Tattoos By Tony's vdo # BP25
 Address: 3519 Miller Road
Niagara Falls, NY.

Date: 1/25/11

It is unlawful to tattoo a minor!		PIERCING:		Y	N	Comments
Certification / Permits		Y	N	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
1. Facility is currently permitted by Niagara County (Note: Issued every 2 years - fee: \$100.00/yr)		<input checked="" type="checkbox"/>	<input type="checkbox"/>			Expiration date: <u>1/31/11</u>
2. Permit is prominently displayed		<input checked="" type="checkbox"/>	<input type="checkbox"/>			
3. All artists hold a valid Niagara County certification (Note: fee \$100.00)		<input checked="" type="checkbox"/>	<input type="checkbox"/>			

Facility		Y	N	Comments
1. Facility in good repair, neat and clean		<input checked="" type="checkbox"/>	<input type="checkbox"/>	
2. Work area floor is of impervious material		<input checked="" type="checkbox"/>	<input type="checkbox"/>	
3. Work area walls are light colored		<input checked="" type="checkbox"/>	<input type="checkbox"/>	
4. Work area is separate from the rest of the establishment (Note: not used as a corridor or for any other activities)		<input checked="" type="checkbox"/>	<input type="checkbox"/>	
5. Work area is well lit (50 ft candles)		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<u>130/112</u>
6. Handwash sink with hot and cold running water in work area (soap, not bar form, single use towels or blower, handwash signs and plumbing maintained)		<input checked="" type="checkbox"/>	<input type="checkbox"/>	
7. Adequate / sanitary storage of equipment and supplies		<input checked="" type="checkbox"/>	<input type="checkbox"/>	
8. Work tables are smooth, non-absorbant and light colored		<input checked="" type="checkbox"/>	<input type="checkbox"/>	
9. Food or drink is NOT present in work area		<input checked="" type="checkbox"/>	<input type="checkbox"/>	
10. Provisions for disposal of hazardous biological waste		<input checked="" type="checkbox"/>	<input type="checkbox"/>	

Records		Y	N	Comments
1. Patron records kept (at least 3 years) (name, signature, address, age, tattoo & body part, artist's name)		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<u>File cabinet</u>

Procedures		Y	N	Comments
1. Printed and verbal instructions given to each patron on the possible risks and complications involved with each procedure, including reactions to dyes and aftercare instructions (release form signed)		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<u>Posted/ Handouts</u>
2. Instructions posted / clearly visible		<input checked="" type="checkbox"/>	<input type="checkbox"/>	
3. Patron is NOT under the influence of alcohol or drugs		<input checked="" type="checkbox"/>	<input type="checkbox"/>	
4. Patron is NOT pregnant		<input checked="" type="checkbox"/>	<input type="checkbox"/>	
5. Release forms signed by patron and kept with records		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<u>Filed</u>
6. Artist wears a clean outer garment, is free from any communicable disease and thoroughly washes hands before and after each procedure		<input checked="" type="checkbox"/>	<input type="checkbox"/>	
7. Artist wears single use disposable gloves		<input checked="" type="checkbox"/>	<input type="checkbox"/>	
8. Only disposable single use razors are used		<input checked="" type="checkbox"/>	<input type="checkbox"/>	
9. Patrons tattoo area is thoroughly washed prior to tattooing		<input checked="" type="checkbox"/>	<input type="checkbox"/>	
10. Stencils and writing instruments touching the skin - single use and disposable		<input checked="" type="checkbox"/>	<input type="checkbox"/>	
11. Unused dyes in individual or single service containers must be discarded		<input checked="" type="checkbox"/>	<input type="checkbox"/>	

Sterilization		Y	N	Comments
1. Only single use sterile needles are used		<input checked="" type="checkbox"/>	<input type="checkbox"/>	
2. All reuseable instruments are cleaned ultrasonically prior to sterilization		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<u>Alconax</u>
3. Autoclave used in accordance to manufacturer's instructions and Sanitary Code		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<u>Midmark</u>
4. Monthly independent spore test results recorded (positive results require operations to immediately cease & Health Dept notified)		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<u>CONFIRM (BMS)</u>
5. "Peel back" bags used within 30 days and show proof of sterilization via indicator		<input checked="" type="checkbox"/>	<input type="checkbox"/>	

Skin Care		Y	N	Comments
1. Only approved germicidal solution used (before and after procedure)		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<u>Tintex</u>
2. Only approved p. jelly used and applied with single use applicator		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<u>Egusol</u>

Michael Schramm

Arthur Sperber

Signature (received by)