

TATTOO ESTABLISHMENT INSPECTION REPORT TENNESSEE DEPARTMENT OF HEALTH DIVISION OF ENVIRONMENTAL HEALTH

ESTABLISHMENT Skin Ph						DATE 04/02/24		17.77.6 A	SCORE	
LOCATION 447 N. Front St. STAFF Shannon Gannon						EST. NO. 665240490			100/100	
CITY, STATE, ZIP Murfreesboro TN 37130 Permanent						- 11		URPOSE utine		
PE	RMI	TTEE						DLLOW- UP () YES EQUIRED NO		
		PROHIBITED ACTS						LIGHTING		
	1.	Minor clients, tattoo removal, unhealth	y site	2		19.		Adequate		1
	2.	Licensed artist not on duty		2	0.77			VENTILATION		
		PHYSICAL FACILITIES		-		20.		Sufficient, installed, maintained		1
	3.	Work area separated		1			-	GENERAL OPERATIONS		
*	4.	Autoclave meets minimum time, tempo	erature, pressure	5	*	21.		Toxic items stored, labeled, used		5
	5.	Regulated waste properly disposed		2			T	Premises maintained free of litter, u	innecessary articles,	
		WATER				22.	2	unauthorized personnel, animals, clean, maintenance,		1
*	6.	Water source approved, hot and cold u	nder pressure	5				equipment properly stored		
		SEWAGE	minimite words —		1000			TATTOO EQUIPMENT & U	TENSILS	
*	7.	Sewage and liquid waste disposal		5		23.		Properly installed, maintained, cons	structed, designed	1
		PLUMBING		1/2	*	24		No reuse of single use articles		5
	8.	Installed, maintained		1		25.		Clean, free of abrasives and cleaner	S	1
*	9.	Cross-connection, backflow, back-siph	onage	5		26.		Aisles unobstructed		1
	- 0	TOILET/HANDWASHING FAC	TLITIES		OIL			TATTOO OPERATIONS		
	10.	Installed, designed, number, convenien	t, available	5	*	27.	-	Good hygienic practices, proper har	ndwashing	5
		Enclosed, tight-fitting doors, fixtures c			28. Clean clothing, lap cloth used, spill kits available		1			
	11.	covered receptacles, antibacterial soap, disposable towels/hand drying devices				29.		Employees with infectious lesions of from tattooing	on hands restricted	5
		GARBAGE & REFUSE DISPOS	AL	202	*	30.		Monthly microbiological monitoring	g tests	5
	12.	Containers clean, adequate number, co rodent proof. Outside storage area clea		1		31.		Tubes and needles sterilized in an a Equipment sterilized for no more th	an one (1) year.	5
_		covered, controlled incineration				32.	_	Work room equipped and restocked		5
		INSECT/RODENT CONTROL	CONTRACTOR CONTRACTOR CONTRACTOR				\rightarrow	Sterile instruments properly handled		5
*	13.	Presence/evidence of insects, rodents, l openings protected.	narborage—outer	5		34.	-	Reusable instruments properly hand	ned	5
-		FLOORS/WALLS/CEILINGS/F	UDNICHINGS		\vdash	36.	\rightarrow	Approved dyes or pigments Tattoo log available		1
	14.	Floors—constructed, drained, clean, go		1	\vdash	37.	-	Instructions provided on care of tatt	anthods piercino	1
-	15.	Walls—constructed, clean, good repair		1	1	31.	•	ADMINISTRATION	oo/body piercing	1
	3575	Ceilings/attached equipment—construc				1300	1	ICAS O		T
	16.	repair	itts, etemi, good	1		38.		Infections reported		0
	17.	Work area furnishings—sanitized betw	een clients	1		39.		Current permit/license posted		0
	18.	Work area furnishings-clean, good re	pair	1		40.		Most current complete inspection re	eport available	0

Failure to correct any violations of critical items within seven (7) days or failure to correct violations of any noncritical items within fourteen (14) days may result in suspension of your tattoo establishment permit. If a second critical violation is committed within the period of one (1) year (calendar or otherwise), the tattoo studio shall be subject to a civil penalty of up to five hundred dollars (\$500) and the tattoo studio's permit may be revoked. Items identified as constituting imminent health hazards shall be corrected immediately or operations shall cease. You are required to post the tattoo establishment permit in a conspicuous manner and to keep this inspection report available at this facility for public disclosure to any person who requests to review it. You have the right to request a review regarding this report by filling a written request with the local health department within ten (10) days of the date of this report. T.C.A. Sections 62-38-201 et. seq., 68-1-103, 4-5-202, and 4-5-320.

Signature of Person in Charge		Ву	5)		EHS
Date of Signature	04/02/24	Time in/out	11:19 AM	11:35 AM	

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Observed Violations					
otal # 0					
**See page at the end of this docu	ment for any violations t	hat could not be di	solaved in this space	A.:	
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Additional Comments					

^{***}See page at the end of this document for any extra Additional Comments that could not be displayed in this space.

Observed Violations (cont	t'd)			
Additional Comments (cor	nt'd)			
ource Type: Water	Source:	City		

Establishment Information

Many people have hepatitis C and do not know it

CDC now recommends all adults be tested for hepatitis C



Licensed facilities use safe tattooing and/or piercing techniques that are proven to prevent hepatitis C and other infections such as HIV



Get Tested, Treatment Cures





