

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

ESTABLISHMENT Black Moon Tattoo Studio Company					DATE 08/11/22 SCOI		SCORE		
LOCATION 630 Broadmor St; Ste 120  STAFF Christie Graves					EST. NO. 665314968			100/100	
		0.0000 0.000000000000000000000000000000	TYPE Permanent			- 100	PURPOSE Routine		
PE	RMI	TTEE					FOLLOW- UP ( ) YE REQUIRED ( ) NO	25077	
		PROHIBITED ACTS					LIGHTING		
-	1.	Minor clients, tattoo removal, unhealthy	site	2		19.	Adequate		1
	2.	Licensed artist not on duty		2	377		VENTILATION		
		PHYSICAL FACILITIES				20.	Sufficient, installed, mai	ntained	1
	3.	Work area separated		1			GENERAL OPERA	TIONS	
	4.	Autoclave meets minimum time, temper	ature, pressure	5	*	21.	Toxic items stored, label	led, used	5
	5.	Regulated waste properly disposed		2			Premises maintained free	e of litter, unnecessary articles,	
		WATER		CIA ALE		22.	unauthorized personnel,	animals, clean, maintenance,	1
*	6.	Water source approved, hot and cold un	der pressure	5			equipment properly store	ed	
		SEWAGE					TATTOO EQUIPMI	ENT & UTENSILS	
*	7.	Sewage and liquid waste disposal		5		23.	Properly installed, maint	tained, constructed, designed	1
		PLUMBING			*	24.	No reuse of single use at	rticles	5
	8.	Installed, maintained		1		25.	Clean, free of abrasives	and cleaners	1
*	9.	Cross-connection, backflow, back-sipho	nage	5		26.	Aisles unobstructed		1
		TOILET/HANDWASHING FACE	ILITIES	-	0111		TATTOO OPERAT	IONS	
	<ol> <li>Installed, designed, number, convenient, available</li> <li>* 27. Good hy</li> </ol>		Good hygienic practices,	, proper handwashing	5				
		Enclosed, tight-fitting doors, fixtures cle				28.		used, spill kits available	1
	11.	covered receptacles, antibacterial soap, of towels/hand drying devices	lisposable	1	*	29.	Employees with infection from tattooing	us lesions on hands restricted	5
		GARBAGE & REFUSE DISPOSA	\L	-7773	*	30.	Monthly microbiological		5
	12.	Containers clean, adequate number, cover rodent proof. Outside storage area clean	(1987 P. C. 1987 P. 1988 P. C. 1987 P. C. 19	1		31.	Equipment sterilized for	ized in an approved manner, no more than one (1) year.	5
_	_	covered, controlled incineration				32.			5
	7	INSECT/RODENT CONTROL	Marchine Co., March			34.			5
*	13.	Presence/evidence of insects, rodents, he openings protected.	irborage— outer	5		35.		1	1
-		FLOORS/WALLS/CEILINGS/FURNISHINGS			$\vdash$	36.	11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	ints	1
	14.	Floors—constructed, drained, clean, goo		1	$\vdash$	37.		care of tattoo/body piercing	1
	15.	Walls—constructed, clean, good repair	и геран	1	-	31,	ADMINISTRATION		-
	33.5	Ceilings/attached equipment—construct	ed clean good				10000		
	16.	repair	ed, etems, good	1		38.	Infections reported		0
	17.	Work area furnishings—sanitized between	en clients	1		39.	Current permit/license pe	osted	0
	18	18. Work area furnishings—clean, good repair				40.	Most current complete in	aspection report 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 filing 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			EHS
Date of Signature	08/11/22	Time in/out	01:20 PM	01:39 PM	

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

Establishment Name: Black Moon Tattoo Studio Company

Establishment Information

Establishment Number: 665314968



	ed Violations					
otal #	0					
**See pa	age at the end of this docu	ment for any violatio	ns that could not	be displayed in th	s space.	
	onal Comments					
Ok to op	erate					

<sup>\*\*\*</sup>See page at the end of this document for any extra Additional Comments that could not be displayed in this space.

Establishment Name: Black Moon Tattoo Studio Company Establishment Number: 665314968					
Observed Violations (con	t'd)				
dditional Comments (co					
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





