

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

ESTABLISHMENT Primordial Ink Tattoo					- 13	DATE 04/23/24 SC		SCORE		
LOCATION STAFF 201 W Main St Brennen Boone						EST. NO. 665325005			100/100	
		STATE, ZIP esboro TN 37130	TYPE Permanent			- 11		URPOSE utine		
PE	RMI	TTEE						DLLOW-UP () YES EQUIRED NO		
		PROHIBITED ACTS						LIGHTING		
	1.	Minor clients, tattoo removal, unhealthy	y site	2		19		Adequate		1
	2.	Licensed artist not on duty		2	377			VENTILATION		
		PHYSICAL FACILITIES				20.		Sufficient, installed, maintained		1
	3.	Work area separated		1				GENERAL OPERATIONS		
	4.	Autoclave meets minimum time, tempe	rature, pressure	5	*	21.		Toxic items stored, labeled, used		5
	5.	Regulated waste properly disposed		2			T	Premises maintained free of litter,	unnecessary articles,	
		WATER		The second		22	2	unauthorized personnel, animals,		1
*	6.	Water source approved, hot and cold un	ider pressure	5				equipment properly stored		
_		SEWAGE	1100000					TATTOO EQUIPMENT &	UTENSILS	
*	7.	Sewage and liquid waste disposal		5		23.		Properly installed, maintained, co	nstructed, designed	1
		PLUMBING			*	24		No reuse of single use articles		5
	8.	Installed, maintained		1		25.		Clean, free of abrasives and clean	ers	1
*	9.	Cross-connection, backflow, back-siphe	onage	5		26.		Aisles unobstructed		1
		TOILET/HANDWASHING FAC	ILITIES		Olu			TATTOO OPERATIONS		
*	10.	Installed, designed, number, convenient	t, available	5	*	27.	+	Good hygienic practices, proper h	andwashing	5
		Enclosed, tight-fitting doors, fixtures clean, toilet tissue,				28			and the second s	1
11.		covered receptacles, antibacterial soap, disposable towels/hand drying devices			*	29.		Employees with infectious lesions on hands restricted from tattooing		5
		GARBAGE & REFUSE DISPOS	AL	W-0	*	30.		Monthly microbiological monitor		5
	12.	Containers clean, adequate number, cov rodent proof. Outside storage area clea		1		31.		Tubes and needles sterilized in an Equipment sterilized for no more	than one (1) year.	5
-		covered, controlled incineration				32.	_	Work room equipped and restocke		5
		INSECT/RODENT CONTROL				33.	\rightarrow	Sterile instruments properly handle		5
*	13.	Presence/evidence of insects, rodents, h openings protected.	arborage—outer	5		34.	-	Reusable instruments properly has	naiea	5
_	_		UDNICHINGO		\vdash	35.	\rightarrow	Approved dyes or pigments		1
	14	FLOORS/WALLS/CEILINGS/F			-	36.	-	Tattoo log available	etta e Brader adamsta a	1
-	14.	Floors—constructed, drained, clean, go	ou repair	1		37.	•	Instructions provided on care of ta	moo/body piercing	1
-	3575	Walls—constructed, clean, good repair Ceilings/attached equipment—construc	ted clean good	1			1	ADMINISTRATION		T
	16.	repair	ico, ciciii, good	1		38.		Infections reported		0
	17.	Work area furnishings—sanitized between	een clients	1		39.		Current permit/license posted		0
18. Work area furnishings—clean, good repair 1				40.		Most current complete inspection	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	The state of the s	Ву	12 B	EHS
Date of Signature	04/23/24	Time in/out	10:40 AM 11:12 AM	

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Establishment Informa	ation		
Establishment Name: Prii	mordial Ink Tattoo		
Establishment Number:	665325005		
Observed Violations			
Total # 0			

Additional Comments

Permitted studio. Floor plan is consistant with plans submitted. Studio is ready to open and operate.

Will send a copy of permit and inspection to op.

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

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

Establishment Name: Primordial Ink Tattoo Establishment Number: 665325005			
Observed Violations (co	nt'd)		
Additional Comments (c	ont'd)		
Source Type: Water	Source: Murfreesboro 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





