

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

ESTABLISHMENT Electric Eye Tattoo				- 13	DATE 03/26/24	NUR			
LOCATION 5390 hwy 49 west				EST. NO. 665312879			100/10	100/100	
CITY, STATE, ZIPTYPEVanleerTN 37181Permanent					PURPOSE Routine				
PERMITTEE				- 1	FOLLOV REQUIR	SUNCT OF A DECK	1231 C		
PROHIBITED ACTS					LIGH	ITING			
	1. Minor clients, tattoo removal, unhealthy site		1	19		Adequate 1			
2. Licensed artist not on duty			1		VEN	VENTILATION			
PHYSICAL FACILITIES				20	20. Sufficient, installed, maintained 1				
3. Work area separated					GENERAL OPERATIONS				
* 4. Autoclave meets minimum time, temp	perature, pressure	5	+	21	. Toxic	Toxic items stored, labeled, used		5	
5. Regulated waste properly disposed		2			Premis	ses maintained fre	of litter, unnecessary articles,		
WATER		(1) - A.P.	22. unauthorized personnel, animals, clean, maintenan		animals, clean, maintenance,	1			
 6. Water source approved, hot and cold 	Water source approved, hot and cold under pressure				equipn	nent properly stor	stored		
SEWAGE				_	TAT	TOO EQUIPM	ENT & UTENSILS		
 Sewage and liquid waste disposal 				23	. Proper	Properly installed, maintained, constructed, designed			
PLUMBING			•	24	No reu	No reuse of single use articles 5			
8. Installed, maintained 1				25	. Clean,	Clean, free of abrasives and cleaners			
9. Cross-connection, backflow, back-siphonage 5				26	. Aisles	Aisles unobstructed 1			
TOILET/HANDWASHING FA	CILITIES		010	_	TATT	TOO OPERAT	IONS		
 10. Installed, designed, number, convenie 	10. Installed, designed, number, convenient, available		*	27	Good	Good hygienic practices, proper handwashing		5	
 Enclosed, tight-fitting doors, fixtures clean, toilet tissue, covered receptacles, antibacterial soap, disposable towels/hand drying devices 				28	24 AST 0 14 AST	Clean clothing, lap cloth used, spill kits available		1	
		1	-	29		Employees with infectious lesions on hands restricted from tattooing			
GARBAGE & REFUSE DISPOSAL			*	30	. Month	Monthly microbiological monitoring tests		5	
12. rodent proof. Outside storage area clo				31	* Equipt	Tubes and needles sterilized in an approved manner. Equipment sterilized for no more than one (1) year.		5	
covered, controlled incineration			-	32		Work room equipped and restocked as required			
INSECT/RODENT CONTROL			-	33		Sterile instruments properly handled		5	
 Presence/evidence of insects, rodents, openings protected. 	harborage outer	5	-	34		Reusable instruments properly handled Approved dyes or pigments		5	
FLOORS/WALLS/CEILINGS/FURNISHINGS				36		Tattoo log available		1	
14. Floors—constructed, drained, clean, good repair 1			-	37					
 14. Proofs Constructed, dramed, crean, g 15. Walls—constructed, clean, good repa 		1	<u> </u>	31		Instructions provided on care of tattoo/body piercing 1 ADMINISTRATION			
Cailings/attached aquinment constru	V	1	-						
16. repair				38	. Infecti	Infections reported		0	
				39	11	Current permit/license posted		0	
 Work area furnishings—clean, good r 	18. Work area furnishings-clean, good repair			40	. Most c	Most current complete inspection report available			

* Identifies critical items

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 imspection 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

WHEE CONTRACTOR AND A CONTRACTOR OF A DESCRIPTION
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La Str
KH TON
03/26/24
03/20/24

P	Fal		FUE
Time in/out	11:25 AM	11:50 PM	EHS

Date of Signature

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Establishment Information

Establishment Name: Electric Eye Tattoo Establishment Number : 665312879

Observed Violations

Total # 0

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

Additional Comments

Dutch bryant- 241119 Records up to date and correct. Studio clean and orderly. Has extra stock items including needles,tubes, ink, paper towels. No active work during inspection. Has lap cloths and spill kit available. All disposable items, no autoclave in use.

Tattoosbydutchb@gmail.com

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

Establishment Information

Establishment Name: Electric Eye Tattoo Establishment Number : 665312879

Observed Violations (cont'd)

Additional Comments (cont'd)

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







For more information, call your local health department https://www.tn.gov/health/health-program-areas/localdepartments.html

