Salon Application Instructions and Checklist

Please **read** instructions carefully **prior** to filling out application. **Application must be complete to process.**

**Include** on the application **all** items on the checklist. If not included, license **will** be delayed. **DO NOT USE WHITEOUT…APPLICATION WILL NOT BE PROCESSED. ONLY ORIGINAL APPLICATIONS WILL BE PROCESSED.**

- Money order or cashiers check or personal check **only** – **FEES ARE NON-REFUNDABLE.**
- Appropriate ownership box **completed** (by signing the application you are verifying that the ownership information is correct and true)
- If Corporation or LLC, list the registered name of the Corporation or LLC and **file number** given by the **Corporation Commission**.
- **All individual applicants for licensure in Arizona are required to provide legal proof of citizenship or alien status. Please see the information on the following pages regarding the necessary proof required.**

**All** applicable blanks completed including
- Name as registered with the Secretary of State
- Address of salon and applicable information (suite number is mandatory)
- Salon history filled out if applicable (if location was previously a salon), include the signature of the **previous** owner
- Signature of owner or owners

**Keep the Blood Spill Procedures and Rules in your salon for reference.**

**Only complete applications will be processed; a complete application includes all applicable supporting documents and fees. Failure to complete the application may result in withdrawal of application.**

1. A change in salon name, ownership, or location requires the submission of a new application with the appropriate fee ($110). **FEES ARE NON-REFUNDABLE.**
2. Salons must conform to all governmental requirements including zoning.
3. Ownership requires submittal of Federal Tax Identification number.

Owners must register salon name with the Secretary of State prior to submitting an application. If purchasing a salon **and trade name** from prior owner, list information on the application.
## SALON APPLICATION

Read and follow all instructions above.

### Check type of salon:
- Each license is $110 payable to
  - AZ Board of Cosmetology: **NO CASH**
  - Cosmetology Salon (includes practice of hair, nails & aesthetics)
  - Nail Technology Salon
  - Aesthetics Salon

### Check all that apply:
- **☐** New Salon
- **☐** Name Change
- **☐** Location Change
- **☐** Owner Change
- **☐** Salon within a Salon (one station only)*

### FILE OUT THE FOLLOWING COLUMN THAT APPLIES TO YOU

<table>
<thead>
<tr>
<th>INDIVIDUAL (see citizenship information)</th>
<th>PARTNERSHIP (see citizenship information)</th>
<th>CORPORATION OR LLC</th>
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#### FILL OUT THE FOLLOWING COLUMN THAT APPLIES TO YOU

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<tr>
<td>List all partners indicating General or Limited and enclose signed copy of partnership agreement.</td>
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#### CORPORATION OR LLC NAME

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<th><strong>FILE #:</strong></th>
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<td><strong>NAME</strong></td>
</tr>
<tr>
<td><strong>SS# / FEDERAL TAX ID NUMBER</strong></td>
<td><strong>NAME</strong></td>
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<tr>
<td><strong>LIST ADDITIONAL OWNERS ON LAST SHEET OF APPLICATION.</strong></td>
<td><strong>NAME</strong></td>
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#### Individual application:

- **Do you or will you have employees?**
  - **☐** Yes
  - **☐** No

*If owner is a Sole Proprietor with NO EMPLOYEES, a SSN is acceptable. If Owner has one or more employees, a Federal Tax ID No. is mandatory. I understand a Federal Tax Id number is required if I should obtain employees.

#### Partnership application:

- List partners indicating General or Limited and enclose signed copy of partnership agreement.

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#### Corporation or LLC application:

- **Name and Address of Corporate Contact Person:**

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#### Corporation application:

- **Does Corporation have authority to do business in Arizona?**
  - **☐** Y
  - **☐** N

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#### Corporation application:

- **Federal Tax identification number**

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**OFFICIAL USE ONLY**

**FEE RECEIVED**

| **FEE RECEIVED** | **_____________** |
HAVE YOU, ANY PARTNER, OR CORPORATE MEMBER EVER OWNED A LICENSED SALON IN ARIZONA OR ANY OTHER STATE WHOSE LICENSE WAS SUSPENDED OR REVOKED?  ( ) YES  ( ) NO

IF YES, GIVE DETAILS:________________________________________________________________________________________

PRINT SALON NAME HERE: _____________________________________________________________

The choice of salon name must be approved by the Secretary of State. Name of salon will be verified.

File number for registered name with Secretary of State or Corporation Commission: _______________

Secretary of State Office, Capitol Executive Tower, 1st Floor, 1700 W Washington St, Ste.103, Phoenix, Arizona. 602-542-6187 or 1-800-458-5842. Walking an application into the office results in same-day service; otherwise, plan on two to four week timeframe.

SALON REQUIREMENTS: If all following blanks are not completed, licensure will be delayed.

All future mail will be sent to this address unless otherwise indicated. (be sure to include suite number)

Salon Address:

<table>
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<tr>
<th>Address</th>
<th>City</th>
<th>Zip</th>
<th>Phone #</th>
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Date of proposed salon opening or change of ownership: ________________________________

Days and hours salon is open: _______________________________________________________

Will mobile services be performed out of this salon?  ( ) Yes  ( ) No  Mobile services require a duplicate license.

SALON HISTORY:

- If this location has been previously licensed or this is an ownership change, name of prior salon or license #: ______________________________________. Present OWNER selling the salon MUST sign below.

- If location change, old address or license #: ______________________________________

- If this application is for salon within a salon, present owner of main salon must sign below.

Signature of present owner for a salon within a salon or present owner selling the salon  __________________________  __________________________  __________________________

Print name

MAILING ADDRESS IF DIFFERENT FROM SALON: ____________________________________________

* Only one "salon within a salon" license may be issued for one station or area in a salon. A second licensee working at that station will be considered an "employee" of the actual station/salon owner and must have a personal license posted.
Signature below verifies that all requirements contained in A.A.C. R4-10-401 are met. Salons located in private residences must have a separate entrance and restroom for salon use only.

**Signature on application below indicates that all the following are in the salon**

- Separate shampoo bowl or sink
- Wet disinfectant
- Restroom
- Soiled linen containers
- Manager

**Signature on application below indicates the following is true:**

You as the owner of the salon have “Lawful Presence” at the address listed on the application as the salon location address. Signing the application verifies that you own or lease the location listed. (The lease must be in the owner’s name).

A signature below verifies that the information provided for this application is true and correct to the best of your knowledge, the salon owner knows and understands the laws and rules of the Board of Cosmetology, all rules and regulations are followed, and all necessary equipment is located in the salon.

Application must be signed by all owners. If a corporation or LLC, two people authorized to do business for the corporation must sign the application.

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**Printed name**

**Printed name**

**SIGNATURE (REQUIRED)**

**SIGNATURE OF CO-APPLICANT (if applicable)**

**ADDITIONAL OWNER’S NAMES (con’t from first page):**

**NAME**  **TITLE**  **ADDRESS**  **CITY**  **ZIP**

**NAME**  **TITLE**  **ADDRESS**  **CITY**  **ZIP**

**NAME**  **TITLE**  **ADDRESS**  **CITY**  **ZIP**

**NOTE:** All salon license renewals are due on or before the anniversary date of the first license as shown on the face of the license.

A. Renewal may be by check; send separate checks if renewing a personal license at the same time.

B. Renewal fee for all salons is $50.

C. If mailed after renewal date shown on your license, delinquent payment is $80.

See our web site for complete cosmetology laws, rules, proposed updates, and mandated changes.

If you have a disability and require reasonable accommodations to participate in our services including receiving this information in an alternative format, contact the ADA Coordinator at 480-784-4539.
Following is information critical to a salon owner and includes infection protection rules (including foot-spa cleaning procedures), rules governing salons, and blood spill procedures.

**Display of Licenses and Signs R4-10-111**

A. The name on an establishment's exterior sign, advertising, and publications shall be the same as the name on the establishment license issued by the Board. The establishment's exterior sign shall contain lettering at least 2 1/2 inches in height.

B. A school shall prominently post a class schedule that lists the names of instructors and classes. The school shall display the school and instructor licenses near the school entrance, visible to the public.

C. A salon shall prominently post the salon license and ensure that the personal license of each licensee performing services in the salon is posted at the licensee's station.

D. A licensee performing mobile services shall prominently display a duplicate personal and establishment license in the area where mobile services are provided. The licensee's original license shall be prominently displayed in the salon from which the licensee was dispatched in accordance with subsection (C).

E. A copy of R4-10-112 shall be prominently posted in each establishment.

F. A salon shall prominently post a notice of salon services that are not regulated by the Board and that are provided at the salon.

**R4-10-112. Infection Control and Safety Standards**

A. An establishment shall have and maintain the following minimum equipment and supplies:
   1. Non-leaking, waste receptacles, which shall be emptied, cleaned, and disinfected daily;
   2. Ventilated containers for soiled linens including towels and capes;
   3. Closed, clean containers to hold clean linens including towels and capes;
   4. A covered, wet disinfectant container made of stainless steel or a material recommended by the manufacturer of the wet disinfectant that:
      a. Is large enough to contain sufficient disinfectant solution to allow for the total immersion of tools and instruments,
      b. Is set up with disinfectant at all times the establishment is open, and
      c. Is changed as determined by manufacturer’s instructions or when visibly cloudy or contaminated;
   5. An Environmental Protection Agency (EPA)-registered bactericidal, virucidal, fungicidal, and pseudomonacidal (formulated for hospitals) disinfectant which shall be mixed and used according to manufacturer’s directions on all tools, instruments, and equipment, except those that have come in contact with blood or other body fluids; and
   6. An EPA-registered disinfectant that is effective against HIV-1 and Human Hepatitis B Virus or Tuberculocidal which shall be mixed and used according to the manufacturer’s directions on tools, instruments, and equipment that come in contact with blood or other body fluids.

B. Procedure for disinfecting non-electrical equipment.
   1. Non-electrical equipment shall be disinfected by cleaning with soap or detergent and warm water, rinsing with clean water, and patting dry; and
   2. Totally immersing in the wet disinfectant required under subsection (A)(5) or (A)(6) following manufacturer’s recommended directions.

C. Procedure for storage of tools and instruments.
   1. A tool or implement that has been used on a client or soiled in any manner shall be placed in a properly labeled receptacle; and
   2. A disinfected implement shall be stored in a disinfected, dry, covered container and isolated from contaminants.

D. Procedure for disinfecting electrical equipment, which shall be in good repair, before each use.
   1. Remove all foreign matter;
   2. Clean and spray or wipe with a disinfectant, compatible with electrical equipment, as required in subsection (A)(5) or (A)(6); and
   3. Disinfect removable parts as described in subsection (B).

E. Tools, instruments and supplies.
   1. All tools, instruments, or supplies that come into direct contact with a client and cannot be disinfected (for example, cotton pads, sponges, porous emery boards, and neck strips) shall be disposed of in a waste receptacle immediately after use;
   2. Disinfected tools and instruments shall not be stored in a leather storage pouch;
   3. A sharp cosmetology tool or implement that is to be disposed of shall be sealed in a rigid, puncture-proof container and disposed of in a manner that keeps licensees and clients safe;
   4. An instrument or supply shall not be carried in or on a garment while practicing in the establishment;
   5. Clips or other tools and instruments shall not be placed in mouths, pockets, or other unsanitized holders;
   6. Pencil cosmetics shall be sharpened before each use;
   7. All supplies, equipment, tools, and instruments shall be kept clean, disinfected, free from defects, and in good repair;
   8. Cutting equipment shall be kept sharp; and
   9. A client’s personal cosmetology tools and instruments that are brought into and used in the establishment shall comply with these rules.
F. If there is a blood spill or exposure to other body fluids during a service, licensees and students shall stop the service and:
1. Before returning to service, clean the wound with an antiseptic solution;
2. Cover the wound with a sterile bandage;
3. If the wound is on a licensee’s or student’s hand in an area that can be covered by a glove or finger cover, the licensee or student shall wear a clean, fluid-proof protective glove or finger cover. If the wound is on the client, the licensee or student providing service to the client shall wear gloves on both hands;
4. Blood-stained tissue or cotton or other blood-contaminated material shall be placed in a sealed plastic bag and that plastic bag shall be placed into another plastic bag (double bagged), labeled with a red or orange biohazard warning, and discarded;
5. All equipment, tools, and instruments that have come in contact with blood or other body fluids shall be disinfected as discussed in subsections (A)(5) or (6); and
6. Electrical equipment shall be disinfected as discussed in subsection (D).

G. All circulating and non-circulating tubs or spas shall be cleaned as follows using the disinfectant in subsection (A)(6) or (6):

1. After each client or service, complete all of the following:
   a. Drain the tub;
   b. Clean the tub according to manufacturer’s instructions, taking special care to remove all film, especially at the water line;
   c. Rinse the tub;
   d. Fill the tub with water and disinfectant as in subsection (A)(5) or (6); and
   e. Allow the disinfectant to stand for non-circulating tubs or to circulate for circulating tubs for the time specified in manufacturer’s instructions.
2. At the end of the day, complete all of the following:
   a. Remove all filters, screens, drains, jets, and other removable parts;
   b. Scrub with a brush and soap or detergent until free from debris;
   c. Rinse;
   d. Completely immerse in the solution described in subsection (A)(5);
   e. Rinse;
   f. Air dry; and
   g. Replace the disinfected parts in the tubs or store in a disinfected, dry, covered container.

H. Personal cleanliness.
1. A licensee or student shall thoroughly wash his or her hands with soap and warm water or any equally effective cleansing agent immediately before providing services to each client, before checking a student’s work on a client, or after smoking, eating, or using the rest room;
2. A licensee or student shall wear clothing and shoes;
3. A client's skin upon which services will be performed shall be washed with soap and warm water or wiped with disinfectant or waterless hand cleanser approved for use on skin before a nail technology service, including a pedicure service, is provided; and
4. A licensee or student shall wear clean, fluid-proof protective gloves while performing any service if any bodily discharge is present from the licensee, student, or client or if any discharge is likely to occur from the client because of services being performed.

I. Disease and infestation.
1. A licensee or student who has a contagious disease, shall not perform services on a client until the licensee or student takes medically approved measures to prevent transmission of the disease; and
2. Services shall not be performed on an individual who has a contagious disease that may be transmitted by the performing of the services on the individual.

J. Client protection.
1. A client's clothing shall be protected from direct contact with shampoo bowls or headrests by the use of clean linens, capes, robes, or protective neck strips;
2. Infection control shall be maintained and services shall be performed safely to protect the licensee or student and client;
3. Double bracing shall be used around a client's eyes, ears, lips, fingers, and toes; and
4. A client shall receive a pre- and post-analysis that includes appropriate instructions for follow-up.

K. Care and storage of linens including towels, robes, and capes.
1. Clean linens shall be provided for each client and laundered after each use;
2. Soiled linens shall be stored in a ventilated receptacle;
3. Laundering shall include disinfecting linens by use of clean linens, capes, robes, or protective neck strips;
4. Clean linens shall be stored in closed containers or closets.

L. Care and storage of products including liquids, creams, powders, cosmetics, chemicals, and disinfectants.
1. All products shall be stored in a container that is clean and free of corrosion and labeled to identify contents, in compliance with state and local laws and manufacturer’s instruction;
2. All products containing poisonous substances shall be distinctly marked;
3. When only a portion of a cosmetic product is to be used, the portion shall be removed from the container in a way that does not contaminate the remaining product; and
4. Once dispensed, a product shall not be returned to the original container.

M. Prohibited hazardous substances and use of products.
1. An establishment shall not have on the premises cosmetic products containing hazardous substances banned by the U.S. Food and Drug Administration (FDA) for use in cosmetic
products, including liquid methyl methacrylate monomer and methylene chloride; and

2. Product shall be used only in a manner approved by the FDA.

N. Care of headrests, shampoo bowls, and treatment tables.

1. Headrests of chairs and treatment tables shall be disinfected at least daily and treatment tables covered with a clean linen or paper sheet for each client;

2. Shampoo bowls and neck rests shall be cleansed with soap and warm water or other detergent after each use and kept in good repair; and

3. Shampoo neck rests shall be disinfected with a solution described in subsection (A)(5) or (A)(6) before each use.

O. Prohibited devices, tools, or chemicals; invasive procedures.

1. Except as provided in this subsection and subsection (O)(2), all of the following devices, tools, or chemicals are prohibited from being present in or used in a salon:
   a. A devise, tool, or chemical that is designed or used to pierce the dermis; and
   b. A low-frequency, or low-power ultrasonic, or sonic device except one intended for skin cleansing, exfoliating, or product application.

2. A salon or licensee that provides an invasive procedure, using a device, tool, or chemical described in subsection (O)(1), that is otherwise allowed under Arizona law shall ensure that the performance of the procedure complies with statutes and rules governing the procedure, training, or supervision as required by the relevant, regulatory authorities.

P. Skin peeling.

1. Except as provided in subsections (O)(1) and (O)(2), only the non-living, uppermost layer of skin, known as the epidermis, may be removed by any method or means and only for the purpose of beautification;

2. A skin removal technique or practice that affects the dermal layer of the skin is prohibited;

3. Skin removal products shall not be mixed or combined except as required by manufacturer instructions and approved by the FDA; and

4. Only commercially available products for the removal of epidermis for the purpose of beautification shall be used.

Q. Restricted use tools and instruments.

1. Nippers shall be used only to remove loose cuticles; and

2. Pre-sterilized, disposal lancets shall be used only to dilate follicles and release sebaceous debris from the follicle.

R. Cleanliness and repair of the establishment shall be maintained according to the following guidelines.

1. After each client, hair and nail clippings shall immediately be discarded;

2. All areas of the establishment, including storerooms and passageways, shall be well lighted, ventilated, and free from infectious agents;

3. Floors, walls, woodwork, ceilings, furniture, furnishings, and fixtures shall be clean and in good repair;

4. Shampoo bowls shall be clean and disinfected by using a disinfectant discussed in subsection (A)(5) or (A)(6) and drains shall be free running;

5. Counters and all work areas shall be disinfected after each client by using a disinfectant discussed in subsection (A)(5) or (A)(6); and

6. Waste or refuse shall be removed timely so there is no accumulation.

S. Building standards.

1. There shall be a direct entrance from the outside, not through living quarters, into the establishment;

2. If connected to a residence, all passageways between the living quarters and the establishment shall have a door that remains closed during business hours;

3. The establishment shall not be used for residential or other living purposes;

4. The establishment shall have a restroom for employees’ and clients’ use during business hours that has a wash basin, running water, liquid soap, and disposable towels; is kept clean and sanitary at all times; is in close enough proximity to the salon to ensure safety for cosmetology procedures during use; and is open and available for use by employees and clients of the salon;

5. Any excess material stored in a restroom shall be in a locked cabinet;

6. The establishment shall have hot and cold running water;

7. A mobile unit shall have sufficient water at all times; and

8. The establishment shall have natural or mechanical ventilation and air filtration system that provides free flow of air to each room, prevents the build-up of emissions and particulates, keeps odors and diffusions from chemicals and solutions at a safe level, and provides sufficient air circulation and oxygen.

T. General requirements.

1. The establishment shall have a first-aid kit that contains, at a minimum, small bandages, gauze, antiseptic, and a blood-spill kit that contains disposable bags, gloves, and hazardous waste stickers;

2. No bird or animal, except fish aquariums and service animals, are allowed in the establishment; and

3. The establishment shall comply with federal and state requirements.

I. An establishment shall not have on the premises cosmetic products containing hazardous substances banned by the U.S. Food and Drug Administration (FDA) for
The following 2 pages must be posted in the salon at all times.

BLOOD SPILL PROCEDURE

IF A BLOOD SPILL SHOULD OCCUR, THE FOLLOWING STEPS MUST BE FOLLOWED:

♦ SUPPLY INJURED PARTY WITH LIQUID STYPTIC/ANTISEPTIC AND THE APPROPRIATE DRESSING TO COVER THE INJURY.
♦ DOUBLE BAG ALL BLOOD-SOILED (CONTAMINATED) ARTICLES AND LABEL WITH RED OR ORANGE BIOHAZARD WARNING. This is the responsibility of the licensee and should be executed as follows:

LICENSEE INJURY

1. PROTECTION – If a cut is sustained, stop the service and clean the injured area.
2. APPLY antiseptic and/or liquid or spray styptic as appropriate. *
3. DRESSING – cover the injury with the appropriate dressing.
4. COVER with finger guard or glove as appropriate.
5. CLEAN model/client and station as appropriate.
6. DOUBLE BAG and dispose of all contaminated objects; clean hands with antimicrobial cleanser, and
7. RETURN to service.

CLIENT INJURY

1. STOP service,
2. GLOVE hands of licensee,
3. CLEAN injured area as appropriate,
4. APPLY antiseptic and/or liquid or spray styptic as appropriate, *
5. COVER the injury with appropriate dressing to prevent further blood exposure,
6. DOUBLE BAG and dispose of all contaminated objects; clean hands with antimicrobial cleanser, and
7. RETURN to service.

♦ DOCUMENT INCIDENT IN BLOOD SPILL LOG.

* DO NOT ALLOW CONTAINERS, BRUSHES, NOZZLES OR LIQUID STYPTIC TO TOUCH THE SKIN OR CONTACT THE WOUND. USE A DISPOSABLE APPLICATOR.

Adopted as amended/ August 17, 1998 by NIC
WET DISINFECTION STANDARD

1. All tools and implements, except those which come in contact with blood or body fluids must be disinfected by complete immersion in an EPA registered, bactericidal, virucidal, fungicidal, and pseudomonacidal (formulated for hospitals) disinfectant that is mixed and used according to the manufacturer’s directions.

2. All tools and implements which have come in contact with blood or body fluids must be disinfected by complete immersion in an EPA registered disinfectant that is effective against HIV-1 and Human Hepatitis B Virus or Tuberculocidal that is mixed and used according to the manufacturer’s directions.

STORAGE STANDARD

Disinfected implements must be stored in a disinfected, dry and covered container.
Per A.R.S. 41-1080 effective October 1, 2008 all sole owner license applications shall provide proof that their presence in the United States is authorized under Federal law by presenting one of the following:

1. An Arizona driver license issued after 1996 or an Arizona non-operating identification license.
2. A driver license issued by a state that verifies lawful presence in the United States, dated 2000 and beyond. States for which licenses are not acceptable are: Hawaii, Maryland, Massachusetts, Michigan, New Mexico, North Carolina, Oregon, Texas, Utah, and Washington, as these States do not verify lawful presence in the United States.
3. A birth certificate or delayed birth certificate issued in any state, territory or possession of the United States.
5. A United States passport.
6. A foreign passport with a United States visa.
7. An I-94 form with a photograph.
8. A United States citizenship and immigration services employment authorization document or refugee travel document.
10. A United States certificate of citizenship.
11. A tribal certificate of Indian blood.
12. A tribal or bureau of Indian affairs affidavit of birth.

B. This section does not apply to an individual, if all of the following apply:

1. The individual is a citizen of a foreign country or, if at the time of application, the individual resides in a foreign country.
2. The benefits that are related to the license do not require the individual to be present in the United States in order to receive those benefits.

C. If, pursuant to subsection A, an individual has affirmatively established citizenship of the United States or a form of non-expiring work authorization issued by the federal government, the individual, on renewal or reinstatement of a license, is not required to provide subsequent documentation of that status.

D. If, on renewal or reinstatement of a license, an individual holds a limited form of work authorization issued by the federal government that has expired, the individual shall provide documentation of that status.

E. If a document listed in subsection A, paragraphs 1 through 12 does not contain a photograph of the individual, the individual shall also present a Government issued document that contains a photograph of the individual.

F. For the purposes of this section:

1. "Agency" means any agency, department, board or commission of this state or any political subdivision of this state that issues a license for the purposes of operating a business in this state.
2. "License" means any agency permit, certificate, approval, registration, charter or similar form of authorization that is required by law and that is issued by any agency for the purposes of operating a business in this state.
ARIZONA STATEMENT OF CITIZENSHIP AND ALIEN STATUS FOR STATE PUBLIC BENEFITS
Professional License and Commercial License

Arizona State Board of Cosmetology

Title IV of the federal Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (the "Act"), 8 U.S.C. § 1621, provides that, with certain exceptions, only United States citizens, United States non-citizen nationals, non-exempt "qualified aliens" (and sometimes only particular categories of qualified aliens), nonimmigrants, and certain aliens paroled into the United States are eligible to receive state or local public benefits. With certain exceptions, a professional license and commercial license issued by a State agency is a State public benefit.

Arizona Revised Statutes § 1-501 requires, in general, that a person applying for a license must submit documentation to the licensing agency that satisfactorily demonstrates that the applicant is lawfully present in the United States.

Directions: All applicants must complete the Sections below. Submit this completed form and copy of one or more documents that evidence your citizenship or alien status with your application for license or renewal.

SECTION I — APPLICANT INFORMATION

APPLICANT’S NAME (Print or type) ___________________________ DATE ________________

TYPE OF APPLICATION (check one) ___ INITIAL APPLICATION  ___ RENEWAL

TYPE OF LICENSE ____________________________

CITIZENSHIP OR NATIONAL STATUS DECLARATION

Directions: Attach a legible copy of the front, and the back (if any), of a document from the attached List A or other document that demonstrates U.S. citizenship or nationality. Name of document provided: ____________________________

A. Are you a citizen or national of the United States? (Check one) ___ Yes  ___ No

B. If the answer is “Yes,” where were you born? List city and state (or equivalent), and country.
   City __________________ State (or equivalent) _________________ Country or Territory ______________

If you are a citizen or national of the United States, go to Section IV. If you are not a citizen or national of the United States, please complete Sections III and IV.

DECLARATION

All applicants must complete this section. I declare under penalty of perjury under the laws of the state of Arizona that the answers I have given are true and correct to the best of my knowledge.

APPLICANT’S SIGNATURE ___________________________ TODAY’S DATE ________________