



# County of San Diego

DEPARTMENT OF ENVIRONMENTAL HEALTH  
FOOD AND HOUSING DIVISION

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Plan Check Scheduling Line: (858) 999-8920



## Body Art Plan Check - Plan Checklist

This checklist will help you prepare the plan submission for your body art facility. Ensure that the items listed below are clearly shown on the plans. Three (3) identical sets of plans are required to be submitted to this department. Plans must include a floor plan of the layout drawn to scale. Indicate the scale that you used to draw your plans, for example: 1/4"= 1 ft.

### ✓ Check the following items as you include them on the plans.

- 1 **Location:** Indicate the name and address of the facility.
- 2 **Owner:** Indicate the name and contact number of the owner.
- 3 **Rooms:** Identify all rooms in the facility, including restroom, treatment rooms, waiting areas, etc.
- 4 **FINISH SCHEDULE:** List the finish materials for the floors, walls, and ceilings in the procedure areas, body piercing rooms and restroom, as well as those for the decontamination and sterilization rooms (if required).
- 5 **WATER HEATER:** State the make, model number, energy input in BTU/KW, and location of the water heater.
- 6 **HAND SINK:** Indicate the location of the hard-plumbed hand sink placed outside of the restroom for practitioner's use in procedure area. Indicate whether the hand sink will have wrist-operated handles or a foot pedal. Show the location of hands-free soap and paper towel dispensers for all hand sinks.
- 7 **RESTROOM:** Indicate the location of the restroom for the practitioner's use. Indicate whether it has an exhaust fan or a window with screen that can be opened for ventilation.
- 8 **Equipment:** Show the locations of all treatment room chairs, tables, counters, supply cabinets, tool boxes, Mayo stands, etc. List the finish materials for all the equipment used in the treatment room (e.g. stainless steel, vinyl, etc.)
- 9 **MOP SINK OR CLEANING METHOD:** Show the location of mop sink or provide a standard operating procedure for the proposed method to sanitize the floor. Ensure that the mop sink faucet has an atmospheric vacuum breaker, as required.
- 10 **SHARPS CONTAINER:** Show the location of the bio-hazard sharps containers.

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- \_\_\_\_\_ **11 TRASH CANS:** Show the location of the trash cans with lids in the procedure area.
- \_\_\_\_\_ **12 DECONTAMINATION ROOM OR DISPOSABLE EQUIPMENT:** Show the location of the decontamination room if using multi-use equipment or indicate that only disposable equipment will be used. Decontamination rooms must have a dirty side and clean side; they must also have a stainless steel wash sink with hot and cold running water. Indicate the size of the sink (minimum 18" x 18" x 10"). A steam autoclave is also required for a clean room.
- \_\_\_\_\_ **13 PIERCING:** If the facility is conducting piercing, show the location of the piercing area.
- \_\_\_\_\_ **14 Separation:** Show on the plans that the waiting area is separate from the procedure area. The procedure area must also be separated from hair and nail grooming activities.
- \_\_\_\_\_ **15 Privacy Screening:** Indicate the method and materials that will provide privacy for customers when performing discretionary tattoos or piercings (e.g. vinyl screens, painted drywall, etc.).

## **Instructions after your plans are approved:**

**Mid Inspection:** Once the plans are approved, facility construction may begin. Call the plan check scheduling line at 858-505-6660, 5-10 business days in advance to schedule your mid inspection for when the facility is 50-80% complete.

## **Prior to the Final Inspection:**

- Apply and pay for an operational health permit after the mid inspection is complete.
- Submit your completed Infection Prevention Control Plan to our office before your Final Inspection.
- Obtain all necessary permits and approval to operate including from the building and fire departments (if new construction).
- Call the plan check scheduling line at 858-505-6660, 5-10 business days in advance to schedule your final inspection for when the facility is 100% complete.

## **Items for the Final Inspection:**

- All practitioners must be registered and have completed their Blood Borne Pathogen training.
- Complete all work per plan.
- Ensure to have soap and paper towels stocked in the dispensers and adequate hot and cold water in the facility. All equipment and supplies, including autoclave, should be ready and available for inspection.

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