



# City of Meriden, Connecticut

DEPARTMENT OF HEALTH & HUMAN SERVICES

Lea Crown, MPH  
Director of Health and Human Services

165 Miller Street  
Meriden, CT 06450-4283  
Telephone (203) 630-4226  
Fax (203) 639-0039

## Barbershop, Hairdressing and Cosmetology Shops License Application

Establishment Name: \_\_\_\_\_

Address of Establishment \_\_\_\_\_ Business Phone: \_\_\_\_\_

Owner's Name: \_\_\_\_\_ Home/Cell Phone: \_\_\_\_\_

Owner's Address: \_\_\_\_\_ Email: \_\_\_\_\_

### Water Supply

- Public
- Private (well)

### Sewage Disposal

- City Sewer
- Private (Septic System)

### Days/Hours of Operation

Monday		Friday	
Tuesday		Saturday	
Wednesday		Sunday	
Thursday			

### Type of Establishment: (check all that apply)

- Barbershop
- Skin Care/Treatment
- Eyelashes
- Nail Salon
- Beauty /Hair Salon
- Hair Removal/Waxing

### Services Offered: (check all that apply)

- Hairdressing
- Barbering
- Nails
- Manicures
- Pedicures
- Eyelashes
- Esthetics
- Hair Removal/Waxing

Number of Workstations: \_\_\_\_\_ Number of Barbers/Hairdressers/Nail technicians employed: \_\_\_\_\_

**Provide a list of all establishment employees with a copy of all applicable current State of Connecticut licenses and photo ID:** (Use additional forms if needed)

### Name and Copy of License/Id

- |                                   |                                   |                                    |
|-----------------------------------|-----------------------------------|------------------------------------|
| 1. _____ <input type="checkbox"/> | 5. _____ <input type="checkbox"/> | 10. _____ <input type="checkbox"/> |
| 2. _____ <input type="checkbox"/> | 6. _____ <input type="checkbox"/> | 11. _____ <input type="checkbox"/> |
| 3. _____ <input type="checkbox"/> | 7. _____ <input type="checkbox"/> | 12. _____ <input type="checkbox"/> |
| 4. _____ <input type="checkbox"/> | 8. _____ <input type="checkbox"/> | 13. _____ <input type="checkbox"/> |

**Fees:**

Annual salon license:	\$100
Plan Review:	\$50
Re-inspections:	\$25
Application Late fee (after June 30)	\$25

Chapter 70 of the code of the City of Meriden pertaining to Barbershops, Hairdressing and Cosmetology Shops states that an annual inspection and a license fee of \$100 is required. If during inspections or in response of a complaint, major violations are found, termination or suspension of the license may be ordered.

The license is valid for one year (July 1<sup>st</sup> of current year through June 30<sup>th</sup> of the following year), and is **not transferable**. Environmental Health must be notified prior to any changes of ownership, remodels or closing of business.

The Undersigned agrees to comply with the Regulations of the State of Connecticut and the Code of the City of Meriden.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Print Name:** \_\_\_\_\_ **Title:** \_\_\_\_\_

**Complete and Return with Payment by June 30<sup>th</sup>.**  
 Meriden Department of Health and Human Services  
 Environmental Health Office  
 165 Miller St. Meriden, CT 06450  
 (203) 630-4226  
 FAX: (203) 639-0039

<b>Signatures required for new facility license</b>	
<b><u>Office</u></b>	<b><u>Signature &amp; Date</u></b>
Fire marshal	
Building	
Zoning	
Tax Department	

**Office use only**

Date \_\_\_\_\_

Amount Paid. \_\_\_\_\_

Receipt# \_\_\_\_\_

Employee Initials \_\_\_\_\_



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## Barbershop, Hairdressing and Cosmetology Shop Plan Review Application

The following items must be submitted with the application and the \$50 plan review fee.

Please fill out this form completely.

1. A floor plan drawn to scale of not less than ¼ inch to one foot. The plan must include locations of stations, shampoo stations, hand sinks, utility sink, pedicure stations, mop sink, toilets, cabinets and storage space and laundry ( if applicable) etc. clearly labeled.
2. Provide surface materials for floors/walls and a complete finish schedule for each room (include floors, ceilings, walls and cove base junctures).
3. All separate rooms offering services must be on the plan, which must include a hand wash sink.
4. A complete set of equipment specifications with type and model numbers.
5. Room sizes, aisle and equipment space and other appropriate dimensions.
6. Provide Connecticut issued license(s) to perform proposed services for each employee/renter and a copy of their individuals' driver's license/photo id.
7. Fill out Barbershop, Hairdressing and Cosmetology Shop License Application and pay applicable license fee (\$100).
8. Obtain approval signatures from each municipal department (Building, Fire Marshall, Zoning, Tax).
9. Include procedures and protocol for disinfecting of equipment.

### Type of Service (check all that apply)

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> Barbershop          | <input type="checkbox"/> Beauty/Hair Salon | <input type="checkbox"/> Nail Salon          |
| <input type="checkbox"/> Skin Care/Treatment | <input type="checkbox"/> Eyelashes         | <input type="checkbox"/> Hair Removal/Waxing |
- 
- |   |                                  |  |
|---|----------------------------------|--|
| <input type="checkbox"/> New Construction | <input type="checkbox"/> Remodel | <input type="checkbox"/> Change in Use (existing facility) |
|---|----------------------------------|--|

Name of Establishment: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Town, State, Zip \_\_\_\_\_

Owner of Establishment \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Town, State, Zip \_\_\_\_\_

Our office has **7 to 10 business days** to review and respond.

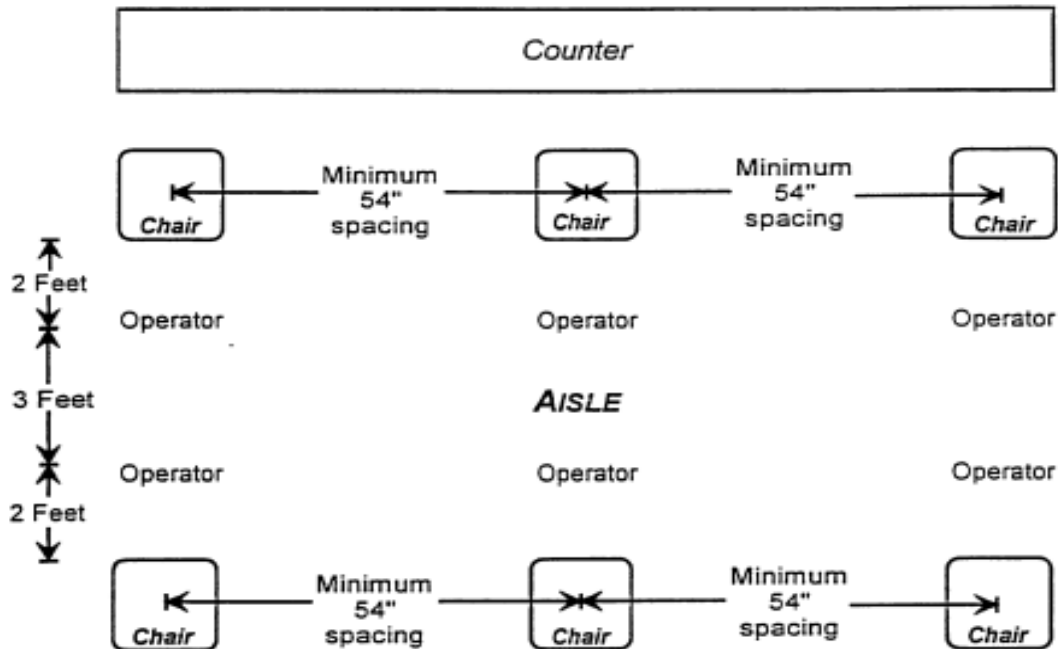
**Inspection(s):** Request for inspection should be made to the Meriden Health and Human Services Department:

1. At completion of floor and equipment installation.
2. Prior to opening.

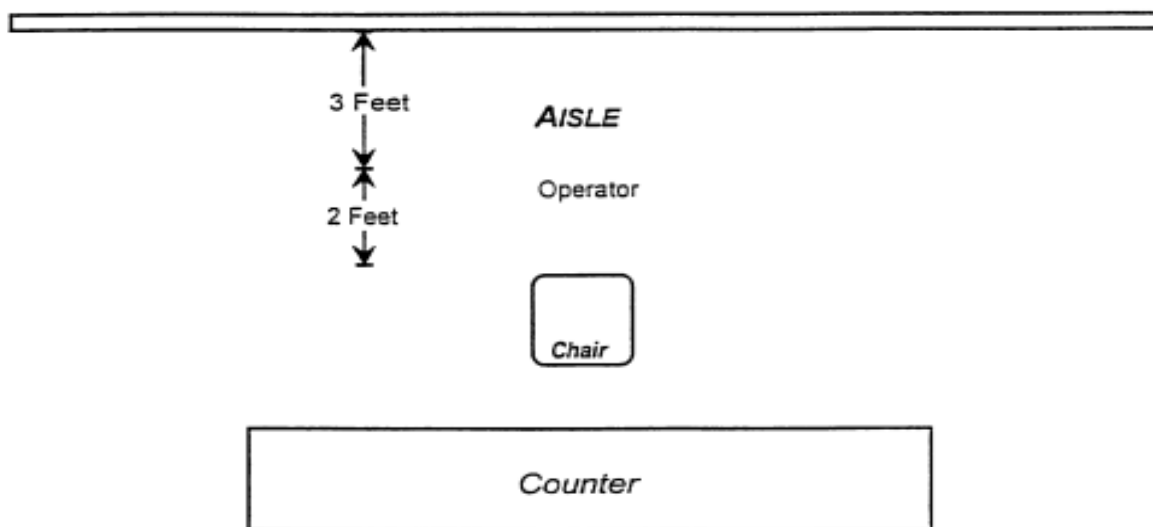
Please schedule the inspection at least 3 business days in advance.  
You may request additional site visits at any time during the construction process.

# Schematic Example for Proper Design of Floor Plan Barbershops, Hairdressing and Cosmetology Shops

**Diagram Xa: Work Stations back-to-back**



**Diagram Xb: Work Station abuts wall**





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## **Barbershop, Hairdressing and Cosmetology Shop Plan Review Checklist**

- Floor plan drawn to scale of not less than ¼ inch to one foot showing location of all equipment and facilities.
- Source of water supply (city sewer or well)
- Backflow protection devices provided on shampoo sinks
- Hot water provided 85-115° F
- Method of sewage disposal (city sewer or septic system)
- Utility sink provided for cleaning equipment
- Adequate hand washing sinks provided (restrooms, private treatment rooms, and work areas). Dispensed soap and paper towels provided at each sink
- Floors/walls constructed of non-porous, easily cleanable material in hair cutting, hair tinting and shampooing areas or where chemicals for bleaching hair are used. Carpeting or similar floor covering is acceptable for patron wait area only
- Adequate lighting provided
- Adequate ventilation provided to remove excess heat and odors. Salon ventilation shall comply with state and local building codes and ordinances
- If shampoo bowls are provided, there shall be a minimum of one shampoo bowl for every three barbers/hairdressers
- A mop sink provided for cleaning the facility
- Proper linen/towel storage provided with tight fitting doors
- Covered receptacle provided for used towels and gowns
- Fire retardant container provided for chemically soiled towels and linens
- Covered containers for hair dropping, paper and other waste material
- Covered refuse receptacle provided in ladies restroom
- Adequate toilet facilities provided in accordance with Building Code requirements. Dispensed soap and paper towels provided
- Workstation chairs 54" center to center (see diagram on page 2.)
- Two-foot workspace provided behind each work station chair (see diagram on page 2.)
- Three-foot aisles provided separate from work areas (see diagram on page 2.)
- Commercial linen service provided or laundering done on premises (EPA registered disinfecting/sanitizing agent provided when washing towels and linens)

