



HEALTHY NAIL SALON REGISTRATION

CERTIFICATION CRITERIA

- 1. Choose nail polishes that do not contain the toxic trio (dibutyl phthalate, toluene, formaldehyde).
2. Use safer nail polish removers that do not contain ethyl or butyl acetate. Acetone remover is approved for use.
3. Avoid using nail polish thinners. Do not use thinners that contain toluene or methyl ethyl ketone (MEK).
4. All nail salon staff must use gloves when using nail products (removing nail polish, providing acrylic nail services).
5. Ventilate the salon to improve air quality. Designate a specific area for artificial nail services (gel & acrylic) and properly ventilate the area.
6. Install an approved mechanical ventilation unit within one year of entering the Program, if one does not exist already. Change the ventilation unit at least once a year, or based on the manufacturer's recommendation.
7. Train all nail salon staff (owners, managers, contract employees) on safer products and practices using the Healthy Nail Salon Program training guide.
8. Allow San Mateo County staff to monitor air quality within the salon.
9. Be committed to trying and adopting safer artificial nail products.
10. Do not allow customers to bring in products unless it meets Program criteria.

CONTACT INFORMATION:

Legal Name of Business: _____ Name of Owner: _____
Business Address: _____ Name of Manager: _____
City: _____ Zip Code: _____ Business Phone: _____
Email Address: _____ Mobile Phone: _____
Primary Language Spoken: [] English [] Vietnamese [] Other: [] Can we text you?

GENERAL BUSINESS INFORMATION

Years in Business: _____ # of Full Time Staff: _____ # of Part Time Staff: _____

SALON PRACTICES

Do you have MSDS/SDS (Safety Data Sheets) for all nail salon products? [] Yes [] No
Do you purchase nail salon supplies at a beauty store? [] Yes [] No
Do you purchase supplies through a distributor? [] Yes [] No
Do you have a ventilation unit in your salon? [] Yes [] No

By submitting this form, I agree to (check all):

- [] Participate in the Healthy Nail Salon Recognition Program
[] Commit to meeting eligibility requirements (nail polish, acrylic powders, keep ventilation unit on when doing acrylic nails)

Signature of Owner: _____ Date: _____