

TEXAS DEPARTMENT OF LICENSING & REGULATION

P.O. Box 12157 • Austin, Texas 78711-2157 • FAX (512) 583-7148 inspectionrequest@tdlr.texas.gov • www.tdlr.texas.gov

BARBERING & COSMETOLOGY PROGRAM

WHIRLPOOL FOOT SPA INSTRUCTIONS

CLEANING AND DISINFECTION RECORD

IMPORTANT: You must maintain a separate record for EACH whirlpool foot spa/chair.

1. Complete the Top Portion of the Record by Entering:

- a. Establishment or School Name
- b. Establishment or School License Number
- c. Establishment or School Address
- d. Whirlpool Foot Spa/Chair Number (Example: Chair #1, Chair #2, Chair #3)

2. "When and Who" Section of Record

- a. Each numbered row (e.g. 1, 2, 3) on the record represents a single cleaning and disinfection
- b. Enter date and time spa was cleaned and disinfected
- c. Enter staff name who cleaned and disinfected spa

3. "Cleaned and Disinfected" Section of Record

- a. Place an **X** in correct box
- b. Note that several entries may be made on the same date
- c. If no pedicure services were performed with that spa during an individual workday:
 - · Fill in the date
 - Check the "Not Used" box
- d. If pedicure services were performed and the spa was cleaned,

check the "Portable Jet Used & Cleaned" box, in addition to any other relevant boxes

- e. Entry must be made at time of cleaning and disinfection
 - After each client
 - · At the end of each day
 - · Bi-weekly

SAMPLE RECORD

Barbering & Cosmetology Program

WHIRLPOOL FOOT SPA CLEANING AND DISINFECTION RECORD (TAC 83.108)					
Establishment/School Name:	TDLR Barber Shop	Establishment/School License Number:	#000123		
Establishment/School Address:	1235 State Road, Austin TX 78701	Basin/Tub Number:	3		

	WHEN	I	wнo	CLEANED and DISINFECTED Place X in Correct Box or Boxes					
	DATE MM/DD/YYYY	TIME a.m. or p.m.	FULL NAME (Please Print)	Not Used	Portable Jet Used & Cleaned	After Each Client	End of Day	Bi-Weekly	
1	- 06/10/2022	03:20pm	Jane Deaux			X			
2	06/10/2022	04:15pm	Debbie Johnson			X	X		
3	06/12/2022	08:45am	Patty Nguyen	X					
4	06/15/2022	ງ9:30am	John Deaux		X	X			
5	06/15/2022	01:00pm	Jane Deaux		X	X	X		
6	06/16/2022	01:45pm	Douglas Mann		X	X	X		
7	06/20/2022	03:30pm	Debbie Johnson					X	
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Establishment or School Name:					Establishn	nent or School	License Numbe	r:			
Establishment or School Address:					Basin/Tub Number:						
WHEN				WHO		CLEANED and DISINFECTED Place X in Correct Box or Boxes					
N	DATE IM/DD/YYYY	TIME a.m. or p.m.		FULL NAME (Please Print)		Not Used	Portable Jet Used & Cleaned	After Each Client	End of Day	Bi-Weekly	
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