

# WISCONSIN DEPARTMENT OF REGULATION & LICENSING



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# Wisconsin Department of Regulation & Licensing

Mail To: P.O. Box 8935  
Madison, WI 53708-8935

FAX #: (608) 266-2264  
Phone #: (608) 266-2112

1400 E. Washington Avenue  
Madison, WI 53703

E-Mail: web@drl.state.wi.us  
Website: http://drl.wi.gov

## BARBERING AND COSMETOLOGY EXAMINING BOARD

### CITATION FOR ADMINISTRATIVE FORFEITURE

<input checked="" type="checkbox"/> CITATION DOE CASE FILE # <u>06 DAC 088</u>	<input type="checkbox"/> FINAL DECISION AND ORDER LS # <u>07060413 BAC</u>
<input checked="" type="checkbox"/> Individual Credential Holder Name License # _____	OR <input checked="" type="checkbox"/> Establishment Name License # <u>71-1694</u>

2222 W. WISCONSIN AVE. MILWAUKEE, 53233  
Street City Zip  
FRIDAY 2/23/2007 10:15  
Day of Week Date Time

On the above stated time, date and location, an investigation/inspection has disclosed the following violation.

DISINFECTANT USED FOR DECONTAMINATION WAS NOT BEING CHANGED ON A  
DAILY BASIS. OWNER OF ESTABLISHMENT STATED THAT SHE BELIEVED IT NEEDED  
TO BE CHANGED ONCE A WEEK.

In violation of Section BC 4.10 (2) of ☐ Wis. Stats. OR ☒ Wis. Adm. Code  
Kenneth M. Bush INVESTIGATOR 3/12/07  
Signature of Investigative Staff Title Date  
[Signature] 3/19/07  
Signature of ☐ Licensee OR ☒ Establishment Owner Date

Pursuant to Wis. Stat. § 454.15(3), the licensing authority is authorized to impose a forfeiture in lieu of or in addition to other disciplinary action against your license.

PLEASE TAKE NOTICE THAT THE CREDENTIAL HOLDER MAY DEPOSIT A FORFEITURE AND COSTS IN THE AMOUNT OF \$ 280.00 BY MAILING A CHECK OR MONEY ORDER NO LATER THAN TWENTY (20) DAYS FROM THE DATE OF THIS CITATION, TOGETHER WITH THE SIGNED COPY OF THIS FORM TO: DEPARTMENT OF REGULATION AND LICENSING, DIVISION OF ENFORCEMENT, 1400 EAST WASHINGTON AVENUE, P.O. BOX 8935, MADISON, WI 53708. PAYMENT SHALL BE TREATED AS A PLEA OF NO CONTEST TO THE VIOLATION CITED ABOVE AND CONSENT TO AN ORDER OF FORFEITURE PLUS COSTS, NOT TO EXCEED THE AMOUNT OF THE DEPOSIT.

Please reference "NOTICE OF RIGHT TO CONTEST" on backside of pink copy.

Kenneth M. Bush 6-4-07

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## BARBERING AND COSMETOLOGY EXAMINING BOARD

### CITATION FOR ADMINISTRATIVE FORFEITURE

<input checked="" type="checkbox"/> CITATION DOE CASE FILE # <u>06 BAC 088</u>	<input type="checkbox"/> FINAL DECISION AND ORDER LS # _____
<input checked="" type="checkbox"/> Individual Credential Holder Name License # _____	<input checked="" type="checkbox"/> Establishment Name License # <u>71-1694</u>

2222 W. WISCONSIN AVE. MILWAUKEE 53233  
Street City Zip

FRIDAY 2/23/2007 10:15 am  
Day of Week Date Time

On the above stated time, date and location, an investigation/inspection has disclosed the following violation.

POISONOUS SUBSTANCES USED FOR CLEANING WERE STORED IN THE PUBLIC  
BATHROOM, AND NOT LOCKED UP IN A CABINET OR A CLOSET.

In violation of Section BC 3.01(6) of ☐ Wis. Stats. OR ☒ Wis. Adm. Code

Douglas M. Austin INVESTIGATOR 3/12/07  
Signature of Investigative Staff Title Date

[Signature] 3/19/07  
Signature of ☐ Licensee OR ☒ Establishment Owner Date

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PLEASE TAKE NOTICE THAT THE CREDENTIAL HOLDER MAY DEPOSIT A FORFEITURE AND COSTS IN THE AMOUNT OF \$ 130.00 BY MAILING A CHECK OR MONEY ORDER NO LATER THAN TWENTY (20) DAYS FROM THE DATE OF THIS CITATION, TOGETHER WITH THE SIGNED COPY OF THIS FORM TO: DEPARTMENT OF REGULATION AND LICENSING, DIVISION OF ENFORCEMENT, 1400 EAST WASHINGTON AVENUE, P.O. BOX 8935, MADISON, WI 53708. PAYMENT SHALL BE TREATED AS A PLEA OF NO CONTEST TO THE VIOLATION CITED ABOVE AND CONSENT TO AN ORDER OF FORFEITURE PLUS COSTS, NOT TO EXCEED THE AMOUNT OF THE DEPOSIT.

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## BARBERING AND COSMETOLOGY EXAMINING BOARD

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<input checked="" type="checkbox"/> Individual Credential Holder Name License # _____	<input checked="" type="checkbox"/> Establishment Name License # <u>71-1694</u>

2222 W. WISCONSIN AVE MILWAUKEE 53233  
Street City Zip

FRIDAY 2/23/2007 10:15 am  
Day of Week Date Time

On the above stated time, date and location, an investigation/inspection has disclosed the following violation.

PREVIOUSLY  
MANY USED EMERY BOARDS & BUFFERS FOUND IN DRAWERS IN ALMOST ALL  
WORKSTATIONS. MOST OF SAID INSTRUMENTS WERE OBVIOUSLY USED MANY TIME,  
USED DISCARDED.  
EMERY BOARDS & BUFFERS WERE OF TYPE TO BE USED ONCE & THEN DISCARDED.

In violation of Section BC 4.10 (4) of ☐ Wis. Stats. OR ☒ Wis. Adm. Code  
Douglas M. Austin INVESTIGATOR 3/12/07  
Signature of Investigative Staff Title Date  
[Signature] 3/19/07  
Signature of ☐ Licensee OR ☒ Establishment Owner Date

Pursuant to Wis. Stat. § 454.15(3), the licensing authority is authorized to impose a forfeiture in lieu of or in addition to other disciplinary action against your license.

PLEASE TAKE NOTICE THAT THE CREDENTIAL HOLDER MAY DEPOSIT A FORFEITURE AND COSTS IN THE AMOUNT OF \$ 280.00 BY MAILING A CHECK OR MONEY ORDER NO LATER THAN TWENTY (20) DAYS FROM THE DATE OF THIS CITATION, TOGETHER WITH THE SIGNED COPY OF THIS FORM TO: DEPARTMENT OF REGULATION AND LICENSING, DIVISION OF ENFORCEMENT, 1400 EAST WASHINGTON AVENUE, P.O. BOX 8935, MADISON, WI 53708. PAYMENT SHALL BE TREATED AS A PLEA OF NO CONTEST TO THE VIOLATION CITED ABOVE AND CONSENT TO AN ORDER OF FORFEITURE PLUS COSTS, NOT TO EXCEED THE AMOUNT OF THE DEPOSIT.

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# Department of Regulation & Licensing

State of Wisconsin

(608) 266-3736

TTY# (608) 267-2416 hearing or speech

TRS# 1-800-947-3529 impaired only

P.O. Box 8935, Madison, WI 53708-8935

E-Mail: dorl@mail.state.wi.us

http://www.dorl.state.wi.us/

FAX# (608) 266-2264

## BARBERING & COSMETOLOGY EXAMINING BOARD

### Notice of Compliance

ESTABLISHMENT NAME AND ADDRESS:

PRINCESS NAILS  
2222 W. WISCONSIN AVE.  
MILWAUKEE, WI 53233

TELEPHONE NUMBER:

(414) 931-7099

DAYS AND HOURS OF BUSINESS:

MON-SAT 10am-7pm

OWNER'S NAME:

THUYETT T. TRAN

MANAGER'S NAME:

LICENSE NUMBER:

71-1694

AN INSPECTION HAS DISCLOSED THE FOLLOWING VIOLATION(S) WHICH MUST BE CORRECTED IMMEDIATELY. PLEASE COMPLETE THE NOTICE OF COMPLIANCE SECTION OF THIS FORM AND RETURN THE WHITE COPY OF THIS NOTICE TO THE STATE OF WISCONSIN, DEPARTMENT OF REGULATION & LICENSING, DIVISION OF ENFORCEMENT, PO BOX 8935, MADISON, WI, 53708-8935. BY 5 DAYS AFTER RECEIPT.

#### ITEMS TO CORRECT CODES/STATUTE SECTION(a) & DESCRIPTION OF VIOLATION(s)

- BC 3.01(6) BATHROOM HAD CLEANING SUPPLIES IN ROOM, NOT LOCKED UP. RULE SAYS "POISONOUS SUBSTANCES STORED IN PUBLIC AREAS MUST BE LOCKED IN CABINET OR CLOSET"
- BC 4.02(4) CLEAN & DISINFECTED CONTACT EQUIPMENT MUST BE STORED IN A COVERED CONTAINER.
- BC 4.10(2) DISINFECTANT USED FOR DECONTAMINATION SHALL BE CHANGED DAILY & SHALL BE KEPT IN A COVERED CONTAINER.

REGULATION COMPLIANCE INVESTIGATOR

THUYETT TRAN  
VIOLATION(S) EXPLAINED TO

DATE

3/12/06

#### NOTICE OF COMPLIANCE - ACTION TAKEN TO CORRECT VIOLATIONS

- Bathroom cleaning supplies were placed into a LOCKED cabinet in a storage room.
- Contact equipment are now stored in COVERED containers.
- Disinfectant was changed everyday prior to investigation. Investigator informed & seemed to acknowledge.

I attest that the above statement is true and correct and the listed violations have been corrected as indicated. I understand that a false statement to the Board or its agent is a violation and could result in disciplinary action against my license.

SIGNATURE OF MANAGER/OWNER

*[Signature]*

pg 2 of 2

# Department of Regulation & Licensing

State of Wisconsin

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TRS# 1-800-947-3529 -impaired only

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<http://www.drl.state.wi.us/>

FAX# (608) 266-2264

## BARBERING & COSMETOLOGY EXAMINING BOARD

### Notice of Compliance

ESTABLISHMENT NAME AND ADDRESS:

PRINCESS NAILS

MILWAUKEE, WI

TELEPHONE NUMBER:

DAYS AND HOURS OF BUSINESS:

Mon-Sat 10am-7pm

OWNER'S NAME:

MANAGER'S NAME:

LICENSE NUMBER:

71-1694

AN INSPECTION HAS DISCLOSED THE FOLLOWING VIOLATION(S) WHICH MUST BE CORRECTED IMMEDIATELY. PLEASE COMPLETE THE NOTICE OF COMPLIANCE SECTION OF THIS FORM AND RETURN THE WHITE COPY OF THIS NOTICE TO THE STATE OF WISCONSIN, DEPARTMENT OF REGULATION & LICENSING, DIVISION OF ENFORCEMENT, PO BOX 8935, MADISON, WI, 53708-8935. BY \_\_\_\_\_

#### ITEMS TO CORRECT CODES/STATUTE SECTION(a) & DESCRIPTION OF VIOLATION(s)

BC 4.10(4) MANICURE INSTRUMENTS THAT CANNOT BE CLEANED & DISINFECTED SHALL BE DISPOSED OF FOLLOWING EACH USE. (I FOUND MANY USED EMERY BOARDS & BUFFER BLOCKS THAT HAD OBVIOUSLY BEEN USED MANY TIMES THAT WERE STILL IN DRAWERS TO BE USED AGAIN. THEY MUST NOT BE USED MORE THAN ONCE. YOU CAN GIVE THEM TO YOUR CUSTOMER AND THEY CAN BRING THEM BACK WITH THEM ON THEIR NEXT VISIT.

REGULATION COMPLIANCE INVESTIGATOR

DATE

VIOLATION(S) EXPLAINED TO

#### NOTICE OF COMPLIANCE - ACTION TAKEN TO CORRECT VIOLATIONS

- Customers given option to take home their instruments that cannot be cleaned & disinfected. Those that declined, their disposable instruments were thrown away & disposed of.

I attest that the above statement is true and correct and the listed violations have been corrected as indicated. I understand that a false statement to the Board or its agent is a violation and could result in disciplinary action against my license.

SIGNATURE OF MANAGER/OWNER

Leanne McBush  
6-4-07

#2472 (2/00)  
Ch. 454, Stats.

WHITE-DOE

YELLOW-Credential Holder

# Department of Regulation & Licensing

State of Wisconsin

(608) 266-3736

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<http://www.drl.state.wi.us/>

FAX# (608) 266-2264

## BARBERING & COSMETOLOGY EXAMINING BOARD

### Division of Enforcement Compliance Inspection

APPLICANT NAME AND ADDRESS:

PRINCESS NAILS  
2222 W. WISCONSIN AVE.  
MILWAUKEE, WI 53233

TELEPHONE NUMBER:

(414) 931-7099

DAYS AND HOURS OF BUSINESS:

Mon to Sat. 10AM - 7PM

#### PERSONNEL

Owner's Name: THYETT T. TRAN

Manager's Name:

License Number: 71-1694 (EST.)

#### REASON FOR INSPECTION

Chair/Booth Leasing  
Change of Ownership  
☒ Investigation  
New Establishment  
Change of Location

#### TYPE OF INSPECTION

Aesthetician  
Barber/Cosmetology  
Electrology  
☒ Manicurist  
Other

IC - IN COMPLIANCE

CR - COMPLIANCE REQUIRED

NA - NOT APPLICABLE

(Required entry below with one of the above codes)

IC BC 2.02-Treatments, Prohibited, Infectious and Contagious Diseases.

IC BC 2.03-Practice Standards.

IC BC 2.04-Unauthorized Practice.

IC BC 2.045-Services Outside of a Licensed Establishment

IC BC 2.05-Advertising.

IC NA BC 2.06-Responsibilities of Owners.

NA BC 2.07-Responsibilities of the Manager.

CR BC 2.08-Responsibilities of Licensees.

CR BC 3.01-Establishment Requirements.

NA BC 3.02-Other Establishment Requirements.

CR BC 4.01-Sanitation.

CR BC 4.02-Equipment.

NA BC 4.03-Sterilization.

IC BC 4.04-Supplies.

IC BC 4.05-Procedure for Exposure to Blood.

IC BC 4.06-Precautionary Procedures.

NA BC 4.07-Ear Piercing.

NA BC 4.08-Waxing.

NA BC 4.09-Electrolysis.

CR BC 4.10-Manicuring

Signature of Division of Enforcement Employee

Signature of Owner/Manager

Inspection Time

Date of Inspection

Travel Time

Notice of Compliance Due Date

#2473 (2/00)  
Ch. 454, Stats.

WHITE-DOE

YELLOW-Credential Holder

Committed to Equal Opportunity in Employment and Licensing