

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>07 BAC 255</u>	<input checked="" type="checkbox"/> FINAL DECISION AND ORDER LS # <u>08020433BAC</u>
<input type="checkbox"/> Individual Credential Holder Name License # _____	OR <input checked="" type="checkbox"/> Establishment Name License # <u>80-31664</u>

555 GRAND AVE. GRAND RAPIDS 54495
Street City Zip
FRIDAY 11/16/07 10:30 am APPROX
Day of Week Date Time

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

DURING THE INSPECTION IT WAS FOUND THAT THE DISINFECTANT USED FOR
DECONTAMINATION (BARBICIDE) WAS NOT BEING CHANGED ON A DAILY BASIS.
MANICURIST BRENDA AKKERMAN STATED SHE CHANGED THE DISINFECTANT
EVER COUPLE OF DAYS.

In violation of Section 13C 4.10 (2) of ☐ Wis. Stats. OR ☒ Wis. Adm. Code
Douglas M. Austin INVESTIGATOR 11/26/07
Signature of Investigative Staff Title Date
[Signature] 12/21/07
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.

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BARBERING AND COSMETOLOGY EXAMINING BOARD

CITATION FOR ADMINISTRATIVE FORFEITURE

<input checked="" type="checkbox"/> CITATION DOE CASE FILE # <u>07 BAC 235</u>	<input checked="" type="checkbox"/> FINAL DECISION AND ORDER LS # <u>08020433BAC</u>
<input type="checkbox"/> Individual Credential Holder Name License # _____	OR <input checked="" type="checkbox"/> Establishment Name License # <u>80-31664</u>

Street 555 GRAND AVE. City WISC RAPIDS Zip 54495
Day of Week FRIDAY Date 11/16/07 Time 10:30 am APPROX

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

IT WAS FOUND DURING THE INSPECTION THAT MANICURING IMPLEMENTS
SUCH AS BUFFER BLOCKS & EMERY BOARDS WERE BEING DISINFECTED &
REUSED ON SEVERAL CLIENTS. THESE WERE THE TYPES OF IMPLEMENTS THAT
THE BOARD HAS RULED THAT CANNOT BE ADEQUATELY CLEANED IF ALL ORGANIC MATERIAL

In violation of Section BC 4.10 (4) of ☐ Wis. Stats. OR ☒ Wis. Adm. Code
Signature of Investigative Staff Douglas M. Austin Title INVESTIGATOR Date 11/26/07
Signature of ☐ Licensee OR ☒ Establishment Owner Date 12/21/07

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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