

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>08BAC 043</u>	<input checked="" type="checkbox"/> FINAL DECISION AND ORDER LS # <u>08040729 BAC</u>
<input type="checkbox"/> Individual Credential Holder Name License # _____	<input checked="" type="checkbox"/> Establishment Name License # <u>33745</u>

1866 N SANTA MONICA BLVD FOX POINT 53217
Street City Zip
Tuesday 2/12/08 12:25 pm
Day of Week Date Time

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

FAILURE TO USE TUBICUHOICIDAL DISINFECTANT ON
CONTACT EQUIPMENT

In violation of Section SC4.02 (3) of ☐ Wis. Stats. OR ☒ Wis. Adm. Code
Candace (Gordon) Consumer Protection - Sub III 2/12/08
Signature of Investigative Staff Title Date
Scott Beryl Owner 2-2-08
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 \$ 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.

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

Kennie M Burt
4-7-08

Wisconsin Department of Regulation & Licensing

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BARBERING AND COSMETOLOGY EXAMINING BOARD

CITATION FOR ADMINISTRATIVE FORFEITURE

<input checked="" type="checkbox"/> CITATION DOE CASE FILE # <u>08BAC 043</u>	<input checked="" type="checkbox"/> FINAL DECISION AND ORDER LS # <u>08040729 BAC</u>
<input checked="" type="checkbox"/> Individual Credential Holder Name <u>Scott Joseph Michael Singer</u> License # _____	<input checked="" type="checkbox"/> Establishment Name <u>DIRECTOR'S IN DESIGN</u> License # <u>33745</u>

6866 N SANTA MONICA BLVD FOX POINT 53217
Street City Zip
Tuesday 2/12/08 12:20 PM
Day of Week Date Time

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

REUSING DISPOSABLE EQUIPMENT - FILES, BUFFER BLOCKS

In violation of Section BC 4.10 (4) of ☐ Wis. Stats. OR ☒ Wis. Adm. Code
Candace (P. Moore) Consumer Protection Div III 2/12/08
Signature of Investigative Staff Title Date
Scott Singer Owner 2-2-08
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 \$ 200.00 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.

Jeanie M. Bush
4-7-08