

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

08 BAC OSD

BARBERING AND COSMETOLOGY EXAMINING BOARD

CITATION FOR ADMINISTRATIVE FORFEITURE

<input checked="" type="checkbox"/> CITATION DOE CASE FILE # <u>08 BAC OSD</u>	<input checked="" type="checkbox"/> FINAL DECISION AND ORDER LS # <u>08040723 BAC</u>
<u>Tien (Tina) Nguyen #85 5602 (owner Unique Nail)</u>	
<input checked="" type="checkbox"/> Individual Credential Holder Name License # <u>85 5602</u>	OR <input type="checkbox"/> Establishment Name License # _____

7516 W. Appleton Avenue Milwaukee WI 53216
Street City Zip

Wednesday 2/13/08 1:00 p.m.
Day of Week Date Time

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

Establishment using Tic Tac acrylic liquid containing
Methyl Methacrylate.

In violation of Section 2.03(9) of Wis. Stats. OR Wis. Adm. Code
Neckelle Kisher Investigator 2/13/08
Signature of Investigative Staff Title Date

Ma
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 \$ 1,000 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.

Jessie M Bush
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>08BAC05</u>	<input checked="" type="checkbox"/> FINAL DECISION AND ORDER LS # <u>08040723BAC</u>
<u>Tien (Tina) Nguyen (owner of Unique Nails)</u>	
<input type="checkbox"/> Individual Credential Holder Name License # <u>85 5602</u>	OR <input type="checkbox"/> Establishment Name License # _____

7516 W. Appleton Avenue Milwaukee WI 53216
Street City Zip
Wednesday 2/13/08 1:00 p.m.
Day of Week Date Time

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

Failure to maintain salon in a sanitary condition. Floors
were dirty w/ salt & nail clippings; workstation drawers
contained nail dust with clean equipment & other non-nail
items; (checkbook, money); difficult to tell if implements clean or dirty.

In violation of Section 4.01 (1) of Wis. Stats. OR Wis. Adm. Code
Michelle Kusler Investigator 2/13/08
Signature of Investigative Staff Title Date
[Signature]
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 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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Jeanie M Bush
4-7-08