

WISCONSIN DEPARTMENT OF REGULATION & LICENSING



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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 073</u>	<input checked="" type="checkbox"/> FINAL DECISION AND ORDER LS # <u>08060224 BAC</u>
<u>VERNON C. SEITZ</u> <input type="checkbox"/> Individual Credential Holder Name License # _____	OR <u>VERN'S BARBER SHOP</u> <input checked="" type="checkbox"/> Establishment Name License # <u>19119</u>

4243 S. PACKARD AVE ST FRANCIS 53235
Street City Zip
FRIDAY 2/15/08 9:45am
Day of Week Date Time

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

FAILURE TO CHANGE CONTACT DISINFECTANT (BARPHICIDE)
DAILY. NOTE: CONTACT DISINFECTANT MUST BE A
TUBERICIDAL.

In violation of Section 604.02 (5) of Wis. Stats. OR Wis. Adm. Code
Candace (Blaedow) Consumer Protection Div III 2/15/08
Signature of Investigative Staff Title Date
Vernon C Seitz 2/15/08
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 \$ 150.00 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.

#2683 (8/04)
Ch. 454, Stats.

Jessie M Bush
6-208