

## WISCONSIN DEPARTMENT OF SAFETY AND PROFESSIONAL SERVICES



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# STATE OF WISCONSIN

Department of Safety and Professional Services  
1400 E Washington Ave.  
Madison WI 53703

Governor Scott Walker

Secretary Dave Ross

Mail to:  
PO Box 8935  
Madison WI 53708-8935

Email: [dsps@wisconsin.gov](mailto:dsps@wisconsin.gov)  
Web: <http://dsps.wi.gov>

Voice: 608-266-2112 • FAX: 608-266-2264 • TTY: 608-267-2416

June 1, 2012

*Attached via electronic transmission to*

ROSIES PHARDISE BEAUTY & BARBER SALON  
ATTN ROSETTA HOSKINS  
3479 NORTH 2<sup>ND</sup> STREET  
MILWAUKEE WI 53215

ORDER 0001875

Re: Case Number 12 BAC 049  
Rosies Pharadise Beauty Barber Salon

**ADDENDUM TO CITATION FOR ADMINISTRATIVE FORFEITURE -  
PAYMENT PLAN**

Dear Ms. Hoskins:

You have already received the Citation. By returning the original signed copy of this letter along with a partial payment and a copy of the citation that we previously sent to you on May 21, 2012, you accept the forfeiture imposed on the Citation you received and you agree to pay the forfeiture amount in full. To enter into this agreement and to accept the payment plan below:

- You must sign and date this document below and return the original to Willie E. Garrette at the address listed above by June 11, 2012.
- You must also include a partial payment of 25% (\$250.00) of the total amount due on the Citation when returning this document.
- You must return a copy of the Citation with this document.
- Three subsequent payments of 25% (\$250.00) of the total amount are due every 60 days following the date of the previous payment due date, until the full amount of \$1,000.00 is paid in full, and each subsequent payment must be sent to the Department Monitor, Candace Bloedow at the address above with a copy of the Citation.
- You agree that if you fail to timely submit payment of the forfeiture as set forth above, your license may, in the discretion of the board or its designee, be **SUSPENDED**, without further notice or hearing, until you have complied with payment of the forfeiture.

I hereby accept the forfeitures imposed by the attached citations and the terms set forth above.

Rosetta Hoskins  
Signature of Licensee or Establishment Owner

6/11/12  
Date

So Ordered:

Jeffrey A. Pelt  
A Member of the Barbering and Cosmetology  
Examining Board

9-10-12  
Date

# 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>12 BAC 049</u>	<input type="checkbox"/> FINAL DECISION AND ORDER LS # <u>ORDER 0001875</u>
<u>Rosetta L. Hoskins</u> <input checked="" type="checkbox"/> Individual Credential Holder Name License # <u>90141-82</u>	<input type="checkbox"/> Establishment Name License # _____

3479 North 2nd St Milwaukee 53215  
Street City Zip  
Wednesday, April 4, 2012 3:15 PM  
Day of Week Date Time

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

BC 2.04(1) That Rosetta Hoskins was providing BAC services to a client in an unlicensed barbering and cosmetology establishment.

In violation of Section BC 2.04(1) of ☐ Wis. Stats. OR ☒ Wis. Adm. Code  
Michelle Harvett Investigator June 21, 2012  
Signature of Investigative Staff Title Date  
Rosetta Hoskins 6/11/12  
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 IN THE AMOUNT OF \$ 1000.00 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, NOT TO EXCEED THE AMOUNT OF THE DEPOSIT.

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

#2683 (8/08)  
Ch. 454, Stats.

Committed to Equal Opportunity in Employment and Licensing