

WISCONSIN DEPARTMENT OF SAFETY AND PROFESSIONAL SERVICES



Wisconsin Department of Safety and Professional Services Access to the Public Records of the Reports of Decisions

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- There may be discrepancies between the online copies and the original document. Original documents should be consulted as the definitive representation of the order's content. Copies of original orders may be obtained by mailing requests to the Department of Safety and Professional Services, PO Box 8935, Madison, WI 53708-8935. The Department charges copying fees. *All requests must cite the case number, the date of the order, and respondent's name as it appears on the order.*
- Reported decisions may have an appeal pending, and discipline may be stayed during the appeal. Information about the current status of a credential issued by the Department of Safety and Professional Services is shown on the Department's Web Site under "License Lookup."
The status of an appeal may be found on court access websites at:
<http://ccap.courts.state.wi.us/InternetCourtAccess> and <http://www.courts.state.wi.us/wsccl>.
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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

11/12/2012
Paid 1st payment of
\$250 (mk)

Mail to:
PO Box 8935
Madison WI 53708-8935

Email: dsps@wisconsin.gov
Web: <http://dsps.wi.gov>

October 22, 2012

PHUONG DUNG T PHAM
TOMAH NAILS & SPA LLC
201 HELEN WALTON DR #8
TOMAH WI 54660

ORDER 0002134

Re: Case number 12 BAC 065/Phuong Dung T. Pham #85 8160 (Manicurist license)

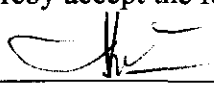
**ADDENDUM TO CITATION FOR ADMINISTRATIVE FORFEITURE -
PAYMENT PLAN**

Dear Ms. Pham:

You have received one or more citations for violations of the Wisconsin Cosmetology rules and have requested the opportunity to enter into a payment agreement to resolve those citations. By returning an original signed copy of this letter along with partial payment, you accept the forfeiture(s) imposed on the citation(s) you received and agree to pay the forfeiture amount(s) in full. To enter into this agreement and to accept the payment plan below:

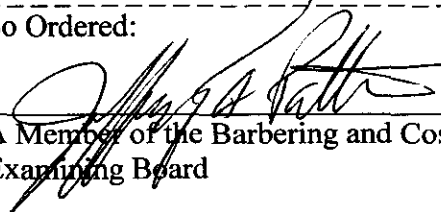
- You must sign and date this document below and return the original to Michelle Krisher at the address listed above.
- You must also include a partial payment of \$250 when returning this document.
- You must return a copy of the citation(s) with this document.
- Subsequent payments of \$250 are due every 60 days following the date of the previous payment due date until the full amount has been paid and must be sent by addressing to Department Monitor at the address above. **In order to assure each payment is credited properly, all payments must reference the case number noted above.** Please use the enclosed envelopes to submit your payments.
- 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.


Signature of Licensee or Establishment Owner


Date

So Ordered:


A Member of the Barbering and Cosmetology
Examining Board


Date

Cancelled
copy
10/22/2012
mkushar

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

11/12/2012
Paid full payment
of \$250
(mk)

BARBERING AND COSMETOLOGY EXAMINING BOARD

CITATION FOR ADMINISTRATIVE FORFEITURE

<input checked="" type="checkbox"/> CITATION DOE CASE FILE # <u>12BAC065</u>	<input checked="" type="checkbox"/> FINAL DECISION AND ORDER LS # <u>ORDER 0002134</u>
<u>Phuong Dung T. Pham (owner/manicurist of Tomah Nails)</u>	
<input checked="" type="checkbox"/> Individual Credential Holder Name License # <u>85-8160</u>	<input type="checkbox"/> Establishment Name License # <u>Spa LLC</u>

201 Helen Walton Drive, #8 Tomah WI 54660
Street City Zip
Wednesday 10/17/2012 10:00 a.m.
Day of Week Date Time

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

Phuong Dung T. Pham participated in unlicensed activity by allowing Tim Pham provide manicuring services without a Wisconsin manicurist license

In violation of Section BC 2.04(1) of ☐ Wis. Stats. OR ☒ Wis. Adm. Code
Nichelle J. Kushar Investigator 10/17/2012
Signature of Investigative Staff Title Date
[Signature] ☐ Licensee OR ☐ Establishment Owner Oct. 29, 12
Signature of 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 \$ 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, 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.

12/3/12 [Signature]

Copy to
copy
10/22/2012
renewal

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

11/12/2012
Paid just
payment
of \$250
Mike

BARBERING AND COSMETOLOGY EXAMINING BOARD

CITATION FOR ADMINISTRATIVE FORFEITURE

<input checked="" type="checkbox"/> CITATION DOE CASE FILE # <u>12 BAC 065</u>	<input checked="" type="checkbox"/> FINAL DECISION AND ORDER LS # <u>ORDER 0002134</u>
<u>Phuong Dung T. Pham (owner/manicurist of Tomah Nails)</u>	
<input checked="" type="checkbox"/> Individual Credential Holder Name License # <u>85-8160</u>	<input type="checkbox"/> Establishment Name License # <u>4 Spa LLC</u>

201 Helen Walton Drive, #8 Tomah, WI 54660
Street City Zip
Wednesday 10/17/2012 10:00 a.m.
Day of Week Date Time

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

Reusing disposable implements (gloves, Nail files,
nail buffers, flip-flops)

In violation of Section BC 4.10(4) of ☐ Wis. Stats. OR ☒ Wis. Adm. Code
Nichelle Krusher Investigator 10/17/2012
Signature of Investigative Staff Title Date
[Signature] Oct. 29, 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 \$ 250 - 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.

Corrected
copy
10/22/2012
mks

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

11/12/2012
paid
first
payment
of \$250-

BARBERING AND COSMETOLOGY EXAMINING BOARD

CITATION FOR ADMINISTRATIVE FORFEITURE

<input checked="" type="checkbox"/> CITATION DOE CASE FILE # <u>12 BAC 065</u>	<input checked="" type="checkbox"/> FINAL DECISION AND ORDER LS # <u>ORDER 0002134</u>
<u>Phuong Dung T. Pham (owner/manicurist of Tomah Nails</u>	
<input checked="" type="checkbox"/> Individual Credential Holder Name License # _____	OR <input type="checkbox"/> Establishment Name License # <u>Spa LLC</u>

701 Helen Walton Drive, #8, Tomah, WI 54660
Street City Zip
Wednesday 10/17/2012 10:00 a.m.
Day of Week Date Time

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

Disinfectant is not changed daily

In violation of Section BC 4.10(2) of ☐ Wis. Stats. OR ☒ Wis. Adm. Code
Michelle Krisher Investigator 10/17/2012
Signature of Investigative Staff Title Date
[Signature] ☐ Licensee OR ☐ Establishment Owner Oct. 29, 12
Signature of 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 \$ 250- 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.

12/3/12 [Signature]
Committed to Equal Opportunity in Employment and Licensing