

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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- 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/wscga>

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Correcting information on the DSPS website: An individual who believes that information on the website is inaccurate may contact DSPS@wisconsin.gov

Wisconsin Department of Safety and Professional Services

Mail To: P.O. Box 7190
Madison, WI 53707-7190

FAX #: (608) 266-2264
Phone #: (608) 266-2112

1400 E. Washington Avenue
Madison, WI 53703
E-Mail: dsps@wisconsin.gov
Website: http://dsps.wi.gov

COSMETOLOGY EXAMINING BOARD

CITATION FOR ADMINISTRATIVE FORFEITURE

DLSC CASE FILE # <u>15 BAC 029</u>	FINAL DECISION AND ORDER ORDER # <u>0004157</u>
<input type="checkbox"/> Individual Credential Holder Name License # _____	<input checked="" type="checkbox"/> Establishment Name License # <u>38508-80</u>
<u>Hair Perfections LLC</u>	

5218-5222 W. Center Street Milwaukee, WI 53210
Street City Zip

Wednesday 3-18-2015 _____
Day of Week Date Time

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

Hair clippings were found in drawers at work stations.

In violation of Section COS 4.01(1) of Wis. Stats. OR Wis. Adm. Code
B. J. Investigator 6-29-15
Signature of Division Investigative Staff Title Date
[Signature] Licensee OR Establishment Owner 7/9/15
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 \$ 100 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 SAFETY & PROFESSIONAL SERVICES, DIVISION OF LEGAL SERVICES & COMPLIANCE, 1400 E. WASHINGTON AVENUE, PO BOX 7190, MADISON, WI 53707-7190. IF THIS CITATION IS ISSUED TO BOTH AN INDIVIDUAL CREDENTIAL HOLDER AND AN ESTABLISHMENT, ONE HALF OF THE FORFEITURE IS DEEMED TO BE ASSESSED AGAINST EACH CREDENTIAL. 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.

[Signature]
A Member of the Board

7/27/15
Date

#3053DLSC (11/14)
Ch.454, Stats.

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<input type="checkbox"/> Individual Credential Holder Name License # _____	<input checked="" type="checkbox"/> Establishment Name <u>Hair Perfections LLC</u> License # <u>38508-80</u>

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Street City Zip

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Barbicide did not cover the combs white in the container.

In violation of Section Cos 4.02(3) of Wis. Stats. OR Wis. Adm. Code
[Signature] Investigator 6-29-15
Signature of Division Investigative Staff Title Date
[Signature] Licensee OR Establishment Owner 7/9/15
Signature of Licensee OR Establishment Owner Date

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5218-5222 W. Center Street Milwaukee, WI 53210
Street City Zip

Wednesday 3-18-2015 _____
Day of Week Date Time

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

Contact equipment was not stored in covered containers

In violation of Section COS 4.02(4) of Wis. Stats. OR Wis. Adm. Code

[Signature] Investigator 6-29-15
Signature of Division Investigative Staff Title Date

[Signature] Licensee OR Establishment Owner _____
Signature of Licensee OR Establishment Owner Date

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