

WISCONSIN DEPARTMENT OF SAFETY AND PROFESSIONAL SERVICES



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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>15BAC088</u>	FINAL DECISION AND ORDER ORDER # <u>0004438</u>
<u>Son Luu</u>	<u>Ly Ly Nails & Spa</u>
<input checked="" type="checkbox"/> Individual Credential Holder Name	<input checked="" type="checkbox"/> Establishment Name
License # <u>7161-85</u>	License # <u>4549-71</u>

4293 S 76th Street Greenfield 53220
Street City Zip
Friday 10-23-15 10:10AM
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.

Assist in unlicensed practice by owner. Mayeli Del Carmen De La Torre
was providing manicuring services without a license. Dao My Luu
was providing waxing services without an Aesthetics or cosmetology
license.

In violation of Section COS 2.04(1) of ☐ Wis. Stats. OR ☒ Wis. Adm. Code
B-75 Investigator 12-2-15
Signature of Division Investigative Staff Title Date
[Signature] [Signature] 12/07/15
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 \$ 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 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

12/16/15
Date

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COSMETOLOGY EXAMINING BOARD

CITATION FOR ADMINISTRATIVE FORFEITURE

DLSC CASE FILE # <u>15BAC088</u>	FINAL DECISION AND ORDER ORDER # <u>0004438</u>
<u>San Lou</u>	<u>LyLy Nails + spa</u>
<input checked="" type="checkbox"/> Individual Credential Holder Name License # <u>7161-85</u>	<input checked="" type="checkbox"/> Establishment Name License # <u>4549-71</u>

4293 S 76th Street Greenfield 53220
Street City Zip
Friday 10-23-15 10:10AM
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.

Disinfectant used for decontamination shall be kept in a covered container and changed daily. Manicure instruments were placed in a glass jar with Barbicide, but the jar did not have a cover.

In violation of Section OS 4.10(2) of ☐ Wis. Stats. OR ☒ Wis. Adm. Code
B 73 Investigator 11-2-15
Signature of Division Investigative Staff Title Date
Sam Myleur 12/07/15
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 \$ 250.00 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 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.

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[Signature]
A Member of the Board

12/16/15
Date

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

Committed to Equal Opportunity in Employment and Licensing

Wisconsin Department of Safety and Professional Services

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COSMETOLOGY EXAMINING BOARD

CITATION FOR ADMINISTRATIVE FORFEITURE

DLSC CASE FILE # <u>15 BAC 088</u>	FINAL DECISION AND ORDER ORDER # <u>0004438</u>
<u>Sam Lu</u>	<u>Ly Ly Nails & Spa</u>
<input checked="" type="checkbox"/> Individual Credential Holder Name License # <u>7161-85</u>	<input checked="" type="checkbox"/> Establishment Name License # <u>4549-71</u>

4293 S. 76th Street Greenfield 53220
Street City Zip
Friday 10-23-15 10:10 AM
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.

Prior to use all reusable manicure instruments shall be disinfected.
Contact equipment/manicure instruments such as clippers were sitting in
an uncovered glass jar with just the head of the instrument and not the
handles covered in Barbicide

In violation of Section Cos 4.10(1) of ☐ Wis. Stats. OR ☒ Wis. Adm. Code
B 75 Investigator 11-2-15
Signature of Division Investigative Staff Title Date
Sam Lu 12/07/15
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 \$ 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 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.

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Wig
A Member of the Board

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COSMETOLOGY EXAMINING BOARD

CITATION FOR ADMINISTRATIVE FORFEITURE

DLSC CASE FILE # <u>15BAC088</u>	FINAL DECISION AND ORDER
<u>Don Luu</u>	ORDER # <u>0004438</u>
<input checked="" type="checkbox"/> Individual Credential Holder Name	<input checked="" type="checkbox"/> Establishment Name
License # <u>7161-85</u>	License # <u>4549-71</u>

4293 S. 76th Street Greenfield 53220
Street City Zip
Friday 10-23-15 10:10 AM
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.

Clean contact equipment was not stored in covered containers.
Waxing applicators/supplies were stored in uncovered containers. Towels
were stored in open cabinets with no doors.

In violation of Section COS 4.02(4) of ☐ Wis. Stats. OR ☒ Wis. Adm. Code
D Luu Investigator 11-2-15
Signature of Division Investigative Staff Title Date
[Signature] [Signature] 12/07/15
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.

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[Signature]
A Member of the Board

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CITATION FOR ADMINISTRATIVE FORFEITURE

DLSC CASE FILE # <u>15BAC088</u>	FINAL DECISION AND ORDER ORDER # <u>0004438</u>
<u>Son Luu</u>	<u>LyLy Nails & Spa</u>
<input checked="" type="checkbox"/> Individual Credential Holder Name License # <u>7161-85</u>	<input checked="" type="checkbox"/> Establishment Name License # <u>4564-71</u>

4293 S. 76th Street Greenfield 53220
Street City Zip
Friday 10-23-15 10:10 AM
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.

I found clean contact equipment (clippers & towels) not stored in covered / closed containers. Closed or covered containers were not provided by the owner.

In violation of Section COS 2.06(2) of ☐ Wis. Stats. OR ☒ Wis. Adm. Code
B. 23 Investigator 11-2-15
Signature of Division Investigative Staff Title Date
Sam Jumper ☒ Licensee OR ☒ Establishment Owner 12/07/15
Signature of Date

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PLEASE TAKE NOTICE THAT THE CREDENTIAL HOLDER MAY DEPOSIT A FORFEITURE IN THE AMOUNT OF \$ 100⁰⁰ 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.

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[Signature]
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Date

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DLSC CASE FILE # <u>15 BAC 088</u>	FINAL DECISION AND ORDER ORDER # <u>0004438</u>
<u>Don Lu</u>	<u>Ly Ly Nails & Spa</u>
<input checked="" type="checkbox"/> Individual Credential Holder Name License # <u>7161-85</u>	<input checked="" type="checkbox"/> Establishment Name License # <u>4549-71</u>

4293 S. 76th Street Greenfield 53220
Street City Zip
Friday 10-23-15 10:10AM
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.

Poisonous Substance such as Barbicide and Cleaners were stored
in unsecured cabinets the public has access to.

In violation of Section COS 3.01(6) of ☐ Wis. Stats. OR ☒ Wis. Adm. Code
R. M. Investigator 11-2-15
Signature of Division Investigative Staff Title Date
Sammy Lee 12/07/15
Signature of ☐ Licensee OR ☒ Establishment Owner Date

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[Signature]
A Member of the Board

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CITATION FOR ADMINISTRATIVE FORFEITURE

DLSC CASE FILE # <u>15BAC088</u>	FINAL DECISION AND ORDER ORDER # <u>0004438</u>
<u>Jon Luu</u>	<u>LyLy Nails + Spa</u>
<input checked="" type="checkbox"/> Individual Credential Holder Name	<input checked="" type="checkbox"/> Establishment Name
License # <u>7161-85</u>	License # <u>4549-71</u>

4293 S. 76th Street Greenfield 53220
Street City Zip
Friday 10-23-15 10:10am
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.

All areas of an establishment and the equipment, tools and implements used by licensees were not maintained in a clean, sanitary and safe condition. Nail dust was found covering supply containers at nail work stations.

In violation of Section COS 4.01(1) of ☐ Wis. Stats. OR ☒ Wis. Adm. Code
B. 75 Investigator 11-2-15
Signature of Division Investigative Staff Title Date
Sammy Muel 12/07/15
Signature of ☐ Licensee OR ☒ Establishment Owner Date

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CITATION FOR ADMINISTRATIVE FORFEITURE

DLSC CASE FILE # <u>15BAC 088</u>	FINAL DECISION AND ORDER ORDER # <u>0004438</u>
<u>San Luu</u>	<u>Ly Ly Nails + Spa</u>
<input checked="" type="checkbox"/> Individual Credential Holder Name License # <u>7161-85</u>	<input checked="" type="checkbox"/> Establishment Name License # <u>4549-71</u>

4293 S. 76th Street Greenfield 53220
Street City Zip
Friday 10-23-15 10:10AM
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.

Disinfection of scissors, razors, clipper blades and tweezers shall consist of
cleaning with soap and water to remove all organic material wiping with or
soaking in a disinfectant. Contact equipment was not fully covered
in Barbicide.

In violation of Section COS 4.02(2) of ☐ Wis. Stats. OR ☒ Wis. Adm. Code
B. 74 Investigator 11-2-15
Signature of Division Investigative Staff Title Date
[Signature] [Signature] 12/07/15
Signature of ☐ Licensee OR ☒ Establishment Owner Date

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Date