WISCONSIN DEPARTMENT OF SAFETY AND PROFESSIONAL SERVICES



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Madison, WI 53703

E-Mail: dsps@wisconsin.gov Website: http://dsps.wi.gov

COSMETOLOGY EXAMINING BOARD

CITATION FOR ADMINISTRATIVE FORFEITURE

1, 0,0	FINAL DECISION A	ND ORDER 000 5107
DLSC CASE FILE # 10 BAC 67	ORDER #	Jails
Individual Credential Holder Name License # 8580-85	Establishment Nar License # 455	me
924 Elden Ave Street	Amery	54 00 l Zip
Wednesday Day of Week	11-30-2016 Date	12:30pm
On the above stated time, date and location, an in be corrected. Kin Nguyan assisted in by allowing Uyan Number of Wisconson L		
In violation of Section Cos 2. 046		OR
Signature of Division Investigative Staff Kimy NGWEN	Investigated Title	- /2-16-2014 Date 12-23-2016
Signature of	OR	
D		

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 \$ 500.00 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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Member of the Board

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COSMETOLOGY EXAMINING BOARD

CITATION FOR ADMINISTRATIVE FORFEITURE

DISCOASE FILE # 11.	Q A C 107	FINAL DECISION AND C ORDER #	DRDER	0005107	
DLSC CASE FILE # _ \ \ \ \ \ \ \ \ \		Pro Nai	15		
M Individual Credential Hold License # 8580	ler Name	区 Establishment Name License # 455 7			
924 Elden Av Street	e (-	Imeny		5 400 1 Zip	
<u>Wednesday</u> Day of Week		1-30-2014 Date		12.30pm	
On the above stated time, date be corrected.		•		·	
Kin Nguyon of by allowing La Pro Nails has	assisted in the rannic Tran to ling a Wiscons	provide waxing Aesthetium	stablis	of waxing es without threat hicense	
In violation of Section	nCos 2. 04547301(1) of		OR	Wis. Adm. Code 12-16-2014 Date	
		Title U			
Signature of U Lie	censee OR	Establishment Ov	wner	12-93-2016 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 THA \$_500.00 BY MAILING OF THIS CITATION, TOGET	A CHECK OR MONEY ORDI	ER NO LATER THAN TWENT	Y (20) DA	YS FROM THE DATE	

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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COSMETOLOGY EXAMINING BOARD

CITATION FOR ADMINISTRATIVE FORFEITURE

DLSC CASE FILE# 14 BAC 16	_	INAL DECISION AND ORDE ORDER # Po Nais	R 0005107
✓ Individual Credential Holder Name License # 8580-85		Establishment Name icense # 4557-71	
924 Elden Ave	Am City	ery	54∞1 Zip
Day of Week	Date	30-2016	12:30pm
On the above stated time, date and location, be corrected. Pro Nails stored proposed access.			
In violation of Section Cos 3.01	((a) of	☐ Wis. Stats. OR	
Signature of Division Investigative Staff		Thuestage for Title	12.16-2016 Date
KIMY NOWEN			12-23-2016
Signature of	OR	Establishment Owner	Date
Pursuant to Wis. Stat. § 454.15(3), the laddition to other disciplinary action again	•	is authorized to impose a fo	orfeiture in lieu of or in

PLEASE TAKE NOTICE THAT THE CREDENTIAL HOLDER MAY DEPOSIT A FORFEITURE IN THE AMOUNT OF 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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COSMETOLOGY EXAMINING BOARD

CITATION FOR ADMINISTRATIVE FORFEITURE

DLSC CASE FILE # 16 BAC. 67 Navign Individual Credential Holder Name License # 8580-85	FINAL DECISION AND ORDER ORDER # Co Vails Establishment Name License # 4557-7/	0005107
924 Elden Ave Street Wednesday	Amery City 11-30-2016	54001 Zip 12:30ps
On the above stated time, date and location, an invest be corrected. Kim Nguyan did not Stare a covered container	,	ing violation, which must
Kin Ngupa allowed used Used Used on different clients the Inviolation of Section Cos 4.01(1)	roughout the day & did not d	boards to be lispose innediately Wis. Adm. Code
Signature of Division Investigative Staff Kimy NGWEN Signature of Division Investigative Staff OR	Title Establishment Owner	12-16-2016 Date (2-23-2016 Date

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