WISCONSIN DEPARTMENT OF SAFETY AND PROFESSIONAL SERVICES



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Wisconsin Department of Safety and Professional Services Mail To: P.O. Box 7190 1400 E. Washington Avenue

Madison, WI 53707-7190

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

Madison, WI 53703

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

COSMETOLOGY EXAMINING BOARD

CITATION FOR ADMINISTRATIVE FORFEITURE

DLSC CASE FILE # 17 BAC 043			FINAL DECISION AND ORDER ORDER #			
			GIANNI HAIR	L SALO	<u> </u>	
☐ Individual Crede License #	ential Holder Name	Lice	Establishment Name ense # <u>43842</u>	-80		
	OAKLAND AVE	Mills City	AUKCE		53211 Zip	
<u>WEDNESDAY</u> Day of Week		02/1 Date	4/2018	A	Time	
On the above stated be corrected.	time, date and location, a	n investigation/inspo	ection has disclosed th	e followin	g violation, which must	
GIANNI HA	IR SALON ASSIS	TED IN THE	LNUCGASED	PRAC	TICE OF	
COSMETOLOG	SY BY ALLOWIN	NG EMATO A	LI, SAMI SAL	IM, An	D FOKAIRI	
ELMEDHI	To Provide Co	osme to log	services h	JITHOUT	A LICENSE,	
In violation of	Section cos 2.00		☐ Wis. Stats.	OR	Wis. Adm. Code	
Signature of Division	n Investigative Staff		Title		03/06/2018 Date	
Digitature of Division	ii iii osuguu o suu				3/12/18	
Signature of	☐ Licensee	OR	☐ Establishment (Owner	Date	
	Stat. § 454.15(3), the lic sciplinary action agains		authorized to impo	ose a forfe	citure in lieu of or in	
S 500 BY OF THIS CITATION PROFESSIONAL SE PO BOX 7190, MAD HOLDER AND AN E CREDENTIAL. PAY	FICE THAT THE CREDE MAILING A CHECK OR IN, TOGETHER WITH THE ERVICES, DIVISION OF ISON, WI 53707-7190. IN INSTABLISHMENT, ONE HOMENT SHALL BE TREAT ROER OF FORFEITURE, N	MONEY ORDER NO IE SIGNED COPY LEGAL SERVICES F THIS CITATION I ALF OF THE FORFE ED AS A PLEA OF N	LATER THAN TWEN OF THIS FORM TO: S & COMPLIANCE, S ISSUED TO BOTH ITURE IS DEEMED TO IO CONTEST TO THE	VTY (20) D. DEPART 1400 E. WA AN INDIV O BE ASSE VIOLATIC	AYS FROM THE DATE MENT OF SAFETY & SHINGTON AVENUE, VIDUAL CREDENTIAL ESSED AGAINST EACH	
	ase reference "NOTICE	OF RIGHT TO C	ONTEST" on backsion		copy. 	
A M	lember of the Board		Date			
#2052DI CC (11/14)						

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COSMETOLOGY EXAMINING BOARD

CITATION FOR ADMINISTRATIVE FORFEITURE

DI SC CASE FILE	# 17 BAC C	-)43	FINAL DECISION AND ORDER #	ORDER	000 5682
SAMI SA			GIANNI HA	r SALO	2
	lential Holder Name		Establishment Name		
License # 124			License # 43842		
			_		
<u>2927 N o.</u> Street	AKLAND AUG		<u>llwaukee</u> v		53211 Zip
Succe			•		•
WGDNGSDA Day of Week	4		Z/14/Z018 te	APPR	Time
•					
On the above stated be corrected.	I time, date and location,	an investigation/	inspection has disclosed th	ne following	violation, which must
GIANNI H	AIR SALON ST	ORED CU	EMING AND DISIN	FECTING	
EQUIPMENT	IN AN UNSEC	MRE LOCA	TION.		
In violation of	Section cos 3.0	•	☐ Wis. Stats.	OR	Wis. Adm. Code
MANGE	SATURE CONTROL OF STAFF		INVESTIGATOR		03/06/2018 Date
Signature of Division	on Investigative Staff		Title \bigcirc		3/12/18
Signature of	☐ Licensee	OR	☐ Establishment (Owner	Date
Signature of	La Electisee	OK	L Establishment	o when	Butt
	Stat. § 454.15(3), the lisciplinary action against		ty is authorized to impo	ose a forfeit	ure in lieu of or in
S O S BY OF THIS CITATIO PROFESSIONAL S: PO BOX 7190, MAD HOLDER AND AN I CREDENTIAL. PAY CONSENT TO AN O	MAILING A CHECK OR N, TOGETHER WITH TERVICES, DIVISION OF DISON, WI 53707-7190. ESTABLISHMENT, ONE FORMENT SHALL BE TREASTREE OF FORFEITURE,	MONEY ORDER HE SIGNED CO F LEGAL SERV IF THIS CITATION HALF OF THE FO TED AS A PLEA NOT TO EXCEE	R MAY DEPOSIT A FOR NO LATER THAN TWEN PY OF THIS FORM TO: ICES & COMPLIANCE, ON IS ISSUED TO BOTH PREITURE IS DEEMED TO FOR NO CONTEST TO THE DETHE AMOUNT OF THE I	NTY (20) DA' DEPARTM 1400 E. WAS: AN INDIVI O BE ASSES VIOLATION DEPOSIT.	YS FROM THE DATE MENT OF SAFETY & HINGTON AVENUE, DUAL CREDENTIAL SED AGAINST EACH CITED ABOVE AND
Ple	ease reference "NOTIC	E OF RIGHT T	O CONTEST" on backsi	de of pink c	opy.
<u></u>	Ul Kohmen		3/29/1	8	
AN	Member of the Board		Date		
#2052DI SC (11/14)	、				

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COSMETOLOGY EXAMINING BOARD

CITATION FOR ADMINISTRATIVE FORFEITURE

2 44 217	FINAL DECISION AND ORDER 0105682
DLSC CASE FILE # 17 BAC 043	ORDER #
SAMI SAUM	
Individual Credential Holder Name	☑ Establishment Name
License # 124696 - 82	License # 43842 - 80
2027	57711
2927 N OAKLAND AVE	MILWAUKESE 53211 City Zip
	1
WEDNESDAY	02/14/2018 APPROX. 10:30 AM Date Time
Day of Week	Date
On the above stated time, date and location, an investig be corrected.	ation/inspection has disclosed the following violation, which must
SAMI SAUM FAILED TO MAI	INTAIN GIANNI HAIR SALON AND ITS
·	PLEMENTS IN A SANITARY, CLEAN,
•	
AND SAFE CONDITION.	
In violation of Section cos 4.01 (1), (3)	of Wis. Stats. OR X Wis. Adm. Code
DANIEL SALZUEDEL	INVESTIGATOR 03/06/2018 Title Date
Signature of Division Investigative Staff	
	3/12/18
Signature of	☐ Establishment Owner Date
	athority is authorized to impose a forfeiture in lieu of or in
addition to other disciplinary action against your lice	nse.
PLEASE TAKE NOTICE THAT THE CREDENTIAL H	OLDER MAY DEPOSIT A FORFEITURE IN THE AMOUNT OF
\$ LOO BY MAILING A CHECK OR MONEY O	ORDER NO LATER THAN TWENTY (20) DAYS FROM THE DATE
OF THIS CITATION, TOGETHER WITH THE SIGNE	D COPY OF THIS FORM TO: DEPARTMENT OF SAFETY & SERVICES & COMPLIANCE, 1400 E. WASHINGTON AVENUE,
PO BOX 7190, MADISON, WI 53707-7190. IF THIS CI	TATION IS ISSUED TO BOTH AN INDIVIDUAL CREDENTIAL
	HE FORFEITURE IS DEEMED TO BE ASSESSED AGAINST EACH
	PLEA OF NO CONTEST TO THE VIOLATION CITED ABOVE AND
CONSENT TO AN ORDER OF FORFEITURE, NOT TO EA	KCEED THE AMOUNT OF THE DEPOSIT.
	KCEED THE AMOUNT OF THE DEPOSIT.

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COSMETOLOGY EXAMINING BOARD

CITATION FOR ADMINISTRATIVE FORFEITURE

					680 5682
DLSC CASE FILE #	17 BAC 043			N AND ORDER	
SAMI SALIM			GIANNI	HAIR SALO	2
✓ Individual Credentia License # 12469	l Holder Name	×	Establishment cense # 43	Name 8842 - 80	
	KLAND AVE	Mu	WAUKEE		53211 Zip
Street		City			Zip
WEDNESDAY Day of Week		02/ Date	14/2018	APP	Time
On the above stated time be corrected.	, date and location, an	investigation/ins	pection has discl	osed the followi	ng violation, which must
TWO BARBICID	E CONTAINER	s were i	TIN demo-	HOUT CLOS	GD LIDS;
ONE BARBICIE	XE CONTAINER	HAD TOO	us only	PARTIALLY	SURMORGED
IN BARBILIDE	AND THE	OTHER BA	irbi ude	CONTAINET	WAS FOUND
ONLY PARTIA	LLY FILLED	WITH BATES	iude.		
In violation of	Section <u>~ 4.02(</u>	(3), (5) of	☐ Wis. Sta	ts. OR	, •
Signature of Division Inv	CZWEDEL		LNUESTIGATO	2	03/06/2018 Date
Signature of Division Inv	estigative Staff		Title	<p></p>	3/12/18
Signature of	☐ Licensee	OR	☐ Establisl	nment Owner	Date
Pursuant to Wis. Stat. addition to other discip			is authorized t	o impose a for	feiture in lieu of or in
PLEASE TAKE NOTICE \$ 100 PROFESSIONAL SERVI PO BOX 7190, MADISON HOLDER AND AN ESTA CREDENTIAL. PAYMEN CONSENT TO AN ORDE	LING A CHECK OR MOGETHER WITH THE CES, DIVISION OF N, WI 53707-7190. IF BLISHMENT, ONE HANT SHALL BE TREATE	MONEY ORDER NE SIGNED COPY LEGAL SERVIC THIS CITATION LF OF THE FORIED AS A PLEA OF	O LATER THAN OF THIS FOR ES & COMPLIA IS ISSUED TO FEITURE IS DEE NO CONTEST T	TWENTY (20) I M TO: DEPAR NCE, 1400 E. W BOTH AN IND MED TO BE ASS O THE VIOLATI	DAYS FROM THE DATE RTMENT OF SAFETY & ASHINGTON AVENUE, IVIDUAL CREDENTIAL SESSED AGAINST EACH
Please	reference "NOTICE (OF RIGHT TO	CONTEST" on	backside of pin	к сору.
())	Rohmen		_ 3	129/18	
A Memb	er of the Board		Date		

FAX #: Phone #:

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

COSMETOLOGY EXAMINING BOARD

CITATION FOR ADMINISTRATIVE FORFEITURE

DLSC CASE FILE # 17 BAC 043	FINAL DECISION AND O ORDER #	RDER 6805682
SAMI SAUM	GIANNI HAIR	SALON
☑ Individual Credential Holder Name	☑ Establishment Name	<u> </u>
License # 124696 - 82	License # <u>43842</u> -	80
Z927 N OAKLAND AVE	MIWAUKEE City	<u>53211</u> Zip
Sireet	•	Zip
LEDNESDAY	02/14/2018 Date	APPROX. 10:30 AM
Day of Week	Date	Time
On the above stated time, date and location, an ibe corrected.	nvestigation/inspection has disclosed the	following violation, which must
GIANNI HAIR SALON AND	SAMI SAUM DID NOT S	TOIRE WAX STIZIPS,
WOOD APPLICATIONS / SPATILLAS	, BIZUSHES, COMRS, SCI	SSORS, CLIPPORS,
GUIDES, TOUGLS, AND PA		
In rightion of Section and 1102	(4) of \square Wis. Stats.	OR Wis. Adm. Code
In violation of Section cos 4.02		, -
Signature of Division Investigative Staff	INVESTIGATOR Title) 3/06/za8 Date
2.50		7/12/18 Note Date
Signature of	OR	vner Date
D	-i	a foufoituus in lian of on in
Pursuant to Wis. Stat. § 454.15(3), the licen addition to other disciplinary action against y		e a fortenure in neu of or in
PLEASE TAKE NOTICE THAT THE CREDENT SIGN OF THIS CITATION, TOGETHER WITH THE PROFESSIONAL SERVICES, DIVISION OF LIPO BOX 7190, MADISON, WI 53707-7190. IF THOLDER AND AN ESTABLISHMENT, ONE HALL CREDENTIAL. PAYMENT SHALL BE TREATED CONSENT TO AN ORDER OF FORFEITURE, NOT	TIAL HOLDER MAY DEPOSIT A FORFI DNEY ORDER NO LATER THAN TWENT SIGNED COPY OF THIS FORM TO: EGAL SERVICES & COMPLIANCE, 140 THIS CITATION IS ISSUED TO BOTH A OF THE FORFEITURE IS DEEMED TO D AS A PLEA OF NO CONTEST TO THE VI	Y (20) DAYS FROM THE DATE DEPARTMENT OF SAFETY & 00 E. WASHINGTON AVENUE, IN INDIVIDUAL CREDENTIAL BE ASSESSED AGAINST EACH IOLATION CITED ABOVE AND
Please reference "NOTICE O	F RIGHT TO CONTEST" on backside	of pink copy.
() Ploto and all	3/29/18	
A Member of the Board	Date	
W202277 GG (41/44)		