WISCONSIN DEPARTMENT OF SAFETY AND PROFESSIONAL SERVICES



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Phone #:

(608) 266-2264 (608) 266-2112

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

COSMETOLOGY EXAMINING BOARD

CITATION FOR ADMINISTRATIVE FORFEITURE

	1		
DLSC CASE FILE	# 17BAC107	FINAL DECISION AND ORDER ORDER #	68959 72
		NATURE NAILS & S	CA
☐ Individual Crede	ential Holder Name	■ Establishment Name License # 3741-71	
62417	27TH ST	(000 EKIO 11)	()) 2 7
Street		City	53227
THURSDAY		41-71-7-20	Zip -
Day of Week		1-26-2018 Date	Time
0-4-1			
be corrected.	time, date and location, an i	investigation/inspection has disclosed the following	g violation, which must
	LICA Son Collect	to dispose of Single-use	(00/00/
		10 0,5 mse or 3,1191e - 05e	CONFACT
(qoijmui)	t after USE.		
	C . 1		
In violation of	Section Cos 4.10	P(4) of □ Wis. Stats. OR	Wis. Adm. Code
TAOM	2/2	INVESTIGATOR	11-22-269
Signature of Division	n Investigative Staff	Title	Date
Nun			$\frac{11 - 10 - 1}{\text{Date}}$
Signature of	☐ Lisensee	OR Establishment Owner	Date
Pursuant to Wis. S	Stat. 8 454.15(3), the licen	sing authority is authorized to impose a forf	eiture in lieu of or in
addition to other dis	sciplinary action against y	our license.	
\$ 100 BY INDEPENDENT	MAILING A CHECK OR MO I, TOGETHER WITH THE RVICES, DIVISION OF L ISON, WI 53707-7190. IF T STABLISHMENT, ONE HAI MENT SHALL BE TREATEL RDER OF FORFEITURE, NO	TIAL HOLDER MAY DEPOSIT A FORFEITURE ONEY ORDER NO LATER THAN TWENTY (20) DISIGNED COPY OF THIS FORM TO: DEPARTIBE SERVICES & COMPLIANCE, 1400 E. WATHIS CITATION IS ISSUED TO BOTH AN INDICATOR OF THE FORFEITURE IS DEEMED TO BE ASSED AS A PLEA OF NO CONTEST TO THE VIOLATION TO EXCEED THE AMOUNT OF THE DEPOSIT.	AYS FROM THE DATE IMENT OF SAFETY & ASHINGTON AVENUE, VIDUAL CREDENTIAL ESSED AGAINST EACH ON CITED ABOVE AND
Ple	ase reference "NOTICE C	OF RIGHT TO CONTEST" on backside of pink	copy.
AM	lember of the Board	12-3-2018 Date	RECEIVED
#3053DLSC (11/14)			NOV 1 5 2018
Ch.454, Stats.		Equal Opportunity in Employment and Licensing	2018

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COSMETOLOGY EXAMINING BOARD

CITATION FOR ADMINISTRATIVE FORFEITURE

DI GG G L	#17BAC107	FINAL DECISION AND ORDER	
DLSC CASE FILE	# 1 +B/1C 10'+	ORDER#	. 608924 c
		NATURE NAILS &	SPA
License #	lential Holder Name	区 Establishment Name License # 37 (1-71	
624 <u>1</u> Street	S. 27-H ST	GREENFIELD WI	53221
I HURSOAY Day of Week		<u> </u>	Zip
			Time
On the above stated be corrected.	time, date and location, an inve	estigation/inspection has disclosed the following	ng violation, which must
NATURE N	lails & SPA failec	I to keep disinfectant 1	n a
Coverso	CONFAMEL.		
In violation of	Section Cos 4.02C	of Wis. Stats. OR	Wis. Adm. Code
1h/m	2/2	INVESTIGATOR	11-2-2018
Signature of Division	n Investigative Staff	Title	Date
Qua _	OT L	The Establishment Common	11 - 10-18
Signature of	☐ Licensee OR	Establishment Owner	Date
		g authority is authorized to impose a for	feiture in lieu of or in
addition to other di	sciplinary action against your	license.	
\$ 100 BY OF THIS CITATION PROFESSIONAL SE PO BOX 7190, MAD HOLDER AND AN E CREDENTIAL. PAY CONSENT TO AN O	MAILING A CHECK OR MONE N, TOGETHER WITH THE SIGNICES, DIVISION OF LEGA ISON, WI 53707-7190. IF THIS ISTABLISHMENT, ONE HALF OF IMENT SHALL BE TREATED AS INDER OF FORFEITURE, NOT TO	L HOLDER MAY DEPOSIT A FORFEITURE BY ORDER NO LATER THAN TWENTY (20) IF THE COPY OF THIS FORM TO: DEPAR AL SERVICES & COMPLIANCE, 1400 E. WE SERVICES & COMPLIANCE, 1400 E. WE SERVICES TO BOTH AN INDOFF THE FORFEITURE IS DEEMED TO BE ASSES A PLEA OF NO CONTEST TO THE VIOLATION EXCEED THE AMOUNT OF THE DEPOSIT.	TAYS FROM THE DATE THE TAY THE TATE THE TAY TH
Ple	ase reference "NOTICE OF I	RIGHT TO CONTEST" on backside of pin	к сору.
() . /) 		
1	ll Rohman	12-3-20 B Date	

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

Committed to Equal Opportunity in Employment and Licensing

Wisconsin Department of Safety and Professional Services Mail To: P.O. Box 7190 Madison, WI 53707-7190 Madison, WI 53707-7190 Madison, WI 53703

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COSMETOLOGY EXAMINING BOARD

CITATION FOR ADMINISTRATIVE FORFEITURE

	ON LITORE	
DLSC CASE FILE# 17BAC 107	FINAL DECISION AND ORDER ORDER #	603 5972
☐ Individual Credential Holder Name License #	NATURE NAILS & S Establishment Name License # 3741-71	<u> </u>
6241 S, 27TH ST Street	GREENFIELD WI	53221 zip
THURSDAY Day of Week	1-26-2018 Date	Time
On the above stated time, date and location, an investigate corrected.		
NATURE NAILS & SPA failed to Contact equipment after use of	clean and disinfect on each client.	reusable
In violation of Section Cos 4. 82(39)	of Uwis. Stats. OR	X Wis. Adm. Code 11-2-2818
Signature of Division Investigative Staff	Title	Date
Signature of	M Facility and Owner	11-10-18 Date
Pursuant to Wis. Stat. § 454.15(3), the licensing au addition to other disciplinary action against your licensing au addition to other disciplinary action against your licensing au addition to other disciplinary action against your licensing au addition to other disciplinary action against your licensisters. By Mailing a Check or Money of this citation, Together with the signed professional services, division of Legal po Box 7190, Madison, WI 53707-7190. IF THIS CITATION AND AN ESTABLISHMENT, ONE HALF OF THE CREDENTIAL. PAYMENT SHALL BE TREATED AS A FONSENT TO AN ORDER OF FORFEITURE, NOT TO EX	OLDER MAY DEPOSIT A FORFEITURE PROBER NO LATER THAN TWENTY (20) DOUGLOUS OF THIS FORM TO: DEPART SERVICES & COMPLIANCE, 1400 E. WASTATION IS ISSUED TO BOTH AN INDIVITE FORFEITURE IS DEEMED TO BE ASSEPLEA OF NO CONTEST TO THE VIOLATIC	IN THE AMOUNT OF AYS FROM THE DATE IMENT OF SAFETY & SHINGTON AVENUE, VIDUAL CREDENTIAL ESSED AGAINST EACH
	HT TO CONTEST" on backside of pink	copy.

#3053DLSC (11/14)

Ch.454, Stats.

A Member of the Board

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Wisconsin Department of Safety and Professional Services

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Madison, WI 53707-7190

FAX #: Phone #:

(608) 266-2264 (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 # 17 BAC 16)7 FI	NAL DECISION ANI RDER #	O ORDER	66597 2
		NATURE NAIL	s & SPA	?
☐ Individual Credential Holder Name				<u>/</u>
License #	Ĺi	Establishment Name cense # 3741-	71	
6241 S. 27TH ST Street	Gre	ENFIELD WI		53222
Succi	City			Zip
1 HUNSDAY	4-2	6-28-18		
Day of Week	Date			Time
On the above stated time, date and location, a be corrected.	ın investigation/insp	pection has disclosed th	ne following	violation, which must
NATURE NAILS & SPA did not	Store clean	towels aesther	Liris hrus	hes and amps.
evelores scissors noil bos	thes not file	5 1 10 x 20 cm 5 h	- mc Cox	Las Stans
eyebrow scissors, nail brus pedicure Sandals, buffer b	locks - 1	150-50 11- 01-	431 -01	0 (12)
Containe Schools, DOFFER C	rocks, and	disposible Sic	Ves 111	G Covered
Container.				
In violation of Section OS 4.6	FC(L) of	☐ Wis. Stats.	OR	Wis. Adm. Code
7/10 m 02		INVESTIGATOR		11-2-2028
Signature of Division Investigative Staff		Title		Date
Qm)				$\frac{11-10-18}{\text{Date}}$
Signature of Licensee	OR	☐ Establishment (Owner	Date
Pursuant to Wis. Stat. § 454.15(3), the lic addition to other disciplinary action agains		s authorized to impo	ose a forfeit	ure in lieu of or in
PLEASE TAKE NOTICE THAT THE CREDI \$ 100 BY MAILING A CHECK OR OF THIS CITATION, TOGETHER WITH TO PROFESSIONAL SERVICES, DIVISION OF PO BOX 7190, MADISON, WI 53707-7190. I HOLDER AND AN ESTABLISHMENT, ONE H	MONEY ORDER NO HE SIGNED COPY LEGAL SERVICE F THIS CITATION	O LATER THAN TWEN OF THIS FORM TO: ES & COMPLIANCE, IS ISSUED TO BOTH	NTY (20) DAN DEPARTM 1400 E. WASI AN INDIVI	YS FROM THE DATE ENT OF SAFETY & HINGTON AVENUE, DUAL CREDENTIAL

Please reference "NOTICE OF RIGHT TO CONTEST" on backside of pink copy.

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.

A Member of the Board

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

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

Madison, WI 53707-7190

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Madison, WI 53703

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COSMETOLOGY EXAMINING BOARD

CITATION FOR ADMINISTRATIVE FOREEITIDE

			-STIGITIVE TORI EITURE	
DLSC CASE FILE # 17BAC107		7	FINAL DECISION AND ORDER ORDER #	QQD597 2
			NATURE NAILS & SP,	9
☐ Individual Ci	redential Holder Name		☑ Establishment Name License # 3741-71	
6241 Street	S. 27TH ST		ONEGNFIELD WI	53222
THURSDAY				Zip
Day of Week			-26-2018 Date	Ti
				Time
On the above stat be corrected.	ted time, date and location	, an investigation	n/inspection has disclosed the following	g violation, which must
de corrected.				
NATURE	NAILS & SPA W	as dirty	and unsanitary.	
			,	
In violation of	Section Cos L	1.01 C1) of	☐ Wis. Stats. OR	Wis. Adm. Code
TMAN	1 /2-		INVESTIGATOR	11-2-2018
Signature of Divis	sion Investigative Staff		Title	Date
01100				11-10-18
Signature of	☐ Licensee	OR	Establishment Owner	Date
	U			
Pursuant to Wis	s. Stat. § 454.15(3), the l	icensing author	rity is authorized to impose a forfe	eiture in lieu of or in
addition to other	disciplinary action agair	ist your license.		
PLEASE TAKE N	NOTICE THAT THE CREI	DENTIAL HOLD	ER MAY DEPOSIT A FORFEITURE	IN THE AMOUNT OF
e 100 = e	RY MAILING A CHECK OF	R MONEY ORDE	ER NO LATER THAN TWENTY (20) D.	AYS FROM THE DATE
OF THIS CITATI	ON, TOGETHER WITH	THE SIGNED C	OPY OF THIS FORM TO: DEPART	MENT OF SAFELY &
PROFESSIONAL	SERVICES, DIVISION C	OF LEGAL SEK	VICES & COMPLIANCE, 1400 E. WA TON IS ISSUED TO BOTH AN INDIV	VIDUAL CREDENTIAL
HOLDED AND AN	U ECTADI ICHMENT ONE	HALF OF THE F	ORFELLIKE IS DEFWED IO RE VOOR	SOED AGAINST EACH
CREDENTIAL P	AYMENT SHALL BE TREA	ATED AS A PLEA	A OF NO CONTEST TO THE VIOLATIC	ON CITED ABOVE AND
CONSENT TO AN	ORDER OF FORFEITURE	, NOT TO EXCE	ED THE AMOUNT OF THE DEPOSIT.	
	DI WATER	TE OF DICHT	TO CONTEST" on backside of nink	conv.

A Member of the Board

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

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COSMETOLOGY EXAMINING BOARD

CITATION FOR ADMINISTRATIVE FORFEITURE

				_	
DLSC CASE FILE # 17BAC107			FINAL DECISION AND ORDER ORDER #		
			NATURE NAK	r & SA	14
☐ Individual Creden	tial Holder Name				, ,
License #	THE TRANSPORT OF THE PROPERTY	عر Li	Establishment Name cense # 3741-	71	
GY11 S. 2'	7TH ST	Gn a	ENFIELD WI		53221
Street	7 1 (7 0 (City	on Ficch (or t		Zin
TIL . 5001/		11-	(> 0 4 8		2.p
Day of Week		<u> </u>	6-2018		
Day of week		Date			Time
On the above stated tir	me, date and location, a	n investigation/ins	pection has disclosed the	ne followin	g violation, which must
be corrected.	,	·	discreted in	ic followin	g violation, which must
NATURE NAILS	& SPA Stored	cleaning a	nd disinfecting	equip	Ment in
unsecured !			,		
		()			
In violation of	Section Cos 3.	$$2(6)_{\text{of}}$	☐ Wis. Stats.	OR	Wis. Adm. Code
Ja am	7-	<u> </u>	_		11-2-2018
Signature of Division I	nvestigative Staff		TANGEST I GATOR Title		Date Date
organical your Division i	investigative Staff		Title		Date 18
Simulation	N.M.:	OD	□ □ □ □ □ □ □ □ □ □		71 - 10 - 18 Date
Signature of	Licensee	OR	Establishment (Jwner	Date
Pursuant to Wis Sta	nt. § 454.15(3), the lice	ensing authority	is authorized to impo	nse a forfe	iture in lieu of or in
	iplinary action against		is authorized to imp	056 4 10116	iture in neu or or in
	Printer J. moore in Brown in	, - uz			
PLEASE TAKE NOTIC	CE THAT THE CREDE	NTIAL HOLDER !	MAY DEPOSIT A FOR	RFEITURE	IN THE AMOUNT OF
\$ 100 BY M.	AILING A CHECK OR N	MONEY ORDER N	OF THE FORM TO:	NTY (20) D.	AYS FROM THE DATE
OF THIS CITATION,	TOGETHER WITH TH	E SIGNED COPY	OF THIS FORM TO:	DEFAK 1400 E. WA	SHINGTON AVENUE.
PROFESSIONAL SERV	ON, WI 53707-7190. IF	THIS CITATION	IS ISSUED TO BOTH	AN INDI	VIDUAL CREDENTIAL
HOLDER AND AN EST	CABLISHMENT, ONE HA	ALF OF THE FORF	EITURE IS DEEMED T	O BE ASSE	SSED AGAINST EACH
CREDENTIAL, PAYMI	ENT SHALL BE TREATI	ED AS A PLEA OF	NO CONTEST TO THE	VIOLATIC	N CITED ABOVE AND
CONSENT TO AN ORD	DER OF FORFEITURE, N	OT TO EXCEED T	HE AMOUNT OF THE I	DEPOSIT.	
		OR DIGITAL TO		do of mini-	00057
Pleas	e reference "NOTICE	OF RIGHT TO (JUNTEST" on backsi	ae oi pink	copy.

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

A Member of the Board

Date

Wisconsin Department of Safety and Professional Services

Madison, WI 53707-7190

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Madison, WI 53703

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

COSMETOLOGY EXAMINING BOARD

CITATION FOR ADMINISTRATIVE FORFEITURE

DLSC CASE FILE #	17BAC181	FINAL DECISION AND ORDER ORDER #	0483772.
		NATURE NAILS &	SPA 1
☐ Individual Creden License #	tial Holder Name	Establishment Name License # 3741-71	
()111	777 (-		
Street	o d TTH ST	GREENFIELD WI	53221
Succi		City	Zip
THURSDAY		4-36-3818	
Day of Week		Date	Time
Nature Nails aestherics by	allowing Theresa I license and while A	the unlicensed fractice of Pham to froudles manicuring a lature Nails & Spa's aesthet	Menicoring and
In violation of	Section Cos 2.040	\bigcirc Of \square Wis. Stats. OR	X Wis. Adm. Code
TMOM	12	INESTIGATOR	11-2-2018
Signature of Division I	nvestigative Staff	Title	Date
ams			11-1078
Signature of	☐ Licensee OR		Date
addition to other disci	plinary action against your	g authority is authorized to impose a for license. HOLDER MAY DEPOSIT A FORFEITURE	
TENT TIME HOLD			

\$ 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 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.

RIMOL A Member of the Board

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