WISCONSIN DEPARTMENT OF SAFETY AND PROFESSIONAL SERVICES



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

COSMETOLOGY EXAMINING BOARD

CITATION FOR ADMINISTRATIVE FORFEITURE

DLSC CASE FILE # 18BACO24	FINAL DECISION AND ORDER (ORDER # SPI) 00 6±34
☐ Individual Credential Holder Name License #	Establishment Name License # 5150 - 7-1	
2064 LIME KILN ROAD	SIGEN BAY WI	543 <u>11</u>
HURSDAY Day of Week	2-6-2028 Date	Time
On the above stated time, date and location, an investigation be corrected.	_	
hord Nais & Spa assisted in the by allowing Le Bui to Dravide Manicurist of Cosmetelogist I.a.	unlicensed practice of nanicuring Services Witzase.	-Manicuring -hout a
In violation of Section (OS 2.04(1) of		Wis. Adm. Code
Sibratura & Ministrative State	INCSTIGATOR Title	3-27-2019 Date
Signature of Division Investigative Staff	Title	
Signature of	Establishment Owner	4-8-1 Q Date
	Establishment Owner ority is authorized to impose a forfei	H-8-1€ Date
Signature of Licensee OR Pursuant to Wis. Stat. § 454.15(3), the licensing author	Establishment Owner OFFICE THE THAN TWENTY (20) DAY COPY OF THIS FORM TO: DEPARTM EVICES & COMPLIANCE, 1400 E. WAS TION IS ISSUED TO BOTH AN INDIVI- FORFEITURE IS DEEMED TO BE ASSES A OF NO CONTEST TO THE VIOLATION	Date Ture in lieu of or in THE AMOUNT OF YS FROM THE DATE MENT OF SAFETY & SHINGTON AVENUE, IDUAL CREDENTIAL SEED AGAINST EACH
Signature of ☐ Licensee OR Pursuant to Wis. Stat. § 454.15(3), the licensing authoraddition to other disciplinary action against your licensee PLEASE TAKE NOTICE THAT THE CREDENTIAL HOLI \$ ☐ BY MAILING A CHECK OR MONEY ORD OF THIS CITATION, TOGETHER WITH THE SIGNED OF THIS CITATION, TOGETHER WITH THE SIGNED OF PROFESSIONAL SERVICES, DIVISION OF LEGAL SERFO BOX 7190, MADISON, WI 53707-7190. IF THIS CITATION OF LEGAL SERFO BOX 7190, MADISON, WI 53707-7190. IF THIS CITATION OF LEGAL SERFO BOX 7190, MADISON, WI 53707-7190. IF THIS CITATION OF LEGAL SERFO BOX 7190, MADISON, WI 53707-7190. IF THIS CITATION OF LEGAL SERFO BOX 7190, MADISON, WI 53707-7190. IF THIS CITATION OF LEGAL SERFO BOX 7190, MADISON, WI 53707-7190. IF THIS CITATION OF LEGAL SERFO BOX 7190, MADISON, WI 53707-7190. IF THIS CITATION OF LEGAL SERFO BOX 7190, MADISON, WI 53707-7190. IF THIS CITATION OF LEGAL SERFO BOX 7190, MADISON, WI 53707-7190. IF THIS CITATION OF LEGAL SERFO BOX 7190, MADISON, WI 53707-7190. IF THIS CITATION OF LEGAL SERFO BOX 7190, MADISON, WI 53707-7190. IF THIS CITATION OF LEGAL SERFO BOX 7190, MADISON, WI 53707-7190. IF THIS CITATION OF LEGAL SERFO BOX 7190, MADISON SERFO BOX	Establishment Owner Prity is authorized to impose a forfeit. DER MAY DEPOSIT A FORFEITURE IN THE TOTAL THAN TWENTY (20) DAY OF THIS FORM TO: DEPARTMENT OF THE SECOND TO BOTH AN INDIVISION IS ISSUED TO BOTH AN INDIVISION IS ISSUED TO BOTH AN INDIVISION FORFEITURE IS DEEMED TO BE ASSESS A OF NO CONTEST TO THE VIOLATION ED THE AMOUNT OF THE DEPOSIT.	Date Ture in lieu of or in The amount of the date of

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	# <u>18 BACG</u>	24	FINAL DECISION AND ORDER #	<u> </u>	Do : So	
☐ Individual Crede	ential Holder Name		MURLO NAVS O M Establishment Name License # SZSQ-7	·		_
2064 LIN	1E KILN N	CAO C	BAY WI		54311 zip	
THUSOAY Day of Week		Date of the state	2-6-2018 te		Time	
World NAL	time, date and location 5 C Spa all envices with ent is not	aved Huya	Stablishment c	yen to	provide n the	nust
In violation of Signature of Division	MTz	2.045C1)f	☐ Wis. Stats. TWEST IGATOR Title	or À	Wis. Adm. Co 3-27-20 Date	
Signature of	☐ Licensee	OR	Establishment O		H-8-16 Date	
Pursuant to Wis. Saddition to other dis	tat. § 454.15(3), the ciplinary action agai	licensing authorit nst your license.	y is authorized to impos	e a forfeitur	re in lieu of or	in
PROFESSIONAL SERVING BY METHIS CITATION, PROFESSIONAL SERVING BOX 7190, MADISTOLUTION BOX 7190, MADIST	MAILING A CHECK O , <u>TOGETHER WITH</u> RVICES, DIVISION (SON, WI 53707-7190. STABLISHMENT, ONE MENT SHALL BE TRE	R MONEY ORDER THE SIGNED COF DF LEGAL SERVI IF THIS CITATIO HALF OF THE FOR ATED AS A PLEA OF	R MAY DEPOSIT A FORF NO LATER THAN TWENT PY OF THIS FORM TO: CES & COMPLIANCE, 14 ON IS ISSUED TO BOTH ARFEITURE IS DEEMED TO DE NO CONTEST TO THE VECTOR OF THE DESIGN OF	Y (20) DAYS DEPARTME 00 E. WASHI AN INDIVIDU BE ASSESSE	S FROM THE DA NT OF SAFETY NGTON AVENU JAL CREDENTL	TE / & JE, AL
	se reference "NOTION TO THE SECOND SE	CE OF RIGHT TO	OCONTEST" on backside		у.	
3053DLSC (11/14)	TT VALUE APVINE		Date			

Ch.454, Stats.

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Madison, WI 53707-7190

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Madison, WI 53703

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COSMETOLOGY EXAMINING BOARD

CITATION FOR ADMINISTRATIVE FORFEITURE

DLSC CASE FILE	E# 18BACOJL	FIN OR	AL DECISION AND DER #	ORDER	0006
	<u> </u>		VOILD NAILS	I S	DΑ
☐ Individual Cre- License #	dential Holder Name	Ď.	Establishment Name nse # \$150-1		
2064 Street	LME KILN ROAL) Gree	WBAY WI		54371 Zip
HUNSDAY Day of Week		Z - Date	6-20-28		Time
be corrected.	d time, date and location, an invalue of the cleaned a				
that car each Use	inot be cleaned a	vg gizivi	ected or S	terinz	ed following
In violation of	Section Cos 4,26	(4) of	☐ Wis. Stats.	OR	Wis. Adm. Code
MAINO	72		INVESTIGATOR	<u>. </u>	3-27-2019
Signature of Divisi	on Investigative Staff		Title		Date
			No.		4-8-19
Signature of	☐ Licensee Ol	3	Exablishment (Owner	Date
Addition to other of PLEASE TAKE NO SECTION THIS CITATION PROFESSIONAL SECTION PROFESSION AND AN CREDENTIAL. PAY	Stat. § 454.15(3), the licensing disciplinary action against your office that the credential mailing a check or monion, together with the side ervices, division of legolson, wi 53707-7190. If this establishment, one half officer of forfeiture, not together of forfeiture, not together of the stable of the stab	L HOLDER MA EY ORDER NO GNED COPY C AL SERVICES S CITATION IS DF THE FORFEI S A PLEA OF NO	AY DEPOSIT A FOR LATER THAN TWENDE THIS FORM TO: & COMPLIANCE, SISSUED TO BOTH TURE IS DEEMED TO CONTEST TO THE	EFEITURE VTY (20) DA DEPART 1400 E. WA AN INDIV D BE ASSE VIOLATIO	IN THE AMOUNT OF AYS FROM THE DATE MENT OF SAFETY & SHINGTON AVENUE, I'DUAL CREDENTIAL SSED AGAINST EACH
Pi	ease reference "NOTICE OF I	aght to cc	ONTEST" on backsion	de of pink	copy.
<u></u>	W Kohmen		_4-12-1	9	
AN	Member of the Board		Date	-	_

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COSMETOLOGY EXAMINING BOARD

CITATION FOR ADMINISTRATIVE FORFEITURE

DLSC CASE FIL	E# 18BACO	\ 1 \ 1	NAL DECISION AND RDER #		0006183
			WONLD NAKS	<u> </u>	<u>PA</u>
☐ Individual Cre License #	edential Holder Name		Establishment Name cense # <u>S 1 S8 - 1</u>		
2064 Street	LIME KILN RO,	AD City	EN BAY WI		S4311 Zip
HURSDAY Day of Week	***************************************	Date	-6-2018		Time
be corrected. WORLD	ed time, date and location, a Walls & Spa Stor (Ured locations.	,	•		-
	Section_3.01(
In violation of	Section J. G.L.	(b) (05 of	☐ Wis. Stats.	OR	Wis. Adm. Code
Signature of Divis	sion Investigative Staff		TNVESTIGATOR Title		3 -2 7 -2819 Date
Signature of Divis	non mivestigative Staff		- Jee		
Signature of	☐ Licensee	OR	Establishment C	wner	<u>4-8-19</u> Date
Addition to other PLEASE TAKE N S	. Stat. § 454.15(3), the lice disciplinary action against OTICE THAT THE CREDE Y MAILING A CHECK OR ON, TOGETHER WITH THE SERVICES, DIVISION OF ADISON, WI 53707-7190. IN ESTABLISHMENT, ONE HAYMENT SHALL BE TREAT ORDER OF FORFEITURE, N	ENTIAL HOLDER OF MONEY ORDER NEW SIGNED COPY LEGAL SERVICE THIS CITATION LALF OF THE FORE TED AS A PLEA OF	MAY DEPOSIT A FOR O LATER THAN TWEN OF THIS FORM TO: ES & COMPLIANCE, 1 IS ISSUED TO BOTH FEITURE IS DEEMED TO NO CONTEST TO THE	FEITURE TY (20) D DEPART 400 E. WA AN INDI D BE ASSE VIOLATIO	IN THE AMOUNT OF AYS FROM THE DATE IMENT OF SAFETY & SHINGTON AVENUE, VIDUAL CREDENTIAL ESSED AGAINST EACH
	Please reference "NOTICE				conv

Wisconsin Department of Safety and Professional Services Mail To: P.O. Box 7190 Madison, WI 53707-7190 Professional Services 1400 E. Washington Avenue Madison, WI 53703

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COSMETOLOGY EXAMINING BOARD

CITATION FOR ADMINISTRATIVE FORFEITURE

Signature of Division Investigative Staff Title Date 1-8-19 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 S. 150.98 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. A Member of the Board Date						
Individual Credential Holder Name License # Li	DLSC CASE FILE #	18BACO		RDER#		
Street City Zip		ntial Holder Name	Ż Ĺ	<i>†</i>	•	
Date Time On the above stated time, date and location, an investigation/inspection has disclosed the following violation, which must be corrected. World Names Sea Was not Mantained in a soft and Santary Condition. In violation of Section Cos Gold of Mantained in a soft and Santary Condition. In violation of Section Cos Gold of Mantained in a soft and Santary Condition. In violation of Section Cos Gold of Mantained in a soft and Santary Condition. In violation of Section Cos Gold of Mantained in a soft and Santary Condition. In violation of Section Cos Gold of Mantained in a soft and Santary Condition. In violation of Section Cos Gold of Mantained in a soft and Santary Condition. In violation of Section Cos Gold of Mantained in a soft and Santary Condition. In violation of Section Cos Gold of Mantained in Cos Santary Condition. In violation of Section Cos Gold of Mantained In Cos Santary Condition. In violation of Section Cos Gold of Mantained In Cos Santary Condition. In violation of Section Cos Gold of Mantained In Cos Santary Condition. In violation of Section Cos Gold of Mantained In Cos Gold of Inc. In violation of Section Cos Gold of Mantained In Cos Gold of Inc. In violation of Section Cos Gold of Mantained In Cos Gold of Inc. In violation of Section Cos Gold of Inc. In violation of Cos Go		KIW ROAD	Grand City	en Bay WI		54311 zip
In violation of Section Cos J. 120 of Wis. Stats. OR Wis. Adm. Code Signature of Division Investigative Staff Title Date H-8-19 Signature of Cos Licensee OR Detablishment 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 \$ 155.98 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 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. A Member of the Board			Date Date	6-2018		Time
In violation of Section Cos 4.0101 of Wis. Stats. OR Wis. Adm. Code Jandstigation of Section Cos 4.0101 of Wis. Stats. OR Wis. Adm. Code Jandstigation Signature of Division Investigative Staff Title Date H-8-19 Signature of Licensee OR Brablishment 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 S. 189.98 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. A Member of the Board Date	On the above stated t be corrected.	ime, date and location,	an investigation/ins	pection has disclosed th	e followin	ng violation, which must
Signature of Division Investigative Staff Title 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 S. 182.38 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, PROFESSIONAL SERVICES, DIVISION OF LEGAL SERVICES & COMPLIANCE, 1400 E. WASHINGTON AVENUE, 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. A Member of the Board Date	WORLD NAILS	& SpA Was	not Mantaine	ed in a safe o	and 5	anitary condition.
Signature of Licensee OR Detablishment 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 \$ 100.000 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. A Member of the Board Date	In violation of Signature of Division	72	01(1)of	INVESTIGATION	OR	3-27-2019
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 \$ 150.0000 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.			OR	De	Jumer	4
Please reference "NOTICE OF RIGHT TO CONTEST" on backside of pink copy. A Member of the Board Date	PLEASE TAKE NOTI \$ 166,000 BY M OF THIS CITATION, PROFESSIONAL SER PO BOX 7190, MADIS HOLDER AND AN ES CREDENTIAL. PAYM	CE THAT THE CRED IAILING A CHECK OR TOGETHER WITH TOUTH TOUT	ST YOUR LICENSE. SENTIAL HOLDER OF THE SIGNED COPY F LEGAL SERVICE IF THIS CITATION HALF OF THE FORF TED AS A PLEA OF	MAY DEPOSIT A FOR O LATER THAN TWEN OF THIS FORM TO: ES & COMPLIANCE, IS ISSUED TO BOTH TEITURE IS DEEMED TO NO CONTEST TO THE	FEITURE ITY (20) D DEPART 400 E. WA AN INDIY D BE ASSE VIOLATIO	IN THE AMOUNT OF AYS FROM THE DATE IMENT OF SAFETY & ASHINGTON AVENUE, WIDUAL CREDENTIAL ESSED AGAINST FACH
A Member of the Board Date						
A Member of the Board Date		a 0.1.				copy.
	A Me:	mber of the Board		Date		<u> </u>

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 #	18BACO24	ORD			0061-24
			orld NAILS G	L SPA	
☐ Individual Credenti License #	al Holder Name	E	stablishment Name se# 5150-5	11	
2064 LME Street	KUN ROAD	Gn.EG City	N BAY WI		54311 Zip
THUNSOAY Day of Week		12-6 Date	-2018		Time
On the above stated time be corrected.					
of Contect	s C Spa fail	ed to tollow	blober blare	dure tor	- disinfection
In violation of	Section Cos 4,0	<u>2(3)</u> of	□ Wis. Stats. INGSTIGATOR		Wis. Adm. Code 3-27-2619
Signature of Division In	ivestigative Staff		Title		Date H -8-19
Signature of	☐ Licensee	OR	Establishment O	wner	Date
Pursuant to Wis. Stat addition to other discip			uthorized to impos	se a forfeitu	re in lieu of or in
PLEASE TAKE NOTICE \$100.000. BY MA OF THIS CITATION, I PROFESSIONAL SERV PO BOX 7190, MADISO HOLDER AND AN ESTACREDENTIAL. PAYME CONSENT TO AN ORDE	LILING A CHECK OR MODIFIED AND A CHECK OF MITHER WITH THE ICES, DIVISION OF N, WI 53707-7190. IF ABLISHMENT, ONE HANT SHALL BE TREATE	ONEY ORDER NO LESIGNED COPY OF LEGAL SERVICES & THIS CITATION IS LEFORE THE FORFEIT CD AS A PLEA OF NO	ATER THAN TWENT THIS FORM TO: COMPLIANCE, 14 ISSUED TO BOTH URE IS DEEMED TO CONTEST TO THE V	TY (20) DAYS DEPARTME 400 E. WASH AN INDIVID BE ASSESSI /IOLATION (S FROM THE DATE ENT OF SAFETY & INGTON AVENUE, UAL CREDENTIAL ED AGAINST EACH
Please	reference "NOTICE	OF RIGHT TO CO			by.
A Mem	ber of the Board		Date		

Wisconsin Department of Safety and Professional Services

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

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COSMETOLOGY EXAMINING BOARD

CITATION FOR ADMINISTRATIVE FORFEITURE

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DLSC CASE FILE	= # 18BACO24		FINAL DECISION ANI ORDER #	ORDER	QQQ61-2A
			WORLD NAILS	I SPA	
☐ Individual Cree License #	dential Holder Name		Establishment Name License # 5150-7		
20511	1 \				
2004 LV	ME KILN ROAD		REEN BAY WI		54311
Street		Ci	ty		Zip
711.000011		1-	2-6-2018		
Day of Week					
Day of Week		Da	ite		Time
be corrected.	d time, date and location, a				
Covered Co	s at Spa did n ontainer.	UT 5101 E	Clean Conta	1 tq	upment in a
In violation of	Section Cos 4.1	22(Y) of	☐ Wis. Stats.	OR	Wis. Adm. Code
MY M	1/2	<u>-</u>	IMESTIGATOR		3-27-2019
Signature of Division	on Investigative Staff		<u>Title</u>		Date
			Ju .		4-8-19
Signature of	☐ Licensee	OR	Establishment	Owner	Date
addition to other d	Stat. § 454.15(3), the lid disciplinary action agains OTICE THAT THE CREDITION	t your license.			
\$ 160,000 BY OF THIS CITATIO	' MAILING A CHECK OR N, <u>TOGETHER WITH TI</u>	MONEY ORDER HE SIGNED CO	R NO LATER THAN TWE PPY OF THIS FORM TO	NTY (20) D : DEPAR	AYS FROM THE DATE IMENT OF SAFETY &
	SERVICES, DIVISION OF				
	DISON, WI 53707-7190. I ESTABLISHMENT, ONE H				
CREDENTIAL. PAY	YMENT SHALL BE TREAT	TED AS A PLEA	OF NO CONTEST TO THE	VIOLATIO	ON CITED ABOVE AND
CONSENT TO AN C	ORDER OF FORFEITURE, 1	NOT TO EXCEEL	THE AMOUNT OF THE	JEPOSII.	
PI	lease reference "NOTICE	OF RIGHT T	O CONTEST" on backei	de of nink	conv
7	\wedge	. OI MOIII I		_	copj.
(Il Kohmen		Date —	12-19	
AN	Member of the Board		Date		