

## WISCONSIN DEPARTMENT OF SAFETY AND PROFESSIONAL SERVICES



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The status of an appeal may be found on court access websites at:

<http://ccap.courts.state.wi.us/InternetCourtAccess> and <http://www.courts.state.wi.us/wscga>

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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>18BACQ80</u>	FINAL DECISION AND ORDER ORDER # <u>0006134</u>
<input type="checkbox"/> Individual Credential Holder Name License # _____	<input checked="" type="checkbox"/> Establishment Name License # <u>5343-71</u>
<u>LOTUS NAILS SPA INC</u>	

6639 McKee Road MADISON WI 53719  
Street City Zip  
WEDNESDAY 11-7-2018 \_\_\_\_\_  
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.

Lotus Nails Spa Inc failed to store all poisonous substances  
in a secure location.

In violation of Section Cos 3.01(6) of ☐ Wis. Stats. OR ☒ Wis. Adm. Code  
[Signature] Investigator 3-27-2019  
Signature of Division Investigative Staff Title Date  
[Signature] 4-15-19  
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 \$ 100.00 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 DSPS Chief Legal  
Counsel - Delegatee

4-16-19  
Date

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## COSMETOLOGY EXAMINING BOARD

### CITATION FOR ADMINISTRATIVE FORFEITURE

DLSC CASE FILE # <u>18BAC080</u>	FINAL DECISION AND ORDER ORDER # <u>0006134</u>
<input type="checkbox"/> Individual Credential Holder Name License # _____	<input checked="" type="checkbox"/> Establishment Name License # <u>5343-71</u>
<u>6639 MCKEE ROAD</u>	<u>MADISON WI</u>
Street	City
<u>53719</u>	Zip
<u>WEDNESDAY</u>	<u>11-7-2018</u>
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.

Lotus Nail Spa Inc assisted in the unlicensed practice of  
manicuring by allowing Kevin Tran to perform manicuring  
services while unlicensed.

In violation of	Section <u>Cos 2.04(1)</u> of	<input type="checkbox"/> Wis. Stats.	OR	<input checked="" type="checkbox"/> Wis. Adm. Code
<u>[Signature]</u>	Investigator	<u>3-27-2019</u>		Date
Signature of Division Investigative Staff	Title	<u>[Signature]</u>		Date
<u>4-15-19</u>				
Signature of	<input type="checkbox"/> Licensee	OR	<input type="checkbox"/> 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 \$ 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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Al Rohman  
A Member of the Board  
DSPS Chief Legal  
Counsel - Delegatee

4-16-19  
Date

11.00

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## COSMETOLOGY EXAMINING BOARD

### CITATION FOR ADMINISTRATIVE FORFEITURE

DLSC CASE FILE # <u>18BAC080</u>	FINAL DECISION AND ORDER <u>0006134</u>
	ORDER # <u>Lots Nails Spa Inc</u>
<input type="checkbox"/> Individual Credential Holder Name	<input checked="" type="checkbox"/> Establishment Name
License # _____	License # <u>5343-71</u>

6639 McKee Road Madison WI 53719  
Street City Zip  
Wednesday 11-7-2018 \_\_\_\_\_  
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 a closed covered container.

In violation of Section Cos 9.0204 of ☐ Wis. Stats. OR ☒ Wis. Adm. Code

[Signature]  
Signature of Division Investigative Staff

Investigator  
Title

4-15-19  
Date

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.

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[Signature]  
A Member of the Board

DSPS Chief Legal Counsel- Delegate

4-16-19  
Date

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

Committed to Equal Opportunity in Employment and Licensing

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## COSMETOLOGY EXAMINING BOARD

### CITATION FOR ADMINISTRATIVE FORFEITURE

DLSC CASE FILE # <u>18BAC080</u>	FINAL DECISION AND ORDER ORDER # <u>0006134</u>
<input type="checkbox"/> Individual Credential Holder Name License # _____	<u>Lotus Nails Spa Inc</u> <input checked="" type="checkbox"/> Establishment Name License # <u>5343-71</u>

6639 MCKEE ROAD MADISON WI 53719  
Street City Zip  
WEDNESDAY 11-4-2018 \_\_\_\_\_  
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.

Lotus Nails Spa Inc was not maintained in a safe and sanitary condition, reusable contact equipment was not cleaned and sanitized after use on a client, Lotus Nails Spa Inc failed to dispose of single-use contact equipment after use on a client, and liquid paraffin wax and skin lotions were not dispensed in a manner that prevented contamination of the unused portion.

In violation of Section 65.481(1) of ☐ Wis. Stats. OR ☒ Wis. Adm. Code  
[Signature] INVESTIGATOR 3-27-2019  
Signature of Division Investigative Staff Title Date  
[Signature] ☐ Licensee OR ☐ Establishment Owner 4-15-19  
Signature of \_\_\_\_\_ 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.

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

[Signature] 4-16-19  
A Member of the Board DSPPS Chief Legal Counsel - Delegation Date

11-900

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## COSMETOLOGY EXAMINING BOARD

### CITATION FOR ADMINISTRATIVE FORFEITURE

DLSC CASE FILE # <u>18BACQ80</u>	FINAL DECISION AND ORDER <u>0006134</u>
<input type="checkbox"/> Individual Credential Holder Name	<input checked="" type="checkbox"/> Establishment Name
License # _____	License # <u>5343-71</u>

6639 McKee Road MADISON WI 53719  
Street City Zip  
WEDNESDAY 11-7-2018 \_\_\_\_\_  
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.

Lotus Nail Spa Inc did not have Barbicide or other disinfectant  
on the premises.

In violation of Section Cos 2.06(2) of ☐ Wis. Stats. OR ☒ Wis. Adm. Code  
[Signature] Investigative Staff Title [Signature] Date 4-15-19  
Signature of Division Investigative Staff Title Date  
Signature of ☐ Licensee OR ☐ Establishment Owner Date

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[Signature] 4-16-19  
A Member of the Board DSPS Chief Date  
Legal Counsel - Delegate

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

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