WISCONSIN DEPARTMENT OF SAFETY AND PROFESSIONAL SERVICES



Wisconsin Department of Safety and Professional Services Access to the Public Records of the Reports of Decisions

This Reports of Decisions document was retrieved from the Wisconsin Department of Safety and Professional Services website. These records are open to public view under Wisconsin's Open Records law, sections 19.31-19.39 Wisconsin Statutes.

Please read this agreement prior to viewing the Decision:

- The Reports of Decisions is designed to contain copies of all orders issued by credentialing authorities within the Department of Safety and Professional Services from November, 1998 to the present. In addition, many but not all orders for the time period between 1977 and November, 1998 are posted. Not all orders issued by a credentialing authority constitute a formal disciplinary action.
- Reports of Decisions contains information as it exists at a specific point in time in the Department of Safety and Professional Services data base. Because this data base changes constantly, the Department is not responsible for subsequent entries that update, correct or delete data. The Department is not responsible for notifying prior requesters of updates, modifications, corrections or deletions. All users have the responsibility to determine whether information obtained from this site is still accurate, current and complete.
- There may be discrepancies between the online copies and the original document. Original documents should be consulted as the definitive representation of the order's content. Copies of original orders may be obtained by mailing requests to the Department of Safety and Professional Services, PO Box 8935, Madison, WI 53708-8935. The Department charges copying fees. *All requests must cite the case number, the date of the order, and respondent's name* as it appears on the order.
- Reported decisions may have an appeal pending, and discipline may be stayed during the appeal. Information about the current status of a credential issued by the Department of Safety and Professional Services is shown on the Department's Web Site under "License Lookup."

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/wscca

•Records not open to public inspection by statute are not contained on this website.

By viewing this document, you have read the above and agree to the use of the Reports of Decisions subject to the above terms, and that you understand the limitations of this on-line database.

Correcting information on the DSPS website: An individual who believes that information on the website is inaccurate may contact DSPS@wisconsin.gov

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

FAX #: Phone #:

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

Madison, WI 53703

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

COSMETOLOGY EXAMINING BOARD

<u>CITATION FOR ADMINISTRATIVE FORFEITURE</u>

	EDIAL DECICION AND ORDI	3.D
DLSC CASE FILE # 19 BAC 00 8	FINAL DECISION AND ORDER O006427	
	TOSA NAILS & SPA	
☐ Individual Credential Holder Name	☑ Establishment Name	·
License #	License # 4116 - 71	
7026 W NORTH AVE WAYWA	TAS A	522/2
Street	City	532/3 Zip
THURSDAY	August 9 2019	12:25 011
Day of Week	August 8, 2019 Date	12:35 PM Time
On the above stated time, date and location, an invest be corrected.	tigation/inspection has disclosed the follo	wing violation, which must
TOSA NAILS & SPA STORED CLEA	WING AND DISINFECTIA	16 Supplies
IN AN UNSECURED LOCATION.		
In violation of Section Cos 3.01(6)		,
(Img EHEVEL	INVESTIGATOR	8/29/19
Signature of Division Invegtigative Staff	Title	Date
Signature of Licensee OR	☐ Establishment Owner	9/3/19
Signature of Licensee OR	i Establishment Owner	Date ~
Pursuant to Wis. Stat. § 454.15(3), the licensing addition to other disciplinary action against your li		orfeiture in lieu of or in
addition to other disciplinary action against your n	icense.	
PLEASE TAKE NOTICE THAT THE CREDENTIAL	HOLDER MAY DEPOSIT A FORFEITU	RE IN THE AMOUNT OF
\$ / 00 · © BY MAILING A CHECK OR MONEY OF THIS CITATION, TOGETHER WITH THE SIGN	ORDER NO LATER THAN TWENTY (20 NED COPY OF THIS FORM TO: DEP.) DAYS FROM THE DATE ARTMENT OF SAFFTY &
PROFESSIONAL SERVICES, DIVISION OF LEGAI	L SERVICES & COMPLIANCE, 1400 E.	WASHINGTON AVENUE,
PO BOX 7190, MADISON, WI 53707-7190. IF THIS	CITATION IS ISSUED TO BOTH AN IN	IDIVIDUAL CREDENTIAL
HOLDER AND AN ESTABLISHMENT, ONE HALF OF	THE FORFEITURE IS DEEMED TO BE A	SSESSED AGAINST EACH
CREDENTIAL. PAYMENT SHALL BE TREATED AS A CONSENT TO AN ORDER OF FORFEITURE, NOT TO I	EXCEED THE AMOUNT OF THE DEPOSI	T.
Please reference "NOTICE OF RI	GHT TO CONTEST" on backside of pi	ink copy.
(10 Red neps al	ich legal 9-13-19	
A Member of the Board Course	Date	
Course	1 1 veregara	

Wisconsin Department of Safety and Professional Services

Mail To: P.O. Box 7190

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 # 19 BAC 008	FINAL DECISION AND PER ORDER #	FINAL DECISION AURDERIO 0 0 6 4 2 7 ORDER #		
	TOSA NAILS & SI	PA		
☐ Individual Credential Holder Name License #	Establishment Name License # 4116-71			
7026 W NORTH AVE	WAUWATOSA	53213		
Street	City	Zip		
THURSDAY	AUGUST 8, 2019	12:35 PM		
Day of Week	Date	Time		
On the above stated time, date and location, an invebe corrected. TOSA NAILS & SPA MAINTAINED				
MANICURING SERVICES IN AN UNS	ANITARY & UNSAFE CONDITION	IBY FAILING TO KEEP		
SEMI-SOLID SUBSTANCES IN A CONTAINE	ER THAT WOULD PREVENT LO	NTAMINATION OF THE		
JUSED PORTION OF THAT SUBSTANCE AN	D FAILING TO KEEP FOOT SPA BY	ISN IN A SANITARY AND		
In-violation of Section 4.01(1), (4) & (5)		Wis. Adm. Code		
Signature of Division Investigative Staff	INVESTIGATOR Title	8/29/19 Date		
tetone		9/3/19		
Signature of Ck 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 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.

Wisconsin Department of Safety and Professional Services

Mail To: P.O. Box 7190

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 # 19 BAC 008			
	TOSA NAILS & SPA		
☐ Individual Credential Holder Name License #	Establishment Name License # 4116-71		
7024 W NORTH AVE	WAUWATOSA	53213	
Street	City	Zip	
THURSDAY Day of Week	AUGUST 8, 2019 Date	/2:35 PM Time	
On the above stated time, date and location, an be corrected.	n investigation/inspection has disclosed the follow	ving violation, which must	
TOSA NAILS & SPA DID NOT S	STORE APPLICATORS, BRUSHES,	WAX STRIPS . SURS	
,	ELS IN COVERED CONTAINERS	•	
•	INT BY NOT FULLY SUBMERGIA		
BARBICIDE,	DOLDA MOLLACTA SUBMERCON	OG BROATE IN	
			
In violation of Section Cos 4.02(4	$+)$ (5) of \square Wis. Stats. OR	🗹 Wis. Adm. Code	
CAMP EXTERNA	INVESTIGATOR	8/29/19	
Signature of Division Investigative Staff	Title	Date	
-tktritor		9/3/19	
Signature of Licensee	OR	Date	
Pursuant to Wis. Stat. § 454.15(3), the lice addition to other disciplinary action against y	ensing authority is authorized to impose a for your license.	orfeiture in lieu of or in	
\$ \ \ \o	NTIAL HOLDER MAY DEPOSIT A FORFEITUR MONEY ORDER NO LATER THAN TWENTY (20 E SIGNED COPY OF THIS FORM TO: DEPA LEGAL SERVICES & COMPLIANCE, 1400 E. THIS CITATION IS ISSUED TO BOTH AN IN ALF OF THE FORFEITURE IS DEEMED TO BE A ED AS A PLEA OF NO CONTEST TO THE VIOLA OT TO EXCEED THE AMOUNT OF THE DEPOSIT	DAYS FROM THE DATE ARTMENT OF SAFETY & WASHINGTON AVENUE, DIVIDUAL CREDENTIAL SSESSED AGAINST EACH TION CITED ABOVE AND	
\bigcap \bigcap \bigcap	OF RIGHT TO CONTEST" on backside of pi S.Chief Legal 9-13-20 Date Delegatee Date	_	

Wisconsin Department of Safety and Professional Services

Mail To: P.O. Box 7190

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 # 19 BAC 06	Ottobi.	
☐ Individual Credential Holder Name License #	TOSA NAILS & SI Establishment Name License # 4114-71	~A
7026 W NORTH AVE	WAUWATOSA	53213
Street	City	Zip
THURSDAY	AUGUST 8, ZO19	12:35 PM
Day of Week	Date	Time
On the above stated time, date and location, be corrected.	an investigation/inspection has disclosed the following	owing violation, which must
TOSA NAILS & SPA FAILED T	TO DISPOSE OF MANICURE INSTR	UMENTS THAT
Inviolation of Section Cos 4.1	DD DISINFECTED FOLLOWING O(4) of Wis. Stats. OI INVESTIGATOR	
Signature of Division Investigative Staff	Title	Date
- fold on		0/2/10
Signature of Licensee	OR	Date
PLEASE TAKE NOTICE THAT THE CRED S 100 BY MAILING A CHECK OR OF THIS CITATION, TOGETHER WITH T PROFESSIONAL SERVICES, DIVISION OI PO BOX 7190, MADISON, WI 53707-7190. HOLDER AND AN ESTABLISHMENT, ONE BORDENTIAL. PAYMENT SHALL BE TREA	icensing authority is authorized to impose a st your license. DENTIAL HOLDER MAY DEPOSIT A FORFEITURE SIGNED COPY OF THIS FORM TO: DEED LEGAL SERVICES & COMPLIANCE, 1400 E IF THIS CITATION IS ISSUED TO BOTH AN INTERPOSE HALF OF THE FORFEITURE IS DEEMED TO BE A TED AS A PLEA OF NO CONTEST TO THE VIOL. NOT TO EXCEED THE AMOUNT OF THE DEPOSE	JRE IN THE AMOUNT OF 0) DAYS FROM THE DATE PARTMENT OF SAFETY & . WASHINGTON AVENUE, NDIVIDUAL CREDENTIAL ASSESSED AGAINST EACH ATION CITED ABOVE AND
Please reference "NOTIC	E OF RIGHT TO CONTEST" on backside of p	oink copy.