

WISCONSIN DEPARTMENT OF SAFETY AND PROFESSIONAL SERVICES



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- 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/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: dsp@wisconsin.gov
Website: <http://dsp.wi.gov>

COSMETOLOGY EXAMINING BOARD

CITATION FOR ADMINISTRATIVE FORFEITURE

DLSC CASE FILE # <u>19 BAC 051</u>	FINAL DECISION AND ORDER ORDER # <u>ORDER 0006633</u>
<input type="checkbox"/> Individual Credential Holder Name License # _____	<input checked="" type="checkbox"/> Establishment Name License # <u>4207-71</u>

1631 Miller Park Way Street W. Milwaukee City 53214 Zip

Wednesday Day of Week October 30, 2014 Date 1:07 PM Time

On the above stated time, date and location, an investigation/inspection has disclosed the following violation, which must be corrected.

Oasis Nail Spa failed to dispose of manicure instruments that cannot be disinfected following each use.

In violation of Cos Section 4.10(4) of Wis. Stats. OR Wis. Adm. Code
[Signature] Signature of Division Investigative Staff Investigator Title 1/10/2020 Date
[Signature] Signature of Licensee OR Establishment Owner Owner Title 01-15-20 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] Al Rohmeyer DSPS Chief Legal Counsel, 1-24-2020
A Member of the Board Delegate Date

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COSMETOLOGY EXAMINING BOARD

CITATION FOR ADMINISTRATIVE FORFEITURE

DLSC CASE FILE # <u>19 BAC 051</u>	FINAL DECISION AND ORDER # <u>ORDER 0006633</u>
<input type="checkbox"/> Individual Credential Holder Name License # _____	<input checked="" type="checkbox"/> Establishment Name License # <u>Oasis Nail Spa</u> <u>4207-71</u>

1631 Miller Parkway Street W. Milwaukee City 53214 Zip
Wednesday Day of Week October 30, 2019 Date 1:07 PM Time

On the above stated time, date and location, an investigation/inspection has disclosed the following violation, which must be corrected.

Oasis Nail Spa assisted in the unlicensed practice of manicuring by allowing Niy T Troung to provide manicuring services without a manicuring license.

In violation of Section Cos 2.04(1) of Wis. Stats. OR Wis. Adm. Code
Greg E. Herz Signature of Division Investigative Staff Investigator Title 1/10/2020 Date
Hg Signature of Licensee OR Establishment Owner owner 01-15-20 Date

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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 Rehmeier DSPS Chief Legal Counsel, 1-24-2020
A Member of the Board Delegation Date

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COSMETOLOGY EXAMINING BOARD

CITATION FOR ADMINISTRATIVE FORFEITURE

DLSC CASE FILE # <u>19 BAC 051</u>	FINAL DECISION AND ORDER # <u>ORDER 0006633</u>
<input type="checkbox"/> Individual Credential Holder Name License # _____	<input checked="" type="checkbox"/> Establishment Name License # <u>Oasis Nail Spa</u> <u>4207-71</u>

1631 Miller Park Way W. Milwaukee 53214
Street City Zip
Wednesday October 30, 2019 1:07 PM
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.

Oasis Nail Spa failed to keep disinfectant used for decontamination in a covered container.

In violation of Section Cos 4.10(2) of Wis. Stats. OR Wis. Adm. Code
Amey E Heitzl Investigator 1/10/2020
Signature of Division Investigative Staff Title Date
Heitzl Licensee OR Establishment Owner owner 01-15-20
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.

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Al Rehmeier DSPS Chief Legal Counsel, 1-24-2020
A Member of the Board Delegate Date

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DLSC CASE FILE # <u>19 BAC 051</u>	FINAL DECISION ORDER # <u>ORDER 0006633</u>
<input type="checkbox"/> Individual Credential Holder Name License # _____	<input checked="" type="checkbox"/> Establishment Name License # <u>Oasis Nail Spa</u> <u>4207-71</u>

1631 Miller Park Way Street W. Milwaukee City 53214 Zip
Wednesday Day of Week October 30, 2019 Date 1:07 PM Time

On the above stated time, date and location, an investigation/inspection has disclosed the following violation, which must be corrected.

Oasis Nail Spa did not store clean cotton, foot files and brushes in a covered container.

In violation of Section Cos 4.02(4) of Wis. Stats. OR Wis. Adm. Code
Christy Heibel Signature of Division Investigative Staff Investigator Title 1/16/2020 Date
Flanka Signature of Licensee OR Establishment Owner owner 01-15-20 Date

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A Member of the Board Delegate Date

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JAN 21 2020
DIV LEGAL SERVICES & COMPLIANCE
DEPT SAFETY & PROFESSIONAL SERVICES

COSMETOLOGY EXAMINING BOARD

CITATION FOR ADMINISTRATIVE FORFEITURE

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<input type="checkbox"/> Individual Credential Holder Name License # _____	<input checked="" type="checkbox"/> Establishment Name License # <u>4207-71</u>
<u>Oasis Nail Spa</u>	

1631 Miller Park Way Street W. Milwaukee City 53214 Zip

Wednesday Day of Week October 30, 2019 Date 1:07 PM Time

On the above stated time, date and location, an investigation/inspection has disclosed the following violation, which must be corrected.

Oasis Nail Spa stored cleaning and disinfecting equipment in an unsecured location.

In violation of Section Cos 3.01(6) of Wis. Stats. OR Wis. Adm. Code

Ang E Heitzl Signature of Division Investigative Staff Investigator Title 1/10/2020 Date

[Signature] Signature of Licensee OR Establishment Owner Owner Title 01-15-20 Date

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RL Rohmeyer DSPS Chief Legal Counsel, 1-24-2020
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