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 # 19 BAC 052	FINAL DECISION AND ORDER # ORDER # ORDER	0007021
☐ Individual Credential Holder Name License #	■ Establishment Name License # 80798-71	
259 NORTH 3RD AVENUE	STURGEON BAY	54235
Street	City	Zip
WEDNESDAY	Feb 19, 2020	10:50 am
Day of Week	Date	Time
On the above stated time, date and location, an investiga be corrected.		
FANCI NAILS FAILED TO POST THE PRACTIT DUONG, FAILED TO POST FANCI NAILS' EST PROCEDURE FOR EXPOSURE TO BLOOD OR	ATBLISHMENT LICENSE, AND	FAILED TO POST A
In violation of Section 454.06(7), Cos 3.01(13), Cos 4.05(2)		R ⊠ Wis. Adm. Code
Clizabeth L Bizot Signature of Division Investigative Staff	Investigator	09/10/2020
Signature of Division investigative Staff	Title	Date
Signature of	₩ Establishment Owner	<u>09/18/20</u> 2
	•	
Pursuant to Wis. Stat. § 454.15(3), the licensing au addition to other disciplinary action against your licentification.		orfeiture in lieu of or in
PLEASE TAKE NOTICE THAT THE CREDENTIAL HO \$ 100.00 BY MAILING A CHECK OR MONEY OF OF THIS CITATION, TOGETHER WITH THE SIGNE & PROFESSIONAL SERVICES, DIVISION OF LEGAL 53707-7190. IF THIS CITATION IS ISSUED TO ESTABLISHMENT, ONE HALF OF THE FORFEITURE IS PAYMENT SHALL BE TREATED AS A PLEA OF NO CO AN ORDER OF FORFEITURE, NOT TO EXCEED THE AM Please reference "NOTICE OF RIGHT"	RDER NO LATER THAN TWENTY (20 ED COPY OF THIS FORM TO: DI L SERVICES & COMPLIANCE, PO BOTH AN INDIVIDUAL CREDEN' IS DEEMED TO BE ASSESSED AGAI ENTEST TO THE VIOLATION CITED A MOUNT OF THE DEPOSIT.	D) DAYS FROM THE DATE EPARTMENT OF SAFETY BOX 7190, MADISON, WI TIAL HOLDER AND AN INST EACH CREDENTIAL. ABOVE AND CONSENT TO
120 (21	ef Legal Counsel, 10 - 7 - 3	

#3053DLSC (02/20) Ch.454, Stats.

Citation 1 of 4

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COSMETOLOGY EXAMINING BOARD

CITATION FOR ADMINISTRATIVE FORFEITURE

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Individual Crede	ntial Holder Name		☑ Establishment Name License # 80798-71		
259 NORTH 3RD	AVENUE	STUI	RGEON BAY		54235
treet		City			Zip
WEDNESDAY		Feb 1	9, 2020		10:50 am
ay of Week	***	Date			Time
e corrected. FANCI NAILS S' LOCATION.	TORED CLEANING	AND DISINFECT	ING EQUIPMENT II	N AN UN	SECURED
In violation of	Section Cos 3.01(6) of	☐ Wis. Stats.	OR	₩ Wis, Adm, Code
	beth L Birot	01	Investigator	O.K	09/10/2020
ignature of Divisio	n Investigative Staff		Title		Date
front					09/16/20.
signature of	☐ Licensee	OR	Establishment	Owner	Date
addition to other displays to the displays t	Stat. § 454.15(3), the I isciplinary action again TICE THAT THE CREUMAILING A CHECK OF N, TOGETHER WITH SERVICES, DIVISION	nst your license. DENTIAL HOLDER R MONEY ORDER N THE SIGNED COP OF LEGAL SERV	MAY DEPOSIT A FOI O LATER THAN TWEI Y OF THIS FORM T VICES & COMPLIANO	RFEITURE NTY (20) D O: DEPA E, PO BO	IN THE AMOUNT OF AYS FROM THE DATE RTMENT OF SAFETY X 7190, MADISON, WI
ESTABLISHMENT, PAYMENT SHALL I AN ORDER OF FOR	THIS CITATION IS IS ONE HALF OF THE FOR BE TREATED AS A PLE FEITURE, NOT TO EXCRASE PEFERENCE "NOTIC!	ORFEITURE IS DEEN LA OF NO CONTEST LEED THE AMOUNT	MED TO BE ASSESSE TO THE VIOLATION (OF THE DEPOSIT.	D AGAINS CITED ABO	I EACH CREDENTIAL. VE AND CONSENT TO
$\overline{\Omega}$	$\cap \cap$	SPS Chief Legal Co Delegate		7-202	<u>⊘</u>
#3053DLSC (02/20))				Citation 2 of 4

Ch.454, Stats.

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COSMETOLOGY EXAMINING BOARD

CITATION FOR ADMINISTRATIVE FORFEITURE

DLSC CASE FILE # 19 BAC 052 FINAL DECISION AND ORDER OD J U Z 1 FANCINALLS Individual Credential Holder Name License # PROFER 0 0 J U Z 1 FANCINALLS Elestablishment Name License # 80798-71 259 NORTH 3RD AVENUE Street City WEDNESDAY Feb 19, 2020 10:50 am Date Time On the above stated time, date and location, an investigation/inspection has disclosed the following violation, which must be corrected. FANCINALLS DID NOT STORE BRUSHES AND COTTON IN A COVERED CONTAINER. In violation of Section Cos 4.02(4) Grabeth L Birot Investigator O9/10/2020 Signature of Division Investigative Staff Title Date O9/10/2020 Signature of Division Investigative Staff Title Date O9/10/2020 FUTSUARD TO DEPARTMENT ACTION OF THE FORM OF THE STATE OF THE AMOUNT OF \$100,00 BY MALING A CHECK OR MONEY ORDER NO LATER THAN TWENTY (20) DAYS FROM THE DATE OF THIS FORM TO DEPARTMENT OF SAFETY & PROFESSIONAL SERVICES, DIVISION OF LEGAL SERVICES & COMPLIANCE, PO BOX 7190, MADISON, WI 53707-190. IF THIS CITATION, TOGETHER WITH THE SIGNED COPY OF THIS FORM TO DEPARTMENT OF SAFETY & PROFESSIONAL SERVICES, DIVISION OF LEGAL SERVICES & COMPLIANCE, PO BOX 7190, MADISON, WI 53707-190. IF THIS CITATION IS ISSUED TO BOTH AN INDIVIDUAL CREDENTIAL HOLDER AND AN ESTABLISHMENT, ONE HALT OF THE FORMETTURE 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 FORPETTURE, NOT TO EXCREDE THE AMOUNT OF THE DEPOSIT. Please reference "NOTICE OF RIGHT TO CONTEST" on reverse side of this form. DSPS Chief Legal Counsel, DSPS Chief Legal Counsel, Date				<u> </u>		
License # License # 80798-71 259 NORTH 3RD AVENUE STURGEON BAY 54235 Street City Zip WEDNESDAY Feb 19, 2020 10:50 am 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. FANCI NAILS DID NOT STORE BRUSHES AND COTTON IN A COVERED CONTAINER. In violation of Section Cos 4.02(4) of Investigator 09/10/2020 Signature of University Investigative Staff Title Date 09/16/202 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, PO BOX 7190, MADISON, WI 33707-7190. IF THIS CITATION IS ISSUED TO BOTH AN INDIVIDUAL CREDENTIAL HOLDER AND AN ESTABLISHMENT, ONE HALF OF THE PORFEITURE IS DEEDED TO Be ASSESSED AGAINST EACH CREDENTIAL PAYMENT SHALL BE TREATED AS A PLEA OF NO CONTEST TO THE UDLOATION 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 reverse side of this form. DSPS Chief Legal Counsel, 10-7-7000	DLSC CASE FILE	# 19 BAC 052	ORD	DER#	ORDER O	007021
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Signature of Division Investigative Staff Title Date O9/16/202 Signature of Division Investigative Staff Title Date O9/16/202 Signature of Division Investigative Staff Title O9/16/202 Signature of Division Investigative Staff 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, 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 reverse side of this form. DSPS Chief Legal Counsel, 10-7-2020	FANCI NAILS I	OID NOT STORE BRUS	HES AND COTTO	ON IN A COVERE	D CONTA	INER.
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DSPS Chief Legal Counsel, 10-7-2020	\$100.00 BY OF THIS CITATIO & PROFESSIONAL 53707-7190. IF ESTABLISHMENT PAYMENT SHALL	MAILING A CHECK OR MON, TOGETHER WITH THE SERVICES, DIVISION OF THIS CITATION IS ISSUED, ONE HALF OF THE FOR BE TREATED AS A PLEA	MONEY ORDER NO HE SIGNED COPY OF LEGAL SERVIO JED TO BOTH A FEITURE IS DEEME OF NO CONTEST TO	LATER THAN TWE OF THIS FORM T CES & COMPLIANC N INDIVIDUAL CI ED TO BE ASSESSE O THE VIOLATION (NTY (20) DA O: DEPAR E, PO BOX REDENTIAL D AGAINST	AYS FROM THE DATE RTMENT OF SAFETY 7190, MADISON, WI HOLDER AND AN EACH CREDENTIAL.
A Member of the Board Delegate Date	Ple	\sim 0.1	SPS Chief Legal Co		_	s form.
	A	Member of the Board	Delegate e_	Date	•	_

#3053DLSC (02/20) Ch.454, Stats.

Citation 3 of 4

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

Citation 4 of 4

COSMETOLOGY EXAMINING BOARD

CITATION FOR ADMINISTRATIVE FORFEITURE

**····································				
DLSC CASE FILE # 19 BAC 052	OF	FINAL DECISION AND ORDER OUTUZ 1 FANCI NAILS		
☐ Individual Credential Holder Name License #		Establishment Name cense # 80798-71		
259 NORTH 3RD AVENUE	STUI	RGEON BAY		54235
Street	City			Zip
WEDNESDAY	Feb l	9, 2020		10:50 am
Day of Week	Date		·	Time
On the above stated time, date and location be corrected.	on, an investigation/insp	ection has disclosed th	e followin	g violation, which must
FANCI NAILS FAILED TO DISINF		ANICURING INSTR	UMENT	S AND KEEP
In violation of Section Cos 4.10 (Vizabeth L Birot	0(1) & 4.10(2) of	□ Wis. Stats.	OR	☑ Wis. Adm. Code
Signature of Division Investigative Staff		Investigator		09/10/2020
Signature of Division investigative Start		Title		Date Accident
Signature of	OR	Establishment (Owner	<u>09/16/202</u> 0 Date
Pursuant to Wis. Stat. § 454.15(3), the addition to other disciplinary action ago please take notice that the cest successful by mailing a check of this citation, together with a professional services, division 53707-7190. If this citation is establishment, one half of the payment shall be treated as a pan order of forfeiture, not to expense.	Ainst your license. REDENTIAL HOLDER MOREY ORDER NOT THE SIGNED COPYON OF LEGAL SERVISSUED TO BOTH AFORFEITURE IS DEEM LEA OF NO CONTEST	MAY DEPOSIT A FOR O LATER THAN TWEN OF THIS FORM TO ICES & COMPLIANCE AN INDIVIDUAL CRED TO BE ASSESSED TO THE VIOLATION OF THE CONTRACT OF TH	RFEITURE NTY (20) D D: DEPA E, PO BO REDENTIA D AGAINS	IN THE AMOUNT OF AYS FROM THE DATE RTMENT OF SAFETY X 7190, MADISON, WI L HOLDER AND AN TEACH CREDENTIAL
Please reference "NOTI	CE OF RIGHT TO CO DSPS Chief Legal Cou Delegatee			is form.
#3053DLSC (02/20)			<i>:</i>	Oltration A of A

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