WISCONSIN DEPARTMENT OF SAFETY AND PROFESSIONAL SERVICES



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COSMETOLOGY EXAMINING BOARD

CITATION FOR ADMINISTRATIVE FORFEITURE

				74	OHIETY & PROFESSIONAL LIAN
DLSC CASE FILE # 19	BAC 031		AL DECISION A DECEMBER #	DER O	007502
☐ Individual Credential F License #	Iolder Name	∑ Lic	Establishment Name ense# <u>5481-71 (Ma</u>	anicuring I	Estalbishment)
3183 Muirfield Road		Madis	son		53719
Bireet .		City			Zip
Wednesday		Feb 2	6, 2020		9:30 am
Day of Week		Date			Time
Establishment does not	have a current aes	thetic establishme	ent license while they	/ perform v	waxing services.
	ection COS 2.045(1	<u>)/3.01(1)</u> of	☐ Wis. Stats. Investigator	OR	✓ Wis. Adm. Code03/15/2021Date 4
Signature of Division favor	stigative/Staff		Title		8/2/21
Signature of	Licensee	OR	All Establishment	Owner	Date
Pursuant to Wis. Stat. addition to other discipl	§ 454.15(3), the lic	t your neense.	NA A TISOGRA WAY	RFEITIRE	IN THE AMOUNT OF
\$500.00 BY MAII OF THIS CITATION, TO & PROFESSIONAL SER 53707-7190. IF THIS ESTABLISHMENT, ONE PAYMENT SHALL BE TO AN ORDER OF FORFEIT	ING A CHECK OK DGETHER WITH TO VICES, DIVISION IS ISS HALF OF THE FORREATED AS A PLEAURE, NOT TO EXCE	MONEY ORDER OF THE SIGNED COP OF LEGAL SERV UED TO BOTH REBITURE IS DEBI OF NO CONTEST ED THE AMOUNT	Y OF THIS FORM TICES & COMPLIAN AN INDIVIDUAL COMED TO BE ASSESSE TO THE VIOLATION OF THE DEPOSIT.	TO: DEPA CE, PO BO REDENTIA D AGAINS CITED ABO	RTMENT OF SAFETS X 7196, MADISON, W L HOLDER AND AN T EACH CREDENTIAL DVE AND CONSENT TO
Please re	eference "NOTICE	OF RIGHT TO	CONTEST" on revers	e side of th	is form.
. () () A Memb	Soumeur per-of the Board	DSPS Chief Legs		10 :3-1_	
		Delegat	¢6		

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

Citation 1 of 7

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CITATION FOR ADMINISTRATIVE FORFEITURE

	CITATION	FOR ADMINISTRA	HYE PORTER ORE		
DLSC CASE FILE# 19	BAC 031		AL DECISION AND DER# ORI	ERO(07502
☐ Individual Credential I	Holder Name	⊠ I Lice	Establishment Name nse # <u>5481-71 (Ma</u>	nicuring E	stalbishment)
3183 Muirfield Road		Madiso	on		53719
Street		City			Zip
		Feb 26	, 2020		9:30 am
Wednesday Day of Week		Date			Time
On the above stated time, be corrected. Kelly Nails failed to ke					, violation, which inde
	Section-COS 3.01(4		☐ Wis, Stats.	OR	☑ Wis, Adm. Code
An Andrews			Investigator		03/15/2021
Signature of Division Inv	estigative Staff		Title		Date 2/21
DIETHER AND AV	Licensee	OR	Establishment		Date
Pursuant to Wis, Stat.	linary action again	ist Aoni, ifcense.			
OF THIS CITATION, T & PROFESSIONAL SER 53707-7190. IF THIS BSTABLISHMENT, ONE PAYMENT SHALL BE T AN ORDER OF FORFEIT	LING A CHECK OF CORTHER WITH CYCES, DIVISION CITATION IS IS THALF OF THE FOR REATED AS A PLECTER, NOT TO EXC	THE SIGNED COPY THE SIGNED COPY OF LEGAL SERV SSUED TO BOTH ORFEITURE IS DEEN A OF NO CONTEST EED THE AMOUNT (OF THIS FORM TICES & COMPLIANCE AN INDIVIDUAL COMED TO BE ASSESSE TO THE VIOLATION OF THE DEPOSIT.	O: DEPA CE, PO BO REDENTIA D AGAINS CITED ABO	RTMENT OF SAFETY X 7190, MADISON, WI L HOLDER AND AN T EACH CREDENTIAL OVE AND CONSENT TO
Please r	eference "NOTIC	e of right to c	ONTEST" on revers	e side of th	is form.
(EL	Ruhmuyes ber of the Board	DSPS Chief Leg	gal CounsePafe	160+	<u> </u>
17 1470111		Delega	ater		Oltation 2 of 7
#3053DLSC (02/20)					Citation 2 of 7

Ch.454, Stats.

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COSMETOLOGY EXAMINING BOARD

CITATION FOR ADMINISTRATIVE FORFEITURE

DLSC CASE FILE # 19 BAC 031	FINAL DECISION AND ORI ORDER # ORD Kelly Nails	ER0007502
☐ Individual Credential Holder Name License #	☑ Establishment Name License # <u>5481-71 (Manic</u>	uring Estalbishment)
3183 Muirfield Road	Madison	53719
Street	Clty	Zip
,	Feb 26, 2020	9:30 am
Wednesday Day of Week	Date	Time
•		11 Junicipalation which must
On the above stated time, date and location, an inv	restigation/inspection has disclosed the fo	HOWING VIOLATION, WITCH HIGSE
be corrected.		
Kelly Nails was dirty and unsanitary.		·
		,
In violation of Section COS 4.01(1)	——of □ Wis, Stats.	OR 🗵 Wis. Adm. Code
In violation of Section (CASA-UT(1))	Investigator	03/15/2021
Signature of Division Investigative Staff	Title	Date /
Signature of Division in Survey		8/3/21
Signature of Licensee	Establishment Own	her Date/
u	a the transfer of the formation	a forfaiture in lieu of or in
Pursuant to Wis. Stat. § 454.15(3), the licensi	ing authority is authorized to impose	M TOTTELITIES IN MON ON ON AN
addition to other disciplinary action against you		
OF THIS CITATION, TOGETHER WITH THE & PROFESSIONAL SERVICES, DIVISION OF 53707-7190. IF THIS CITATION IS ISSUED ESTABLISHMENT, ONE HALF OF THE FORFEI PAYMENT SHALL BE TREATED AS A PLEA OF AN ORDER OF FORFEITURE, NOT TO EXCEED TO	SIGNED COPY OF THIS FORM TO: LEGAL SERVICES & COMPLIANCE, TO BOTH AN INDIVIDUAL CRED TURE IS DEEMED TO BE ASSESSED A NO CONTEST TO THE VIOLATION CITI THE AMOUNT OF THE DEPOSIT.	DEPARTMENT OF SAFETY PO BOX 7190, MADISON, WI PENTIAL HOLDER AND AN GAINST EACH CREDENTIAL. ED ABOVE AND CONSENT TO
Please reference "NOTICE OF	RIGHT TO CONTEST" on reverse sid	ie of this form.
(2) Robinson	89/20	091
A Member of the Board D	SPS Chief Legal Counse Pate	•
	Delegates	

Delegater_

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COSMETOLOGY EXAMINING BOARD

CITATION FOR ADMINISTRATIVE FORFEITURE

			- 00
DLSC CASE FILE	# 19 BAC 031	FINAL DECISION AND PER O ORDER # Kelly Nails	007502
☐ Individual Cred	lential Holder Name	 ☑ Establishment Name License # 5481-71 (Manicuring) 	Estalbishment)
Literise ii			
3183 Muirfield I	Road	Madison	53719
Street		City	Zip
Wednesday		Feb 26, 2020	9:30 am
Day of Week		Date	Time
be corrected.		restigation/inspection has disclosed the followin	g violation, which must
Kelly Nails was	dirty and unsanitary.		
In violation of	Section COS 4 01(1)	of □ Wis. Stats. OR Investigator Title	₩is. Adm. Code 03/15/2021 Date
Signature of Divis	ion Investigative Staff	• •	8/3/2/
Signature of	E 244000	Establishment Owner	Date
Pursuant to Wis	. Stat. § 454.15(3), the licensi disciplinary action against yo	ing authority is authorized to impose a for ur license.	feiture in lieu of or in
PLEASE TAKE N \$100.00 B OF THIS CITATI & PROFESSIONA 53707-7190. IF ESTABLISHMEN PAYMENT SHALL AN ORDER OF FO	OTICE THAT THE CREDENTS Y MAILING A CHECK OR MOS ON, TOGETHER WITH THE L SERVICES, DIVISION OF THIS CITATION IS ISSUED I, ONE HALF OF THE FORFEI L BE TREATED AS A PLEA OF ORFEITURE, NOT TO EXCEED	AL HOLDER MAY DEPOSIT A FORFEITURE NEY ORDER NO LATER THAN TWENTY (20) I SIGNED COPY OF THIS FORM TO: DEPARED TO BOTH AN INDIVIDUAL CREDENTIATURE IS DEEMED TO BE ASSESSED AGAINS NO CONTEST TO THE VIOLATION CITED ABOTH AMOUNT OF THE DEPOSIT.	ARTMENT OF SAFETY OX 7190, MADISON, WI AL HOLDER AND AN ST EACH CREDENTIAL OVE AND CONSENT TO
	$\mathcal{O}_{\mathcal{O}} \cup \mathcal{O}_{\mathcal{O}}$	RIGHT TO CONTEST" on reverse side of the State of the State of the Right PS Chief Legal Counsel, Date Delegate &	

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

Citation 3 of 7

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COSMETOLOGY EXAMINING BOARD

CITATION FOR ADMINISTRATIVE FORFEITURE

DLSC CASE FILE # 19 BAC 031	FINAL DECISION AND ORDER # ORDER Kelly Nails	常で007502
☐ Individual Credential Holder Name License #	⊠ Establishment Name License # <u>5481-71 (Manic</u>	ouring Estalbishment)
	Madison	53719
3183 Muirfield Road	City	Zip
Street	Feb 26, 2020	9:30 am
Wednesday	Date	Time
Day of Week		er i di Esthan mehleb merek
On the above stated time, date and location, an investi- be corrected.		
Clean contact equipment was stored in open contact towels were stored in an exposed area. Cotton sw not covered.	ainers, Brushes by sink were in an rabs were in open containers, Wax	strips and scissors were
In violation of Section COS 4.02(4)	—of □ Wis, Stats,	OR Wis, Adm. Code
THE VIOLENCE OF THE PROPERTY O	Investigator	03/15/2021
Signature of Division Investigative Staff	Title	Date
Vike	Establishment Ow	oner Date
Signature of Licensee OR	<i>[</i>	
Pursuant to Wis. Stat. § 454.15(3), the licensing addition to other disciplinary action against your li	icense.	•
PLEASE TAKE NOTICE THAT THE CREDENTIAL \$100.00 BY MAILING A CHECK OR MONEY OF THIS CITATION, TOGETHER WITH THE SIG & PROFESSIONAL SERVICES, DIVISION OF LEGATOR OF THE STABLISHMENT, ONE HALF OF THE FORFEITUIT PAYMENT SHALL BE TREATED AS A PLEA OF NO AN ORDER OF FORFEITURE, NOT TO EXCEED THE	GAL SERVICES & COMPLIANCE, TO BOTH AN INDIVIDUAL CRE RE IS DEEMED TO BE ASSESSED A CONTEST TO THE VIOLATION CIT	DEPARTMENT OF SAFETY PO BOX 7190, MADISON, W. DENTIAL HOLDER AND AN AGAINST EACH CREDENTIAL TED ABOVE AND CONSENT TO
Please reference "NOTICE OF RIC	GHT TO CONTEST" on reverse si	
A Member of the Board		031
TP TIMOMAN AN TOTAL	-	

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COSMETOLOGY EXAMINING BOARD

CITATION FOR ADMINISTRATIVE FORFEITURE

	,	
DLSC CASE FILE # 19 BAC 031	FINAL DECISION AND ORDI ORDER # ORDER (Kelly Nails	007502
☐ Individual Credential Holder Name License #	⊠ Establishment Name License # <u>5481-71 (Manicu</u>	ing Estalbishment)
3183 Muirfield Road	Madison	53719
Street	City	Zip
Wednesday	Feb 26, 2020	9:30 am
Day of Week	Date	Time
On the above stated time, date and location, be corrected.	an investigation/inspection has disclosed the follo	owing violation, which must
Kelly Nails failed to properly disinfect re	ausable manicure instruments.	
In violation of Section COS 4.10(1) Signature of Division Investigative Staff) ☐ Wis, Stats. O Investigator Title	R 题 Wis. Adm. Code 03/15/2021 Date /
Signature of a formation investigative Stati	× 0	8/3/2/
Signature of	OR Establishment Owner	Date /
PLEASE TAKE NOTICE THAT THE CRED \$100.00 BY MAILING A CHECK OR OF THIS CITATION, TOGETHER WITH & PROFESSIONAL SERVICES, DIVISION 53707-7190. IF THIS CITATION IS IS:	ENTIAL HOLDER MAY DEPOSIT A FORFEIT MONEY ORDER NO LATER THAN TWENTY (THE SIGNED COPY OF THIS FORM TO: I OF LEGAL SERVICES & COMPLIANCE, POSUED TO BOTH AN INDIVIDUAL CREDENT OF NO CONTEST TO THE VIOLATION CITED	URE IN THE AMOUNT OF 20) DAYS FROM THE DATE DEPARTMENT OF SAFETY D BOX 7190, MADISON, WI NTIAL HOLDER AND AN AINST BACH CREDENTIAL.
•	E OF RIGHT TO CONTEST" on reverse side	of this form.
A Member of the Board	DSPS Chief Legal Counsel 8 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9	021

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COSMETOLOGY EXAMINING BOARD

CITATION FOR ADMINISTRATIVE FORFEITURE

•				
DLSC CASE FILE # 19 BAC 031	FINAL DECISION AND OF ORDER # OR Kelly Nails	DER 0007502		
☐ Individual Credential Holder Name License #	⊠ Establishment Name License # <u>5481-71 (Mani</u>	curing Estalbishment)		
3183 Muirfield Road	Madison	53719		
Street Street	City	Zip		
Wednesday	Feb 26, 2020	9:30 am		
Day of Week	Date	Time		
On the above stated time, date and location, are be corrected.	n investigation/inspection has disclosed the t	following violation, which must		
Kelly Nails failed to keep disinfectant use	d for decontamination in a covered conta	iner.		
In violation of Section COS 4.10(2)	of	OR Wis. Adm. Code 03/15/2021 Date		
Signature of Division Investigative Staff	Timo	8/3/21		
Signature of Licensee	OR Establishment Ov	vner 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 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 EXCE	ED THE AMOUNT OF THE DEPOSIT. OF RIGHT TO CONTEST" on reverse s.	•		
A Member of the Board	DSPS Chief Legal Course A 36	T .		

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

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COSMETOLOGY EXAMINING BOARD

CITATION FOR ADMINISTRATIVE FORFEITURE

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DLSC CASE FILE #	19 BAC 031	OR	AL DECISION AND ODER#ORD lly Nails	EROC	07502
☐ Individual Crede	ntial Holder Name	⊠ Lice	Establishment Name ense # <u>5481-71 (Ma</u>	nicuring I	Estalbishment)
0100 Material D	ad	Madis	on		53719
3183 Muirfield Ro	DAG .	City	V/.1		Zip
		Feb 2	5, 2020		9:30 am
Wednesday		Date	J, 2020		Time
Day of Week					
On the above stated be corrected.	time, date and location,	an investigation/insp	ection has disclosed th	e following	g violation, which must
Kelly Nails failed	to dispose of one-use	manicuro instrumer	nts		
Rony Tuno Luxon					-
,		•			
In violation of	Section COS 4 10(4	of	☐ Wis. Stats.	OR	Wis. Adm. Code
-/	10-1		Investigator		03/15/2021
Signature of Divisio	n Investigative Staff		Title		8 3 2-1
10	whi.		<u> </u>	O	Date
Signature of	☐ Licensee	OR	Establishment (Owner	Date
addition to other d	Stat. § 454.15(3), the It isciplinary action again	st 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. Olivery SPS Chief Legal Counsel, 89 2021 A Member of the Board Delegate Date					

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