# WISCONSIN DEPARTMENT OF SAFETY AND PROFESSIONAL SERVICES



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P.O. Box 7190 Madison, WI 53707-7190

(608) 266-2264 (608) 266-2112 FAX#: Phone #:

4822 Madison Yards Way Madison, WI 53705

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

#### COSMETOLOGY EXAMINING BOARD

#### CITATION FOR ADMINISTRATIVE FOR FEITHRE

	CHATION	FOR ADMINISTR	TATABLOIT	Taxotti		
DLSC CASE FILE#	19 BAC 069	Oì	NAL DECISION NAL D			7723
☐ Individual Crede License #	ntial Holder Name		Establishmer cense # <u>169</u>			,
2222 West Wiscon	nsin Avenue	Milv	zaukee			53233
Street		City				Zip
Tuesday	•	Sep	14, 2021			11:45 am
Day of Week		Date				Time
On the above stated to be corrected.	ime, date and location, a	n investigation/ins	pection has dis	closed the fo	llowing vi	olation, which must
Princess Nails assi	ess Nails provided wax isted in the unlicensed p es while Princess Nails	practice of manic	uring by allov	ving their en	nployees (	to provide
In violation of	Section Cos 2.04(1)	<u>%3.01(1)</u> of	☐ Wis. S Investiga		OR [	☑ Wis, Adm. Code 10/19/2021
Signature of Division	Investigative Staff		Title	Zuj.		Date 10/26/202
Signature of	☐ Licensee	OR	Bstabl	ishment Own	1611-	Date '
Pursuant to Wis. S	Stat. § 454,15(3), the lic sciplinary action agains	ensing authority t your license.	is authorized	to impose	a forfeitu	re in lieu of or in
\$500.00 BY THIS CITATION PROFESSIONAL S3707-7190. IF THE BETABLISHMENT, OPAYMENT SHALL FAN ORDER OF FORE	MAILING A CHECK OR N. TOGETHER WITH T SERVICES, DIVISION HIS CITATION IS ISSUED HALF OF THE FOR THE FOR THE FOR THE TEATED AS A PLEATEITURE, NOT TO EXCERT	MONBY ORDER N HE SIGNED COP OF LEGAL SERV UED TO BOTH REFITURE IS DEE! OF NO CONTEST ED THE AMOUNT	IO LATER TH. Y OF THIS I VICES & CON AN INDIVID MED TO BE A TO THE VIOL OF THE DEPO	AN TWENTY FORM TO: APLIANCE, UAL CREDI SSESSED AG ATION CITE SIT.	DEPARTI DEPARTI PO BOX 7 ENTIAL I BAINST E D ABOVE	MENT OF SAFETY 190, MADISON, WI HOLDER AND AN ACH CREDENTIAL. AND CONSENT TO
	se reference "NOTICE  Rounce  Lember of the Board	OF RIGHT TO C \$ <del>PS Chief Leg</del> al C Delegat <b>e</b> e	Counsel, —			o'm,
HOO COTO T ENCE (00/00)						Oliverian 1 of 6

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

Citation I of 6

Mail To:

P.O. Box 7190

FAX#: Phone #: (608) 266-2264 (608) 266-2112

Madison, WI 53707-7190

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#### COSMETOLOGY EXAMINING BOARD

#### CITATION FOR ADMINISTRATIVE FORFEITURE

DLSC CASE FILE # 191	BAC 069	ORI	AL DECISION . DER#		007723	
	<del> </del>	<u>Pri</u>	ncess Nails	OKDENO	1007. LJ	
☐ Individual Credential H License #	•	区 Establishment Name License # 1694-71				
2222 West Wisconsin A	venue	Milwa	ukee		53233	
Street		City		Zip		
Tuesday		Sep 14	. 2021		11:45 am	
Day of Week		Date	·		Time	
On the above stated time, d	ate and location, an	investigation/inspe	ction has disclos	sed the following	violation, which must	
Princess Nails stored cle	aning and disinfec	ling equipment in	an unsecured	location.		
In violation of Sec Signature of Division Inves	ction Cos 3,01(6)	of	☐ Wis. Stats Investigator Title	OR	Wis. Adm. Code 10/19/2021  Date 10/26/202	
Signature of $\square$	Licensee	OR	Establish	nent wher	10/26/207 Date	
OF THIS CITATION, TOO & PROFESSIONAL SERVI 53707-7190. IF THIS C. ESTABLISHMENT, ONE H PAYMENT SHALL BE TRE AN ORDER OF FORFEITUR	ary action against y HAT THE CREDEN NG A CHECK OR M BETHER WITH THI CES, DIVISION OF ITATION IS ISSUE ALF OF THE FORFE ATED AS A PLBA OF	TIAL HOLDER M ONEY ORDER NO SIGNED COPY FILEGAL SERVICE TO BOTH A EITURE IS DEBME FNO CONTEST TO	AY DEPOSIT A LATER THAN ' OF THIS FOR CES & COMPLI N 'INDIVIDUAL ED TO BE ASSE O THE VIOLATE THE DEPOSIT. NTEST" on rev	FORFEITURE IF TWENTY (20) DAM TO: DEPAR IANCE, PO BOX L CREDENTIAL ISSED AGAINST ON CITED ABOVERSE side of this	IN THE AMOUNT OF AYS FROM THE DATE RIMENT OF SAFETY 7190, MADISON, WI HOLDER AND AN EACH CREDENTIAL. WE AND CONSENT TO 150mm.	
A Mamber	of the Board DS	SPS Chief Legal C	ounsel, Date	-6-2021		
₩ IMGHIOCI.		Delegatee	Dui			
#3053DLSC (02/20)		-			Citation 2 of 6	

Ch.454, Stats.

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#### COSMETOLOGY EXAMINING BOARD

#### CITATION FOR ADMINISTRATIVE FORFEITURE

DLSC CASE FILE	# 19 BAC 069	O	NAL DECISION AN RDER # rincess Nails	order ORDER	0007723
☐ Individual Cred License #	lential Holder Name		Establishment Name cense # <u>1694-71</u>		
2222 West Wisco	onsin Avenue	Milv	/aukee		53233
Street		City			Zip
Tuesday		Sep	14, 2021	•	11:45 am
Day of Week		Date			Time
be corrected.	I time, date and location, as maintained in an uns				
In violation of Signature of Division	Section Cos 4,01(1	) of	☐ Wis. Stats.  Investigator  Title	or	☑ Wis, Adm. Code 10/19/2021 Date
			16	~/ <u>/</u> _	10/26/202
Signature of	□ Licensee	OR	Establishmen	t Owner	Date '
addition to other d	Stat. § 454.15(3), the listing section again	st your license.			
\$100.00 BY OF THIS CITATIO & PROFESSIONAL 53707-7190. IF ESTABLISHMENT, PAYMENT SHALL	OTICE THAT THE CREING MAILING A CHECK OF MAILING A CHECK OF THE SERVICES, DIVISION THIS CITATION IS IS ONE HALF OF THE FORE TREATED AS A PLECTED TO EXC	R MONEY ORDER N THE SIGNED COP OF LEGAL SER' SUED TO BOTH ORFEITURE IS DEE! A OF NO CONTEST	IO LATER THAN TW Y OF THIS FORM VICES & COMPLIAN AN INDIVIDUAL ( MED TO BE ASSESS) TO THE VIOLATION	ENTY (20) D TO: DEPA CE, PO BO CREDENTIA ED AGAINS'	AYS FROM THE DATE RTMENT OF SAFETY X 7190, MADISON, WI L HOLDER AND AN T EACH CREDENTIAL.
Ple	ease reference "NOTIC	E OF RIGHT TO C	ONTEST" on rever	se side of thi	is form.
			ounsel, 12-		
#2053DLSC (02/2)					Citation 3 of 6

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

Mall To:

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#### COSMETOLOGY EXAMINING BOARD

#### CITATION FOR ADMINISTRATIVE FORFEITURE

DLSC CASE FILE  Individual Cred			FINAL DECISION A ORDER # Princess Nails  Establishment Nat License # 1694-71	ORDER	007723
	,				
2222 West Wisco	onsin Avenue		lwaukee		53233
Street		Cit			Zip
Tuesday	· · · · · · · · · · · · · · · · · · ·		p 14, 2021		11:45 am
Day of Week		Dat	e ·		Time
On the above stated be corrected.	time, date and location,	an investigation/i	nspection has disclose	d the following	violation, which must
Princess Nails fai	led to dispose of emer	y boards, toe sep	arators, and flip flop	s after each use	» <b>.</b>
In violation of  Signature of Division	Section Cos 4.01(3	r)of	→ □ Wis. Stats.  Investigator  Title	OR	₩is, Adm. Code 10/19/2021 Date
Signature of	☐ Licensee	OR	S Establishme	ent diviner	10 /26/202 Date
•				,	
	Stat. § 454.15(3), the lisciplinary action again		y is authorized to in	mpose a forfeit	ture in lieu of or in
\$100.00 BY OF THIS CITATIO & PROFESSIONAL 53707-7190. IF T ESTABLISHMENT, PAYMENT SHALL AN ORDER OF FOR	TICE THAT THE CREIMAILING A CHECK OF MAILING A CHECK OF THE SERVICES, DIVISION HIS CITATION IS IS ONE HALF OF THE FORE TREATED AS A PLE FEITURE, NOT TO EXCURSE REFERENCE "NOTICIAL CONTROL OF THE PROPERTY OF	MONEY ORDER THE SIGNED CO OF LEGAL SE SUED TO BOTH ORFEITURE IS DE A OF NO CONTES EED THE AMOUN OF RIGHT TO	NO LATER THAN TY DRY OF THIS FORM RVICES & COMPLIA H AN INDIVIDUAL EMED TO BE ASSES ST TO THE VIOLATIO T OF THE DEPOSIT.  CONTEST" on reve	WENTY (20) DA' TO: DEPAR' NCE, PO BOX CREDENTIAL SED AGAINST N CITED ABOY	YS FROM THE DATE IMENT OF SAFETY 7190, MADISON, WI HOLDER AND AN EACH CREDENTIAL, E AND CONSENT TO form.
<u> </u>	SL Korwey  Acmber of the Board	DSPS Chief Leg Delega	gai Courison, Data	h-6-30 0	

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

Citation 4 of 6

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

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#### COSMETOLOGY EXAMINING BOARD

DIV LEGAL SERVICES & COMPLIANCE DEPT SAFETY & PROFESSIONAL SERVICES

CITATION FOR ADMINISTRATIVE FORFEITURE

DLSC CASE FILE # 19 BAC 069	FINAL DECISION A ORDER # Princess Nails	ND ORDER 0007723
☐ Individual Credential Holder Name License #	□ Establishment Na     □ License # 1694-71	ine
2222 West Wisconsin Avenue	Milwaukee	53233
Street	Clty	Zip
Tuesday	Sep 14, 2021	11:45 am
Day of Week	Date	Time
On the above stated time, date and location, an in be corrected.	vestigation/inspection has disclose	ed the following violation, which must
cotton swabs, wax strips, brushes, nail clipped Princess Nails did not keep the Barbicide in Section 4.01(4)&4.02(4)	a covered container.	OR Wis. Adm. Code 10/19/2021
Signature of Division Investigative Staff	Title OR Establishm	Date 10/26/20
Pursuant to Wis. Stat. § 454.15(3), the licens addition to other disciplinary action against yo	ing authority is authorized to i	impose a forfeiture in lieu of or in
OF THIS CITATION, TOGETHER WITH THE	NEY ORDER NO LATER THAN T SIGNED COPY OF THIS FORM LEGAL SERVICES & COMPLIA TO BOTH AN INDIVIDUAL TURE IS DEEMED TO BE ASSE! NO CONTEST TO THE VIOLATIO	MENTY (20) DAYS FROM THE DATE  M TO: DEPARTMENT OF SAFETY  ANCE, PO BOX 7190, MADISON, WI  CREDENTIAL HOLDER AND AN  SSED AGAINST EACH CREDENTIAL.
	RIGHT TO CONTEST" on rev Chief Legal Counsel, \frac{12-1}{Date}	

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

Citation 5 of 6

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P.O. Box 7190 Madison, WI 53707-7190

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#### COSMETOLOGY EXAMINING BOARD

#### CITATION FOR ADMINISTRATIVE FORFEITURE

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DLSC CASE FILE	# 19 BAC 069	OR	AL DECISION AT DER # Incess Nails		R0007.723
☐ Individual Cred	lential Holder Name	<u> </u>	Establishment Nan ense # 1694-71		
2222 West Wisc	onsin Avenue	Milwe	tilcee	-	53233
Street		City	idico		Zip
Tuesday		Sep 14	<b>1, 2</b> 021		11:45 am
Day of Week		Date			Time
On the above stated be corrected.	I time, date and location	, an investigation/inspe	ection has disclosed	the following	y violation, which must
1	d Hoa T. Tran's (Lic.) Is failed to post the pro  Section 454.06(7)	ocedure for blood or			1
THE VIOLATION OF	0-1		Investigator	011	10/19/2021
Signature of Division	on Investigative Staff		Title	ug/C	Date - 10/26/20
Signature of	☐ Licensee	OR	M Establishme	nt Gwner-	Date
Pursuant to Wis.	Stat. § 454.15(3), the lisciplinary action again	licensing authority is nst your license.	authorized to in	mpose a forfe	iture in lieu of or in
\$ 100.00 BY OF THIS CITATIO & PROFESSIONAL 53707-7190. IF T ESTABLISHMENT, PAYMENT SHALL	OTICE THAT THE CREATED AND ALLING A CHECK OF COMMENT OF THE PROPERTY OF THE PR	R MONEY ORDER NO THE SIGNED COPY OF LEGAL SERVI SSUED TO BOTH A ORFEITURE IS DEEM BA OF NO CONTEST T	OLATER THAN TV OF THIS FORM CES & COMPLIA IN INDIVIDUAL ED TO BE ASSESS O THE VIOLATION	VENTY (20) DA TO: DEPAI NCE, PO BOX CREDENTIAL SED AGAINST	AYS FROM THE DATE RTMENT OF SAPETY (7190, MADISON, WI . HOLDER AND AN `EACH CREDENTIAL.
Ple	ase reference "NOTIC	E OF RIGHT TO CO	NTEST" on reve	rse side of this	s form.
<u>(</u>	Rohme	DSPS Chief Legal Delegate	1 1010	6-2021	
Haveaul GG (Value	1)				Ct

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Citation 6 of 6