WISCONSIN DEPARTMENT OF SAFETY AND PROFESSIONAL SERVICES



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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

4822 Madison Yards Way Madison, WI 53705

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

COSMETOLOGY EXAMINING BOARD

CITATION FOR ADMINISTRATIVE FORFEITURE

| DLSC CASE FILE # 19 BAC 071 | | | FINAL DECISION AND ORDER ORDER # ORDER 0007724 Natural Nail Bar | | | | |
|---|---|--|---|---|---|---|--|
| ☐ Individual Credential Holder Name License # | | | 図 Establishment Name License # 4763-71 | | | | |
| 4353 West Wisconsin Avenue | | | Appleton | | | 54913 | |
| Street | | 1 | City | | | Zip | |
| Tuesday | | | Feb 25, 2020 | | | | |
| Day of Week | | | | | Time | | |
| On the above stated time, dat be corrected. | e and location, a | in Investigatio | on/inspec | tion has disclosed th | e following | g violation, which must | |
| In violation of Section | on 2.05(1) | 01 | r | □ Wis. Stats. | OR | Wis. Adm. Code | |
| 1 | | | | Investigator | | 03/22/2021 | |
| Signature of Division Investig | gative Staff | | | Title | | Date 4/15/202 | |
| Signature of L | icensee | OR | | Establishment | Owner | Date ' | |
| Pursuant to Wis. Stat. § 4 addition to other disciplinary | 54.15(3), the li ry action agains | censing auth it your licens | ority is e. | authorized to impo | ose a forf | eiture in lieu of or in | |
| OF THIS CITATION, TOGE | A CHECK OR THER WITH TES, DIVISION ATION IS ISS LF OF THE FOL TED AS A PLEA | MONEY ORI THE SIGNED OF LEGAL SUED TO BO RESTURE IS A OF NO CON | DER NO COPY SERVICOTH AT DEEME | LATER THAN TWEIT OF THIS FORM TO TES & COMPLIANC N INDIVIDUAL CR D TO BE ASSESSES O THE VIOLATION (| NTY (20) D O: DEPA E, PO BO REDENTIA D AGAINS | AYS FROM THE DATE RTMENT OF SAFETY X 7190, MADISON, WI L HOLDER AND AN T EACH CREDENTIAL. | |
| Please refer | ence "NOTICE | OF RIGHT | то со | NTEST" on reverse | side of thi | ls form. | |
| A Member o | Owner of the Board | DSPS Chief De | Legal C legate | lounsel, 12-6 | -9-69-1 | | |
| #3053DLSC (02/20) | | | | | | Citation 6 of 7 | |

Ch,454, Stats.

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CITATION FOR ADMINISTRATIVE FORFEITURE

| DLSC CASE FILE # 19 BAC 071 | | OR | FINAL DECISION AND ORDER ORDER # ORDER 0007724 Natural Nail Bar | | | | | |
|---|--|---|--|--|---|--|--|--|
| ☐ Individual Credential Holder Name License# | | Establishment Name License # 4763-71 | | | | | | |
| 4353 West Wisconsin Avenue | | Appleton | | | 54913 | | | |
| Street | | | | | Zip | | | |
| Tuesday | | Feb 25, 2020 | | | | | | |
| Day of Week | | Dale | | | Time | | | |
| On the above stated be corrected. | d time, date and location, | an investigation/insp | ection has disclosed t | he following | yiolation, which must | | | |
| NaturNatural Na | il Bar stored cleaning ar | nd disinfecting equi | pment in an unsecu | red location | ۱، | | | |
| | | • | • | | | | | |
| | 2.01(6) | | | | | | | |
| In violation of | Section 3.01(6) | of | ☐ Wis. Stats. | OR | ☑ Wis. Adm. Code 03/22/2021 | | | |
| Silvatura de Divisi | on Inyestigative Staff | | Investigator Title | | Date | | | |
| Aguature of Division | on myesugative statt | | 7 1610 | | 4/15/202 | | | |
| Signature of | ☐ Licensee | OR | D'Establishment | Owner | Date | | | |
| Pursuant to Wis. | Stat. § 454.15(3), the li lisciplinary action agains | censing authority inty your license. | s authorized to imp | oose a forfe | iture in lieu of or in | | | |
| \$100.00 BY OF THIS CITATIO & PROFESSIONAL 53707-7190, IF ESTABLISHMENT, PAYMENT SHALL | TICE THAT THE CREDIT MAILING A CHECK OR ON, TOGETHER WITH TO SERVICES, DIVISION ITHIS CITATION IS ISSOURCE OF THE FOLIABLE AS A PLEAR REITURE, NOT TO EXCE | MONEY ORDER NOTHER SIGNED COPY OF LEGAL SERVI UED TO BOTH A REFEITURE IS DEEM OF NO CONTEST T | O LATER THAN TWE OF THIS FORM THE ICES & COMPLIANCE AN INDIVIDUAL COMED TO BE ASSESSE TO THE VIOLATION | NTY (20) DA TO: DEPAR CE, PO BOX REDENTIAL D AGAINST | AYS FROM THE DATE RIMENT OF SAFETY 7190, MADISON, WI HOLDER AND AN EACH CREDENTIAL. | | | |
| Ple | ease reference "NOTICE | OF RIGHT TO CO | ONTEST" on reverse | e side of this | s form. | | | |
| A | J Rommer DSP Member of the Board | S Chief Legal Cour Delegatee | Date | -205(| _ | | | |
| | | | | | | | | |

#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 071 | ÓRE | AL DECISION AND ER# ural Nail Bar OR | | 007724 |
|---|--|---|---|---|---|
| ☐ Individual Credential Holder Name ☑ Establishment License # 4763 | | | | | |
| 4353 West Wisconsin Avenue | | Applet | DII | | 54913 |
| Street | • | | | | Zip |
| Tuesday | | Feb 25, 2020 | | | • |
| Day of Week | | Date | , | | Time |
| On the above stated be corrected. | time, date and location, a | n investigation/insper | ction has disclosed th | e followin | g violation, which must |
| | k Nhan Nguyen assiste e manicuring services v | | practicing of manic | uring by a | llowing Quang |
| In violation of | Section 2.04(1) | of | □ Wis. Stats. | OR | □ Wis, Adm. Code |
| | | - | Investigator | | 03/22/2021 |
| Signature of Division | Investigative Staff | | Title | | Date 4/15/202 |
| Signature of | ☐ Licensee | OR | ☑ Establishment | Owner | Date |
| Pursuant to Wis. 8 addition to other di PLEASE TAKE NO \$500.00 BY OF THIS CITATION & PROFESSIONAL 53707-7190. IF THE STABLISHMENT, PAYMENT SHALL IF AN ORDER OF FOR | Stat. § 454.15(3), the lice sciplinary action agains rice that the credit mailing a check or n, together with the services, division his citation is issued that of the folse treated as a please treated, not to except the scipling of the services. | t your license. ENTIAL HOLDER M. MONEY ORDER NO THE SIGNED COPY OF LEGAL SERVIC UED TO BOTH A REFEITURE IS DEEME OF NO CONTEST TO ED THE AMOUNT OF | AY DEPOSIT A FOR LATER THAN TWENT OF THIS FORM TO SEE & COMPLIANCE OF THE VIOLATION OF THE DEPOSIT. | REBITURE NTY (20) D O: DEPA CE, PO BO REDENTIA D AGAINS CITED ABO | IN THE AMOUNT OF DAYS FROM THE DATE RTMENT OF SAFETY X 7190, MADISON, WILL HOLDER AND AN TEACH CREDENTIAL. OVE AND CONSENT TO |
| Plea | se reference "NOTICE | OF RIGHT TO CO | NTEȘT" on reverse | side of th | is form, |
| () () | L Rohmey DSPS Tember of the Board | S <u>Chief Legal</u> Couns Delegate <i>€</i> | el, <u>17-6-20</u> Date | 716 | |
| #3053DLSC (02/20) Ch.454, Stats. | | | | | Citation 1 of 7 |

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