WISCONSIN DEPARTMENT OF SAFETY AND PROFESSIONAL SERVICES



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Mail To: P.O. Box 7190 Madison, WI 53707-7190 (608) 266-2264 FAX #: Phone #: (608) 266-2112

4822 Madison Yards Way Madison, WI 53705 E-Mail: dsps@wisconsin.gov RECEIVED Website: http://dsps.wi.gov

COSMETOLOGY EXAMINING BOARD

CITATION FOR ADMINISTRATIVE FORFEITURE

DIV LEGAL SERVICES & COMPLIANCE DEPT SAFETY & PROFESSIONAL BERVICES

APR 1 6 2021

DLSC CASE FILE # 19 BAC 088	FINAL DECISION AND ORDER ORDER # ORDER 0007792 Family Nails and Spa		
Individual Credential Holder Name License #	Establishment Name License # <u>1688-69</u>		
300 S Koeller St #C1	Oshkosh	54904	
Street	City	Zip	
Thursday	Feb 20, 2020	2:20 pm	
Day of Week	Date	Time	

Day of Week

Signature of

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

Family Nails and	Spa stored cleaning and di	ng and disinfecting equipment in an unsecured location.				
In violation of	Section 3.01(6)	of	U Wis. Stats.	OR	Wis, Adm. Code	
Clizabeth L Signature of Division	Bigot on Investigative Staff	<u> </u>	Investigator Title	<u></u>	04/07/2021 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.

١Z

OR

□ Licensee

Establishment Owner

PLEASE TAKE NOTICE THAT THE CREDENTIAL HOLDER MAY DEPOSIT A FORFEITURE IN THE AMOUNT OF BY MAILING A CHECK OR MONEY ORDER NO LATER THAN TWENTY (20) DAYS FROM THE DATE \$100.00 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.

lease reference "NOTICE OF RIGHT TO CONTEST" on reverse side of this form.

2022 DSPS Chief Legal Counse Member of the Board Delegates

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

Citation 1 of 4

Mail To: P.O. Box 7190 Madison, WI 53707-7190 FAX #: (608) 266-2264 Phone #: (608) 266-2112 4822 Madison Yards Way Madison, WI 53705 E-Mail: dsps@wisconsin.gov Website: http://dsps.wi.gov

COSMETOLOGY EXAMINING BOARD

CITATION FOR ADMINISTRATIVE FORFEITURE

DLSC CASE FILE # 19 BAC 088	FINAL DECISION AND ORDER ORDER #ORDER 0007792 Family Nails and Spa			
Individual Credential Holder Name License #	Establishment Name License # 1688-69			
300 S Koeller St #C1	Oshkosh	54904		
Street	City	Zip		
Thursday	Feb 20, 2020	2:20 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.

Family Nails and	l Spa failed to maintain wax p	oots in a sani	tary condition.		
In violation of Vinnhoth	Section Cos 4.01(1) Binet	of	Wis. Stats. Investigator	OR	Wis. Adm. Code 04/07/2021

Clizabeth L	Bizot		Investigator	04/07/2021
Signature of Divisi	ion kevestigative Staff		Title	Date
m				4/12/21
Signature of	□ Licensee	OR	Establishment Owner	Date

Pursuant to Wis. Stat. § 454.15(3), the licensing authority is authorized to impose a forfeiture in licu 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.

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Ul Rollmenn	DSPS Chief Legal Counsel.	1282022	1/28/2022	
A Member of the Board	Delegatee	Date	Date	-

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

Citation 2 of 4

Mail To: P.O. E Madis FAX #: (608) Phone #: (608)

P.O. Box 7190 Madison, WI 53707-7190 (608) 266-2264 (608) 266-2112

Licensee

4822 Madison Yards Way Madison, WI 53705 E-Mail: dsps@wisconsin.gov Website: http://dsps.wi.gov

COSMETOLOGY EXAMINING BOARD

CITATION FOR ADMINISTRATIVE FORFEITURE

DLSC CASE FILE # 19 BAC 088	FINAL DECISION AND OR ORDER #ORD Family Nails and Spa	ER 0007792
Individual Credential Holder Name License #	Establishment Name License # <u>1688-69 & 523</u>	3-71
300 S Koeller St #C1	Oshkosh	54904
Street	City	Zip
Thursday	Feb 20, 2020	2:20 pm
Day of Weck	Date	Time
On the above stated time, date and location, an is be corrected. Family Nails and Spa did not store paper to covered container.		
In violation of Section <u>4.02(4)</u> Clizabeth L Bizot	of	OR 🗵 Wis. Adm. Code 04/07/2021
Signature of Division Investigative Staff	Title	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.

۵Z/

OR

Establishment Owner

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(le Kohmen	DSPS Chief Legal Counsel,	128/2022
-A Member of the Board	Delegatee	Date

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

Signature of

Citation 3 of 4

Mail To: P.O Maa FAX #: (60) Phone #: (60)

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4822 Madison Yards Way Madison, WI 53705 E-Mail: dsps@wisconsin.gov Website: http://dsps.wi.gov

COSMETOLOGY EXAMINING BOARD

CITATION FOR ADMINISTRATIVE FORFEITURE

DLSC CASE FILE # 19 BAC 088	FINAL DECISION AND ORDER ORDER # ORDER0007792 Family Nails and Spa			
Individual Credential Holder Name License #	Li	······································		
300 S Koeller St #C1	Oshi	cosh		54904
Sireei	City			Zip
Thursday	Feb	20, 2020		2:20 pm
Day of Week	Date	·····	u.	Time
be corrected. Family Nails and Spa failed to dispose of ma following each use.	anicure instru	nents that cannot be o	cleaned and	1 disinfected
In violation of Section 4.10(4) Vizabeth L. Bizot	of	□ Wis. Stats. Investigator	OR	☑ Wis. Adm. Code 04/07/2021
Signature of Division Investigative Staff		Title		Date
Vuu				A/12/2021

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Establishment Owner

OR

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al Roh	meyer DSPS	Chief Legal Counsel,	<u>t</u>	25	2022
A Member of the	Board	Delegatee	Date		

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

Signature of

□ Licensee

Citation 4 of 4

Date