WISCONSIN DEPARTMENT OF SAFETY AND PROFESSIONAL SERVICES



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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

Fips Nail Spa LLC ishment Name 5453-71 oc, WI 53066 Zip 21 9:45 am Time has disclosed the following violation, which must in an unsecured location.
ishment Name 5453-71 oc, WI 53066 Zip 21 9:45 am Time has disclosed the following violation, which must
5453-71 oc, WI 53066 Zip 21 9:45 am Time has disclosed the following violation, which must
Zip 21 9:45 am Time has disclosed the following violation, which must
Zip 21 9:45 am Time has disclosed the following violation, which must
Time has disclosed the following violation, which must
Time has disclosed the following violation, which must
in an unsecured location.
Wis. Stats. OR Wis. Adm. Code estigator 03/29/2022
le Date
Establishment Owner Date
norized to impose a forfeiture in lieu of or in
DEPOSIT A FORFEITURE IN THE AMOUNT OF ER THAN TWENTY (20) DAYS FROM THE DATE THIS FORM TO: DEPARTMENT OF SAFETY & COMPLIANCE, PO BOX 7190, MADISON, W IDIVIDUAL CREDENTIAL HOLDER AND AN
So

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

Citation 3 of 6

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Madison, WI 53705

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COSMETOLOGY EXAMINING BOARD

DIV LEGAL SERVICES & COMPLIANCE DEPT SAFETY & PROFESSIONAL SERVICES

CITATION FOR ADMINISTRATIVE FORFEITURE

DLSC CASE FILE # 20 BAC Laura Vo	C 046		L DECISION AND ER # OR S & Tips Nail Spa I		008219	
☑ Individual Credential Holde License # 8892-85 & 4336		Establishment Name License # 5453-71				
W359N5920 Brown St, #11	3		nowoc, WI		53066	
Street		City			Zip	
Friday		May 21	, 2021		9:45 am	
Day of Week		Date			Time	
On the above stated time, date a be corrected.	and location, an investi	gation/inspec	tion has disclosed th	c following	violation, which must	
Dips & Tips Nail Spa stored	cleaning and disinfed	cting equipr	nent in an unsecure	d location.	1	
Clizabeth L B. Signature of Division Investigat	We Staff	of	☐ Wis, Stats. Investigator Title ☐ Establishment 6	OR Owner	₩is. Adm. Code 03/29/2022 Date 06/03/2023 Date	
Pursuant to Wis. Stat. § 454 addition to other disciplinary	.15(3), the licensing a action against your lic	nuthority is ense.	authorized to impo	ose a forfe	iture in lieu of or in	
OF THIS CITATION, TOGETI & PROFESSIONAL SERVICES 53707-7190. IF THIS CITAT ESTABLISHMENT, ONE HALF PAYMENT SHALL BE TREATE AN ORDER OF FORFETURE, N	CHECK OR MONEY HER WITH THE SIGN DIVISION OF LEG TON IS ISSUED TO OF THE FORFEITURI D AS A PLEA OF NO CHOT TO EXCEED THE A	ORDER NO NED COPY AL SERVIC BOTH AN E IS DEEME ONTEST TO MOUNT OF	LATER THAN TWEN OF THIS FORM TO ES & COMPLIANC I INDIVIDUAL CR D TO BE ASSESSED THE VIOLATION COME THE DEPOSIT,	NTY (20) D/ D: DEPAR E, PO BOX EDENTIAL D AGAINST TTED ABOY	AYS FROM THE DATE CTMENT OF SAFETY C7190, MADISON, WI HOLDER AND AN EACH CREDENTIAL VE AND CONSENT TO	
Please referen	ee "NOTICE OF RIG	HT TO CO	NTEST" on reverse	side of this	form,	
A Member of t	re Board	of the discussion, and	Date		erene.	

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

Citation 3 of 6

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COSMETOLOGY EXAMINING BOARD

CITATION FOR ADMINISTRATIVE FORFEITURE

			FINAL DECISION AND	IRDER	0008219
DLSC CASE FILE	# 20 BAC 046		ORDER#		
Laura Vo			Dips & Tips Nail Spa	LLC	
	lential Holder Name -85 & 4336-86		Establishment Name License # 5453-71		
W359N5920 Bro	own St, #113	Oc	conomowoc, WI		53066
Street		Cit	y		Zip
Friday		M	ay 21, 2021		9:45 am
Day of Week	——————————————————————————————————————	Dar	Ge .		Time
On the above stated be corrected.	d time, date and location,	an investigation/i	nspection has disclosed th	ne followin	g violation, which must
	Section Cos 4.01(1) th L Bizot) of	☐ Wis. Stats. Investigator	OR	☑ Wis, Adm, Code 03/29/2022
Signature of Divisi	on Investigative Staff		Title		Date
Signature of	☐ Licensee	OR	☐ Establishment	Owner	Date
Pursuant to Wis. addition to other of	Stat. § 454.15(3), the lilisciplinary action again	icensing authori st your license.	ty is authorized to imp	ose a forfo	eiture in lieu of or in
\$100.00 BY OF THIS CITATIO & PROFESSIONAL 53707-7190. IF ' ESTABLISHMENT, PAYMENT SHALL	MAILING A CHECK OF ON, TOGETHER WITH SERVICES, DIVISION THIS CITATION IS IS ONE HALF OF THE FO	MONEY ORDER THE SIGNED CO OF LEGAL SE SUED TO BOTI OFFEITURE IS DE A OF NO CONTE:	R MAY DEPOSIT A FOR NO LATER THAN TWE DPY OF THIS FORM TO RVICES & COMPLIANCE AN INDIVIDUAL CREMED TO BE ASSESSEST TO THE VIOLATION OF THE DEPOSIT.	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.
Ple	ease reference "NOTICI	E OF RIGHT TO	CONTEST" on reverse	side of thi	is form.
<u> </u>	Red mayor Member of the Board	DSPS Chief Leg		4-207	<u>-2</u>

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

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COSMETOLOGY EXAMINING BOARD

CITATION FOR ADMINISTRATIVE FORFEITURE

DEDC CHOD HEE	20 BAC 046		NAL DECISION AND DER # ips & Tips Nail Spa l		0008219
Laura Vo Individual Credenti License # 8892-85	al Holder Name & 4336-86	 X	Establishment Name tense # 5453-71		
W359N5920 Brown	St #1[3	Ocon	omowoc, WI		53066
Street	5t, n 1 1 5	City	<u></u>		Zip
		Mav	May 21, 2021		9:45 am
Friday Day of Week		Date			Time
Dips & Tips Nail Sp	a maintained wax pot for providing manicur	n an unsanitary	condition and Dips &	k Tips Nai	1 Spa maintained
In violation of (ligabeth . Signature of Division I	Section Cos 4.01(1) L Bigot nvestigative Staff	of	☐ Wis. Stats. Investigator Title	OR	■ Wis. Adm. Code 03/29/2022 Date
Signature of Lawa VO Pursuant to Wis. Standdition to other disc	□ Licensee at. § 454.15(3), the lice iplinary action against	OR using authority your license.	W Establishment is authorized to imp		Date Date of or in
\$ 100,00 BY M OF THIS CITATION, & PROFESSIONAL SI 53707-7190. IF TH ESTABLISHMENT, OF PAYMENT SHALL BE AN ORDER OF FORFE	CE THAT THE CREDEN AILING A CHECK OR M TOGETHER WITH THE ERVICES, DIVISION O S CITATION IS ISSU- NE HALF OF THE FORE TREATED AS A PLEA OF ETURE, NOT TO EXCEE	IONEY ORDER N E SIGNED COP F LEGAL SERV ED TO BOTH FEITURE IS DEEP OF NO CONTEST D THE AMOUNT	Y OF THIS FORM T VICES & COMPLIANC AN INDIVIDUAL C MED TO BE ASSESSE TO THE VIOLATION OF THE DEPOSIT.	NTT (20) C C; DEPA E, PO BO REDENTIA D AGAINS CITED ABO	RTMENT OF SAFETY X 7490, MADISON, W L HOLDER AND AN T EACH CREDENTIAL OVE AND CONSENT TO
A Me	mber of the Board	No. polytical difference and construction of the action of	Dute		, max 111 1
#4#53131 (IZ) (03/30)					Citation 4 of 6

#30531)LSC (02/20) Ch.454, Stats.

Citation 4 of 0

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COSMETOLOGY EXAMINING BOARD

CITATION FOR ADMINISTRATIVE FORFEITURE

DLSC CASE FILE # Laura Vo	20 BAC 046		NAL DECISION AND RDER # Dips & Tips Nail Spa		0008219
■ Individual Credent	ial Holder Name & 4336-86	X.	Establishment Name cense # 5453-71	LLC	
W359N5920 Brown	St, #113	Oco	nomowoc, WI		53066
Street		City		· · · · · · · · · · · · · · · · · · ·	Zip
Friday Day of Week			May 21, 2021 Date		9:45 am Time
•	ne, date and location, an		pection has disclosed th	ne followin	
1 '	oa did not store cotton a bicide in a covered con	ntainer.			
In violation of	Section Cos 4.02(4) &	(5) of	□ Wis, Stats.	OR	■ Wis, Adm. Code
l Clizabet	h L Bigot		Investigator		03/29/2022
Stanature of Division 1	nvestigative Staff		Title		Date
Signature of Laura V	2Π Licensee	OR	Establishment	Owner	06/03/2022 Dute
addition to other disciplinate NOTIC \$100,00 BY M. OF THIS CITATION, & PROFESSIONAL SI 53707-7190. IF THE ESTABLISHMENT, ON	At. § 454.15(3), the liceriplinary action against y THAT THE CREDEN ALING A CHECK OR M. TOGETHER WITH THE GRVICES, DIVISION OF SECULATION IS ISSUED TREATED AS A PLEA OF THE FOREST.	TTAL HOLDER ONEY ORDER N E SIGNED COP F LEGAL SERV ED TO BOTH EITURE IS DEEL OF NO CONTEST	MAY DEPOSIT A FOI TO LATER THAN TWE Y OF THIS FORM TO VICES & COMPLIANCE AN INDIVIDUAL COMED TO BE ASSESSED TO THE VIOLATION COMED	REETURE NTY (20) D O: DEPA E, PO BO REDENTIA) AGAINS	IN THE AMOUNT OF DAYS FROM THE DATE RTMENT OF SAFETY X 7190, MADISON, W L HOLDER AND AN T EACH CREDENTIAL
PAYMENT SHALL BE AN ORDER OF FORFE	HORB, NOT TO BACKER		***		
AN ORDER OF FORFE	reference "NOTICE O			side of th	is form.

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

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Madison, WI 53707-7190

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COSMETOLOGY EXAMINING BOARD

CITATION FOR ADMINISTRATIVE FORFEITURE

					20000
DLSC CASE FILE #	20 BAC 046	FJ O:	NAL DECISION AN	KUŁK (1008219
Laura Vo		<u>I</u>	Dips & Tips Nail Spa I	LC	
☑ Individual Creden License # 8892-85	tial Holder Name 5 & 4336-86		Establishment Name cense # <u>5453-71</u>		
W359N5920 Brow	n St, #113	Oco	nomowoc, WI		53066
Street		City			Zip
Friday		May	21, 2021		9:45 am
Day of Week		Date			Time
On the above stated to be corrected.	me, date and location, an	investigation/ins	pection has disclosed th	e following	violation, which must
	pa did not store cotton a rbicide in a covered con		n covered containers a	nd Dips &	Tips Nail Spa LLC
In violation of	Section Cos 4.02(4) &	z (5) of	☐ Wis. Stats. Investigator	OR	Wis. Adm. Code 03/29/2022
Clinabeth L Bigot Signature of Division Investigative Staff			Title	-	Date
Signature of	☐ Licensee	OR	☐ Establishment (Owner	Date
PLEASE TAKE NOTI \$100.00 BY MOF THIS CITATION & PROFESSIONAL S 53707-7190. IF TH	cat. § 454.15(3), the licenticiplinary action against your control of the credent alling a check or many the credent action of the control of	your license. ITIAL HOLDER TONEY ORDER E SIGNED COP F LEGAL SER ED TO BOTH FITTIRE IS DEE	MAY DEPOSIT A FOR NO LATER THAN TWEN TY OF THIS FORM TO VICES & COMPLIANC AN INDIVIDUAL CR MED TO BE ASSESSED	RETTURE 1 NTY (20) DA D: DEPAR E, PO BOX REDENTIAL D AGAINST	IN THE AMOUNT OF AYS FROM THE DATE RTMENT OF SAFETY (7190, MADISON, WI HOLDER AND AN EACH CREDENTIAL.
PAYMENT SHALL BE AN ORDER OF FORFE	E TREATED AS A PLEA CEITURE, NOT TO EXCEED e reference "NOTICE O	OF NO CONTEST O THE AMOUNT	OF THE DEPOSIT.	TIED ABO	VE AND CONSENT TO
Q	. ()		Counsel, <u>9-3-1-7</u>		

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

Citation 5 of 6

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FAX#:

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COSMETOLOGY EXAMINING BOARD

CITATION FOR ADMINISTRATIVE FORFEITURE

DLSC CASE FILE # 20 Laura Vo	BAC 046		FINAL DECISION AND ORDER #		0008219
☐ Individual Credential License # 8892-85 &			■ Establishment Name License # 5453-71		-
W359N5920 Brown St	, #113	Oc	onomowoc, WI		53066
Street		City	1		Zip
Friday			May 21, 2021		9:45 am
Day of Week		Dat	Date		Time
On the above stated time, be corrected.	date and location, a	n investigation/i	nspection has disclosed th	e followin	g violation, which must
Dips & Tips Nail Spa f following each use.	ailed to dispose of	manicure instr	uments that cannot be c	leaned and	d disinfected
217 (11777777777777777777777777777777777		of	☐ Wis. Stats.	OR	■ Wis. Adm. Code
Pizabeth L Signature of Division Inve	Digot Suice		Investigator Title		03/29/2022 Date
Signature of Division inve	sugative sam		/ III		. 1 /
Signature of Lours Vo	l Licensee	OR	Establishment	Owner	06/03/202 Date
OF THIS CITATION, TO	HAT THE CREDE AND A CHECK OR DOCUMEN WITH TOTAL TOTAL TOTAL OF THE FOR EATED AS A PLEA	ENTIAL HOLDE MONEY ORDER HE SIGNED CO OF LEGAL SE UED TO BOTE OF NO CONTES	R MAY DEPOSIT A FOI NO LATER THAN TWE DPY OF THIS FORM TO RVICES & COMPLIANC I AN INDIVIDUAL CI EEMED TO BE ASSESSES ST TO THE VIOLATION C	REFETURE NTY (20) D O: DEPA E, PO BO REDENTIA) AGAINS	IN THE AMOUNT OF DAYS FROM THE DATE RTMENT OF SAFETY X 7190, MADISON, WI L HOLDER AND AN T EACH CREDENTIAL
Please re	ference "NOTICE	OF RIGHT TO	CONTEST" on reverse	side of th	is form.
A Membe	er of the Board	gy a anna a ga a anna a an a an a an a a	Date	and the second s	
#20531NESC: (02/20)					Citation 6 of 6

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

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COSMETOLOGY EXAMINING BOARD

CITATION FOR ADMINISTRATIVE FORFEITURE

DISCUSSIBLE #	20 BAC 046	FII OF	NAL DECISION AND RDER#	JRDER	0008219
DLSC CASE FILE # Laura Vo			ips & Tips Nail Spa	LLC	
☑ Individual Credent	ial Holder Name	×	Establishment Name		
	& 4336-86	Lio	cense # <u>5453-71</u>		
W359N5920 Brown	n St, #113	Ocon	omowoc, WI		53066
Street		City			Zip
Friday		May	21, 2021		9:45 am
Day of Week		Date			Time
On the above stated tirbe corrected.	ne, date and location, ar	investigation/insp	pection has disclosed the	ne following	violation, which must
Dips & Tips Nail Sp following each use.	oa failed to dispose of	manicure instrun	nents that cannot be c	leaned and	disinfected
In violation of	Section Cos 4.10(4)	of	☐ Wis. Stats.	OR	■ Wis. Adm. Code
Clizabeth	L Bigot		Investigator		03/29/2022
Signature of Division	Investigative Staff		Title		Date
Signature of	☐ Licensee	OR	☐ Establishment	Owner	Date

#3053DLSC (02/20) Ch.454, Stats. Citation 6 of 6