

WISCONSIN DEPARTMENT OF SAFETY AND PROFESSIONAL SERVICES



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<http://ccap.courts.state.wi.us/InternetCourtAccess> and <http://www.courts.state.wi.us/wscga>

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Wisconsin Department of Safety and Professional Services

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FAX #: (608) 266-2264
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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 # <u>22 BAC 009</u>	FINAL DECISION AND ORDER ORDER # <u>ORDER 0008349</u>
<u>Tram Anh Nguyen</u>	
<input checked="" type="checkbox"/> Individual Credential Holder Name License # <u>9959-85</u>	<input type="checkbox"/> Establishment Name License # _____

125 University Dr. Unit 3

Fond du Lac

54935

Street

City

Zip

Monday

Jan 31, 2022

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.

Respondent did not perform proper procedure when dealing with a cut and bleeding customer.

In violation of Section COS 4.05(1) of ☐ Wis. Stats. OR ☒ Wis. Adm. Code
Nick Polansky Investigator Date 10/13/2022
Signature of Division Investigative Staff Title
Tram Anh
Signature of ☐ Licensee OR ☐ Establishment Owner 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 \$500.00 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.

Al Rehman DSPS Chief Legal Counsel,
A Member of the Board Delegates

1/13/2023
Date

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

Citation 1 of 1

Wisconsin Department of Safety and Professional Services

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COPY

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<u>125 University Dr. Unit 3</u>	<u>Fond du Lac</u>	<u>54935</u>
Street	City	Zip
<u>Monday</u>	<u>Jan 31, 2022</u>	
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.

Respondent did not perform proper procedure when dealing with a cut and bleeding customer.

In violation of	Section <u>COS 4.05(1)</u> of	<input type="checkbox"/> Wis. Stats.	OR	<input checked="" type="checkbox"/> Wis. Adm. Code
<u>Nick Polyz</u>		Investigator		10/13/2022
Signature of Division Investigative Staff		Title		Date
Signature of	<input type="checkbox"/> Licensee	OR	<input type="checkbox"/> Establishment Owner	Date

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A Member of the Board

Date

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Committed to Equal Opportunity in Employment and Licensing