

**STATE OF CONNECTICUT  
DEPARTMENT OF PUBLIC HEALTH  
HEALTHCARE SYSTEMS BRANCH**

Re: Ona M. Fantasia, LPN  
License No.: 025057

Petition No. 2009-2009105

VOLUNTARY AGREEMENT NOT TO RENEW OR REINSTATE LICENSE

Ona M. Fantasia, being duly sworn, deposes and says:

1. I am over the age of majority and understand the obligations of an oath.
2. I make this affidavit on the basis of personal knowledge.
3. I was issued license number 025057 by the Department of Public Health (hereinafter "Department") on November 29, 1993. Said license number 025057 lapsed on June 30, 2009.
4. I hereby voluntarily agree not to renew or reinstate my license to practice as a Licensed Practical Nurse in the State of Connecticut.
5. I understand and agree that if I seek a new license or to reinstate this license at any time in the future, the allegations contained in Petition Number 2009-2009105 shall be deemed true. I further understand that any such application must be made to the Department which shall have absolute discretion, after seeking the advice of the Connecticut Board of Examiners for Nursing (hereinafter "the Board"), as to whether said license shall be issued or reinstated and, if so, whether said license shall be subject to conditions.
6. I hereby waive any right to a hearing I may have regarding any request that my license be reinstated or that a new license be issued and also waive any right that I may have to appeal or otherwise challenge the disposition of any such request.
7. I understand and agree that this affidavit and the case file in Petition Number 2009-2009105 are public documents, and I am executing this affidavit in settlement of the allegations contained in the above-referenced petition.
8. I understand that this agreement not to renew or reinstate my license is an event that is reportable to the National Practitioner Data Bank and is public information.

