

STATE OF CONNECTICUT
DEPARTMENT OF PUBLIC HEALTH
HEALTHCARE SYSTEMS BRANCH

In re: George Stevens, HC

Petition No. 2008-1209-020-037

REINSTATEMENT CONSENT ORDER

WHEREAS, George Stevens of Windsor, Connecticut (hereinafter "respondent") has been issued license number 033392 to practice hairdressing by the Department of Public Health (hereinafter "the Department") pursuant to Chapter 387 of the General Statutes of Connecticut, as amended.

WHEREAS, respondent's license expired on February 28, 2006, and respondent has now applied to have said license reinstated by the Department pursuant to Chapter 368a of the General Statutes of Connecticut, as amended.

WHEREAS, respondent hereby admits as follows:

1. On July 1, 1982 the Department issued respondent license number 033392 to practice hairdressing under the General Statutes of Connecticut, Chapter 387. Said license expired on February 28, 2006.
2. From approximately February 28, 2006 through October 2007, he engaged in the practice of hairdressing without a Connecticut license.
3. The conduct described above constitutes grounds for denial of respondent's application for reinstatement pursuant to §19a-14(a)(6) of the General Statutes of Connecticut.

NOW THEREFORE, pursuant to §§19a-17 and 20-252 of the General Statutes of Connecticut, as amended, respondent hereby stipulates and agrees as follows:

1. He waives his right to a hearing on the merits of this matter.
2. Respondent's license to practice hairdressing shall be reinstated when he satisfies the requirements for reinstatement of his license, as set forth in §§ 19a-14-1 through 19a-14-5, inclusive, of the Regulations of Connecticut State Agencies, and this Reinstatement Consent Order is executed by all parties.
4. Respondent shall pay a civil penalty of two hundred and fifty dollars (\$250.00) by certified or cashier's check payable to "Treasurer, State of Connecticut." The check shall reference the Petition Number on the face of the check. Said civil penalty shall be payable at the time respondent submits this executed Reinstatement Consent Order to the Department.
5. Immediately upon issuance, respondent's license shall be reprimanded.
6. Respondent shall comply with all federal and state statutes and regulations applicable to his license.
7. Respondent shall notify the Department of any change(s) in his employment within fifteen (15) days of such change.
8. Respondent shall notify the Department of any change in his home and/or business address within fifteen (15) days of such change.
9. Legal notice shall be sufficient if sent to respondent's last known address of record reported to the Practitioner Licensing and Investigations Section of the Healthcare Systems Branch of the Department.

- 10. Respondent understands this Reinstatement Consent Order may be considered as evidence of the above-admitted violations in any proceeding in which (1) his compliance with this Reinstatement Consent Order is at issue, or (2) his compliance with §20-252 of the General Statutes of Connecticut, as amended, is at issue.
- 11. This Reinstatement Consent Order and the terms set forth herein are not subject to reconsideration, collateral attack or judicial review under any form or in any forum. Further, this Reinstatement Consent Order is not subject to appeal or review under the provisions of Chapters 54 or 368a of the Connecticut General Statutes provided that this stipulation shall not deprive respondent of any other rights that he may have under the laws of the State of Connecticut or of the United States.
- 12. This Reinstatement Consent Order is a revocable offer of settlement which may be modified by mutual agreement or withdrawn by the Department at any time prior to its being executed by the last signatory.
- 13. This Reinstatement Consent Order is effective when accepted and approved by a duly appointed agent of the Department.
- 14. Respondent has the right to consult with an attorney prior to signing this document.
- 15. This Reinstatement Consent Order is a matter of public record.
- 16. The execution of this document has no bearing on any criminal liability without the written consent of the Director of the Medicaid Fraud Control Unit or the Bureau Chief of the Division of Criminal Justice's Statewide Prosecution Bureau. The purpose of this Reinstatement Consent Order is to resolve the pending administrative license disciplinary petition only, and is not intended to affect any civil or criminal liability or defense.
- 17. This Reinstatement Consent Order embodies the entire agreement of the parties with respect to this case. All previous communications or agreements regarding the subject matter of this Reinstatement Consent Order, whether oral or written, between the parties are superseded unless expressly incorporated herein or made a part hereof.

I, George Stevens, have read the above Reinstatement Consent Order, and I agree to the terms and allegations set forth therein. I further declare the execution of this Reinstatement Consent Order to be my free act and deed.

George T. Stevens
George Stevens

Subscribed and sworn to before me this 20th day of April 2009.

Rebecca A. Wheeler
Notary Public or person authorized by law to administer an oath or affirmation
My commission expires: 3/31/13

The above Reinstatement Consent Order having been presented to the duly appointed agent of the Commissioner of the Department of Public Health on the 23rd day of April 2009, it hereby ordered and accepted.

Jennifer L. Filippone
Jennifer L. Filippone, Section Chief
Practitioner Licensing and Investigations Section, Healthcare Systems Branch



STATE OF CONNECTICUT

DEPARTMENT OF PUBLIC HEALTH

May 6, 2009

George Stevens
252 Conestoga Avenue
Windsor, CT 06095

Dear Mr. Stevens:

This is to advise you that you have completed all requirements for Connecticut hairdresser/cosmetician licensure. License number 033392 has been issued effective April 23, 2009, pursuant to the Reinstatement Consent Order you entered into.

You will receive your license documents (2 wallet-sized cards and 1 suitable for posting) during the third week of June, at your address of record. Failure to renew your license within ninety (90) days of the due date will result in your license becoming void. In that event, re-licensure would require a new application to the Department and a review of all credentials to determine whether you would satisfy current licensing requirements. In order to avoid such a process, be sure to renew your license in a timely manner every two years in the month of your birth.

It is your responsibility to notify the Department of Public Health, in writing, of any future changes of name and/or address. Such notification to the Department is required by law and failure to provide same will jeopardize the status of your license.

If you have any questions, please do not hesitate to contact this office at (860) 509-7590.

Sincerely,

Stephen B. Carragher
Health Program Supervisor
Practitioner Licensing and Investigations Section

cc: Jennifer Filippone, Section Chief
Donna Brewer, Director, Public Health Hearing Office

SBC:fm

Phone:



Telephone Device for the Deaf: (860) 509-7191

410 Capitol Avenue - MS # _____

P.O. Box 340308 Hartford, CT 06134

Affirmative Action / An Equal Opportunity Employer