

CERTIFIED MAIL - RETURN RECEIPT REQUESTED NO. _____

STATE OF CONNECTICUT
 DEPARTMENT OF PUBLIC HEALTH AND ADDICTION SERVICES
 BUREAU OF HEALTH SYSTEM REGULATION
 DIVISION OF MEDICAL QUALITY ASSURANCE

In re: LuAnna Tamburro, H.C.

Petition No. 930924-20-013

CONSENT ORDER

WHEREAS, LuAnna Tamburro of Stamford, Connecticut (hereinafter "respondent") has been issued license number 042378 to practice the occupation of hairdresser and cosmetician by the Department of Public Health and Addiction Services (hereinafter "the Department") pursuant to Chapter 387 of the Connecticut General Statutes, as amended; and,

WHEREAS, respondent's license expired in July 1992, and respondent has now applied to have said license reinstated by the Department pursuant to Chapter 387 of the Connecticut General Statutes, as amended; and,

WHEREAS, respondent hereby admits as follows:

1. That from July 1992 until March 1993, she practiced the occupation of hairdresser and cosmetician at Sweeney Todd Hair Designs of Stamford, Connecticut and from April 1993 until the present at CCB Haircutters, of Greenwich.
2. That the conduct described in paragraph 1 above fails to conform to the accepted standards of the occupation of hairdresser and cosmetician in violation of Connecticut General Statutes §20-263.

NOW THEREFORE, pursuant to §§19a-17 and 20-263 of the Connecticut General Statutes, as amended, respondent hereby stipulates and agrees as follows:

Res'd
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JS
Attn: Carol

1. That she waives her right to a hearing on the merits of this matter.
2. That if she satisfies the requirements for licensure as a hairdresser and cosmetician as set forth in chapter 387 of the Connecticut General Statutes and upon payment of a civil penalty of two hundred and fifty (250.00) dollars by certified or cashier's check payable to "Treasurer, State of Connecticut" her license to practice as a hairdresser and cosmetician will be reinstated. Said civil penalty shall be submitted to the Department with this executed Consent Order .
3. That respondent shall comply with all federal and state statutes and regulations applicable to her license.
4. That respondent shall notify the Department of any change in her home and/or business address within fifteen (15) days of such change.
5. That any violation of the terms of this Consent Order authorizes the Department to seek summary suspension of respondent's license. Respondent specifically waives the provisions of Connecticut General Statutes §§4-182(c) and 19a-17(c) which require a finding of an emergency and a clear and immediate danger to the public health and safety, respectively. Respondent agrees that any violation of the terms of this Consent Order shall constitute grounds for summary actions.
6. That legal notice shall be sufficient if sent to respondent's last known address of record reported to the Licensure and Registration Section of the Division of Medical Quality Assurance of the Department.

7. That respondent understands that this Consent Order may be considered as evidence of the above-admitted violations in any proceeding before the Connecticut Examining Board for Barbers, Hairdressers and Cosmeticians (1) in which her compliance with the Consent Order is at issue or (2) in which her compliance with §20-263 of the Connecticut General Statutes, as amended, is at issue.
8. That this Consent Order and terms set forth herein are not subject to reconsideration, collateral attack or judicial review under any form or in any forum. Further, that said Consent Order is not subject to appeal or review under the laws of the State of Connecticut or of the United States
9. That this 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.
12. That this Consent Order is effective when accepted and approved by a duly appointed agency of the Department.
13. That she has the right to consult with an attorney prior to signing this document.
14. That this Consent Order is a matter of public record.

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

LuAnna Tamburro
LuAnna Tamburro

Subscribed and sworn to before me this 22 day of December 1993.

Ronald J. Marchetti
Notary Public or person authorized
by law to administer an oath or
affirmation

RONALD J. MARCHETTI
NOTARY PUBLIC
My Commission Expires 2/28/95

The above Consent Order having been presented to the duly appointed agent of the Commissioner of the Department of Public Health and Addiction Services on the 28th day of December, 1993, it hereby ordered and accepted.

Stanley K. Peck Asst Director
Stanley K. Peck, Director
Division of Medical Quality Assurance

RAS:dm
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