

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

In re: Jurea Hutchins, H/C

Petition No. 2006-1213-020-035

REINSTATEMENT CONSENT ORDER

WHEREAS, Jurea Hutchins of Waterbury, Connecticut (hereinafter "respondent") has been issued license number 049157 to practice hairdressing by the Department of Public Health (hereinafter "the Department") pursuant to Chapter 387 of the General Statutes of Connecticut, as amended; and,

WHEREAS, respondent's license expired on August 31, 2001, 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; and,

WHEREAS, respondent hereby admits as follows:

1. On July 10, 1998, the Department issued respondent license number 049157 to practice hairdressing under the General Statutes of Connecticut, Chapter 387 which license lapsed due to non-renewal on August 31, 2001.
2. From August 31, 2001 to the present time she engaged in the practice of hairdressing without a Connecticut license.
3. That 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 20-263 of the General Statutes of Connecticut, as amended, respondent hereby stipulates and agrees as follows:

1. She waives her right to a hearing on the merits of this matter.
2. Respondent's license to practice as a hairdresser/cosmetologist shall be reinstated when she satisfies the requirements for reinstatement of her 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.
3. 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.
4. Immediately upon issuance, respondent's license shall be reprimanded.
5. Respondent shall comply with all federal and state statutes and regulations applicable to her license.
6. Respondent shall notify the Department of any change(s) in her employment within fifteen (15) days of such change.
7. Respondent shall notify the Department of any change in her home and/or business address within fifteen (15) days of such change.
8. 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.
9. Respondent understands this Reinstatement Consent Order may be considered as evidence of the above-admitted violations in any proceeding before the Connecticut Barbers, Hairdressers and Cosmeticians in which (1) her compliance with this Reinstatement Consent Order is at

issue, or (2) her compliance with §20-263 of the General Statutes of Connecticut, as amended, is at issue.

10. 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 she may have under the laws of the State of Connecticut or of the United States.
11. 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.
12. This Reinstatement Consent Order is effective when accepted and approved by a duly appointed agent of the Department.
13. Respondent has the right to consult with an attorney prior to signing this document.
14. This Reinstatement Consent Order is a matter of public record.
15. 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.

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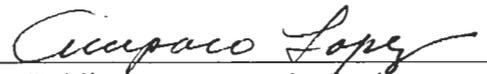
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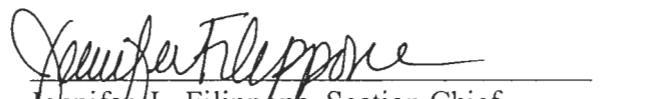
I, Jurea Hutchins, have read the above Reinstatement Consent Order, and I agree to the terms and allegations set forth therein. I further declare the execution of this Reinstatement Consent Order to be my free act and deed.


Jurea Hutchins, H/C

Subscribed and sworn to before me this 24 day of Jan ~~2006~~ 2007


Notary Public or person authorized
by law to administer an oath or
affirmation

The above Reinstatement Consent Order having been presented to the duly appointed agent of the Commissioner of the Department of Public Health on the 31st day of January ~~2006~~ 2007, it hereby ordered and accepted.


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

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reinstatement co

STATE OF CONNECTICUT
SUPERIOR COURT HOUSING SESSION
OFFICE OF THE CLERK
www.jud.ct.gov



Jurea Wantay Hutchins
112 Angel Drive
Apt.D
Waterbury, CT 06704

NOTICE OF COURT HEARING

JD-CL-9H2 Rev. 7-00 VAF&RAG

| | | |
|---|-----------------------------|-------------------------------|
| NAME OF CASE Fleurancois v Hutchins | | DOCKET NO. WASP-036308 |
| ADDRESS OF COURT 300 Grand Street, Waterbury, CT 06702 | | COURT PHONE (203) 591-3310 |
| DATE OF HEARING 01/24/2007 | TIME OF HEARING 09:30 AM | COURTROOM Courtroom 1 |
| ADDRESS OF PREMISES 112 D Angel Drive, Waterbury, CT 06704 | | |

This case has been assigned for a court hearing for the reason given below:

Trial - Summary Process

All parties are required to appear at the place and time given above. If you are unable to attend the hearing you should notify the opposing party and obtain an agreement before you notify the court.

Please notify your witnesses, if any, so they can be in court with you. Bring all other evidence you wish to present, such as bills, receipts, invoices, etc. If a party not represented by an attorney seeks to compel attendance of a witness with a subpoena, an Application for Subpoena must be submitted to the Clerk's Office at least three business days prior to the Hearing Date.

If a motion to open judgment is granted, your case may proceed to trial that same day.

The parties must be prepared to go to trial on the Hearing Date as indicated above.

ALL HOUSING MATTERS WILL BE HEARD AT 300 GRAND STREET, WATERBURY, CT. THESE MATTERS WILL BE HEARD IN COURTROOM 1. PLEASE BRING ALL WITNESSES AND EVIDENCE WITH YOU ON YOUR COURT DATE. ANY PARTY UNABLE TO ATTEND THEIR HEARING SHOULD NOTIFY THE OPPOSING PARTY AND OBTAIN AN AGREEMENT BEFORE YOU NOTIFY THE COURT. ALL CONTINUANCE DATES ARE ASSIGNED BY THE COURT. YOUR FAILURE TO APPEAR CAN RESULT IN NON SUIT OR DEFAULT.

Assistance may be provided upon request by a qualified individual with a disability under the provisions of the Americans With Disabilities Act.

CLERK OF COURT, BY Darcey Riley DATE 01/08/2007 .

MEMORANDUM

CIVIL PENALTY

TO: Office of Practitioner Licensing and Certification
Remittance Section

FROM: Legal Office

CASE: Name Jurea Hutchins HC
Address 112 Angle Drive
Waterbury, Ct 06708

PETITION #: 2006-1213-020-035

This is to inform you that this office has received the civil penalty in the amount of \$ 250.⁰⁰, pursuant to the CONSENT ORDER or ~~MEMORANDUM OF DECISION~~ in the above referenced matter.

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|---|------------------|---------------------------------------|--|-------------------|
|  | | POSTAL MONEY ORDER | | 15-800 000 |
| SERIAL NUMBER | YEAR, MONTH, DAY | POST OFFICE | U.S. DOLLARS AND CENTS | |
| 09839147387 | 2007-01-23 | 067042 | 250.00 | |
| AMOUNT | | TWO HUNDRED FIFTY DOLLARS & 00¢ ***** | | |
| PAY TO: | TREASURER STATE | | NEGOTIABLE ONLY IN THE U.S. AND POSSESSIONS SEE REVERSE WARNING | |
| ADDRESS: | OF CON | | FROM: | Jurea Hutchins HC |
| | | | ADDRESS: | 112 Angle Dr APD |
| C.O.D. NO. OR USED FOR | | | | |
| ⑆000008002⑆ | | 09839147387⑆ | | |