

**STATE OF CONNECTICUT
DEPARTMENT OF PUBLIC HEALTH
BUREAU OF REGULATORY SERVICES**

In re: Carmen Ana Negron

Petition No. 2001-0829-000-080

PRELICENSURE CONSENT ORDER

WHEREAS, Carmen Ana Negron of Hartford, Connecticut (hereinafter "respondent") has applied for licensure to practice hairdressing and cosmetology by the Department of Public Health (hereinafter "the Department") pursuant to Section 5 of Public Act 03-240; and,

WHEREAS, respondent agrees that:

1. The Department has at no time issued respondent a license to practice hairdressing and cosmetology under the General Statutes of Connecticut, Chapter 387.
2. From January 1996 until the present, respondent practiced hairdressing and cosmetology without a Connecticut license.
3. The conduct described above constitutes grounds for the denial of respondent's application for licensure pursuant to §19a-14 of the General Statutes of Connecticut.

NOW THEREFORE, pursuant to §19a-14 of the General Statutes of Connecticut, respondent hereby stipulates and agrees to the following:

1. Respondent waives the right to a hearing on the merits of respondent's application for licensure.
2. After satisfying the requirements for licensure as a hairdresser and cosmetician as set forth in Section 5 of Public Act 03-240, respondent's license to practice hairdressing and cosmetology will be issued.

3. Respondent shall pay a civil penalty of one fifty hundred dollars (\$150.00) by certified or cashier's check payable to, "Treasurer, State of Connecticut." The check shall reference the Petition Number on its face. Said civil penalty shall be payable at the time respondent submits this executed Prelicensure Consent Order to the Department.
4. Respondent shall comply with all state and federal statutes and regulations applicable to respondent's license.
5. Respondent shall notify the Department of any change in respondent's home and/or business address within fifteen (15) days of such change.
6. Legal notice shall be sufficient if sent to respondent's last known address of record reported to the Department's Office of Practitioner Licensing and Certification.
7. Respondent understands that this Prelicensure 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 in which (1) respondent's compliance with this Prelicensure Consent Order is at issue, or (2) respondent's compliance with §20-263 of the Connecticut General Statutes, as amended, is at issue.
8. This Prelicensure 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, this Prelicensure Consent Order is not subject to appeal or review under the provisions of Chapters 54 and 368a of the General Statutes of Connecticut, provided that this stipulation shall not deprive respondent of any other rights that respondent may have under the laws of the State of Connecticut or of the United States.
9. This Prelicensure 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.

10. This Prelicensure Consent Order is effective when accepted and approved by a duly appointed agent of the Department.
11. This Prelicensure Consent Order is a matter of public record.
12. Respondent has the right to consult with an attorney prior to signing this document.

I, Carmen Ana Negrón, have read the above Prelicensure Consent Order, and I agree to the terms and allegations set forth therein. I further declare the execution of this Prelicensure Consent Order to be my free act and deed.

Carmen A. Negrón

Carmen Ana Negrón

Subscribed and sworn to before me this 24th day of October 2003.

[Signature]

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

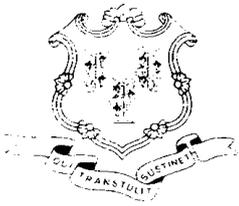
Alejandro Rodríguez
My Commission Expires October 31, 2003

The above Prelicensure Consent Order having been presented to the duly appointed agent of the Commissioner of the Department of Public Health on the 24th day of October 2003, is hereby ordered and accepted.

Jennifer Filippone

Jennifer Filippone, Public Health Services Manager
Office of Practitioner Licensing and Certification

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prelicensure co



STATE OF CONNECTICUT

DEPARTMENT OF PUBLIC HEALTH

CERTIFIED MAIL – RETURN RECEIPT REQUESTED
7099 3400 0018 2734 1437

October 27, 2003

Carmen A. Negrón
1030 Capitol Ave, 3rd Floor
Hartford, CT 06106

Dear Ms. Negrón:

This is to advise you that you have completed all requirements for Connecticut Hairdresser licensure. License number 052884 has been issued effective October 27, 2003.

Enclosed is a copy of the fully executed Prelicensure Consent Order in accordance with which your license is being granted. The Prelicensure Consent Order takes effect immediately.

You will receive your license in approximately eight (8) weeks, at your address of record. Instructions regarding future renewal will be enclosed. 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 each year 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
Office of Practitioner Licensing and Certification

cc: Jennifer Filippone, Public Health Services Manager
Donna Brewer, Director, Public Health Hearing Office
Stanley Peck, Director, Legal Office

SBC/dl
Petition Number: 2001-0829-000-080



Phone:
Telephone Device for the Deaf: (860) 509-7191
410 Capitol Avenue - MS # _____
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