

STATE OF CONNECTICUT
DEPARTMENT OF PUBLIC HEALTH
HEALTHCARE SYSTEMS BRANCH

In re: Casale Kotrys

Petition No. 2005-0224-000-009

PRELICENSURE CONSENT ORDER

WHEREAS, Casale Kotrys of South Meriden, Connecticut (hereinafter "respondent") has applied for licensure 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 agrees that:

1. The Department has at no time issued respondent a license to practice hairdressing under the General Statutes of Connecticut, Chapter 387.
2. In 2005 she was engaged in the practice of hairdressing without a 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:

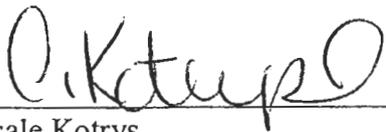
1. Respondent waives the right to a hearing on the merits of her application for licensure.
2. After satisfying the requirements for licensure as a hairdresser as set forth in Chapter 387 of the General Statutes of Connecticut, respondent's license to practice as a hairdresser will be issued.
3. Immediately upon issuance, respondent's license to practice as a hairdresser in the State of Connecticut is hereby reprimanded.

4. Respondent shall pay a civil penalty of two hundred dollars (\$200.00) 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, and shall be payable at the time respondent submits the executed Prelicensure Consent Order to the Department.
5. Respondent shall notify the Department in writing of any change of employment within fifteen (15) days of such change.
6. Respondent shall notify the Department of any change in her home or business address within fifteen (15) days of such change.
7. 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.
8. Respondent shall comply with all state and federal statutes and regulations applicable to her license.
9. Legal notice shall be sufficient if sent to respondent's last known address of record reported to Practitioner Licensing and Investigations of the Healthcare Systems Branch of the Department.
10. 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) her compliance with this Prelicensure Consent Order is at issue, or (2) her compliance with §20-252 of the Connecticut General Statutes, as amended, is at issue.
11. 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 she may have under the laws of the State of Connecticut or of the United States.

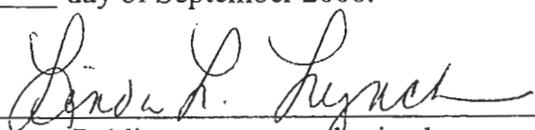
12. This Preliminary Consent Order is a revocable offer of settlement which may be modified by mutual agreement or withdrawn by the Department at any time prior to its being executed by the last signatory.
13. This Preliminary Consent Order is effective when accepted and approved by a duly appointed agent of the Department.
14. Respondent understands this Preliminary Consent Order is a matter of public record.
15. Respondent understands she has the right to consult with an attorney prior to signing this Preliminary Consent Order.

I, Casale Kotrys, 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.



Casale Kotrys

Subscribed and sworn to before me this 8th day of September 2006.



LINDA L. LYNCH
NOTARY PUBLIC
MY COMMISSION EXPIRES MAR. 31, 2010
Notary Public or person authorized
by law to administer an oath or
affirmation

The above Prelicensure Consent Order having been presented to the duly appointed agent of the Commissioner of the Department of Public Health on the 14th day of September 2006, it is hereby accepted and ordered.



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

MEMORANDUM

CIVIL PENALTY

TO: Office of Practitioner Licensing and Certification
Remittance Section

FROM: Legal Office

CASE: Name CASALE Kotreys

Address 6 EVANSVILLE AVE.

SO. MERIDEN, CT 06051

PETITION #: JDVS-0224-000-805

This is to inform you that this office has received the civil penalty in the amount of
\$ 200.00, pursuant to the CONSENT ORDER or MEMORANDUM OF DECISION
in the above referenced matter.



Handwritten signature