

NYCServ Violation Copy

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0196183379



0568000006006001 SUMMONS TO APPEAR FOR CIVIL PENALTIES ONLY

SUMMONS NUMBER: **0196 183 379**
ENFORCEMENT AGENCY: **Police Department**

Respondent Last Name KLASBRUN		First DAVID	M.I.
Phone No 347 213 1426	☒ Cell ☐ Home	D.O.B. 04/22/77	Sex ☒ Male ☐ Female
Mailing Address 1834 58 Street			
ID Number 423 174 811	ID Type NYS DL		
Race ☒ White ☐ Black ☐ Hisp. White ☐ Hisp. Black ☐ Am. Ind./Alaskan Native ☐ Asian/Pacific. Is.			
Date of Occurrence 12/02/24	Time of Occurrence 06:44		☒ AM ☐ PM
Place of Occurrence (☐ At ☒ In Front Of ☐ Opposite) 6601 Fort Hamilton Parkway		Precinct 068	

Include the summons number above on all communications

HEARING DATE: **01/20/25** AT: **09:00** ☒ AM
☐ PM

You must respond by the above date.
See the BACK OF THIS SUMMONS to learn about your options.

WARNING: If you do not respond, you may be found automatically responsible and you may owe larger penalties. If you do not pay any imposed penalties, you may lose your ability to keep or get a City license, permit or registration. The City might also take further legal action against you. See the back for more information.

Hearing Location: Office of Administrative Trials and Hearings (OATH)

Borough: **Brooklyn** (See back for address) **(844) 628-4692**
www.nyc.gov/oath

☒ Admin. Code ☐ Parks Rules: 56 RCNY
☐ Rules of City of NY ☐ Traffic Rules: 34 RCNY ☐ Other

Section/Rule **19-190 b** OATH Code **D16 IL**

Mail-in Penalty **\$250** Max. Penalty **\$250** Property ☐ Yes
Removed ☒ No

Details of Charge(s): **AT TPO Defendant WAS operating A Black KIA Sedan NY TAG JLS 7639 When Christ making A left turn from 66 Street to Fort Hamilton Parkway did not make to yielding And Striking Pedestrian in Crosswalk**

NYC Charter Section 104b and 104b-a and the Rules of the City of New York authorize the NYC Office of Administrative Trials and Hearings (OATH) to hold hearings. I, an employee of the agency named above, affirm under penalty of perjury that: 1) I personally observed the commission of the violation charged; 2) I verified the existence of the violation through a review of Departmental reports; or 3) I was informed of the commission of the violation by a reliable witness (as known to the Department). False statements made herein are punishable as a Class A Misdemeanor pursuant to Section 210.45 of the Penal Law.

I/O Signature **[Signature]** Command **068**

Rank/Title **PO** Name **DIARTE** Tax No. **963016**



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