

NYCServ Violation Copy

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0196598820



1113000008008004 SUMMONS TO APPEAR FOR CIVIL PENALTIES ONLY

SUMMONS NUMBER: **0196 598 820**
ENFORCEMENT AGENCY: **Police Department**

Respondent Last Name love lace		First Shelly Ann	M.I.
Phone No 917 808 2524	☒ Cell ☐ Home	D.O.B. 08/10/88	Sex ☐ Male ☒ Female
Mailing Address 342 74 ST Brooklyn NY			
ID Number 611 030 975	ID Type NYS drivers license		
Race ☐ White ☒ Black ☐ Hisp. White ☐ Hisp. Black ☐ Am. Ind./Alaskan Native ☐ Asian/Pacific. Is.			
Date of Occurrence 06/01/26		Time of Occurrence 06:33 ☒ AM ☐ PM	
Place of Occurrence (☐ At ☐ In Front Of ☐ Opposite) 74st and 4 Ave		Precinct 068	

Include the summons number above on all communications

HEARING DATE: **07/21/2026** 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 **D 16 L**

Mail-in Penalty **\$50** Max Penalty **\$250** Property ☐ Yes
Removed ☒ No

Details of Charge(s):
AT R/P/O. Officer is informed by love lace, shellyann address is known to the NYPD that while turning she fail to yield to pedestrian causing injury to pedestrian

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 records; or 3) I was informed of the commission of the violation by a reliable witness that is 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 **P.O.** Name **Phillip** Tax No. **963686**



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