

NYCServ Violation Copy

Internet



0198896217



1051000005005012
SUMMONS TO APPEAR
FOR CIVIL PENALTIES ONLY
 SUMMONS NUMBER: **0198 896 217**
 ENFORCEMENT AGENCY: **Police Department**

Respondent Last Name GRECO	First JOSEPH	M.I. IA
Phone No. 212 447 0008	Cell ☒ Cell ☐ Home	D.O.B. 06/12/42
Sex ☒ Male ☐ Female		
Mailing Address 21 Lorraine Ave, S.I, NY 10312		
ID Number 546 584 488	ID Type DL	
Race ☒ White ☐ Black ☐ Hisp. White ☐ Hisp. Black ☐ Am. Ind./Alaskan Native ☐ Asian/Pacific. Is.		
Date of Occurrence 04/20/26	Time of Occurrence 07:10	
Place of Occurrence ☒ At ☐ In Front Of ☐ Opposite		Precinct 123
HYLAN BLVD. / ARDEN AVE		

Include the summons number above on all communications

HEARING DATE: **06/15/26** AT: **08:00** ☒ 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: **Staten Island** (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: **A-190 (B)** OATH Code: **D16 IL**

Mail-in Penalty: **250** Max. Penalty: **250** Property ☐ Yes ☒ No

Details of Charge(s): **Fail to yield to pedestrian in crosswalk. AT 7710 110 is informed by Nicole Macdelli, cell (917) 200 6054 who is a witness.**

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 Department 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: **123**

Rank/Title: **PC** Name: **Solman, M** Tax No.: **973193**



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