NYCServ Violation Copy

Internet

0199199698

0483000002002006

SUMMONS TO APPEAR

FOR CIVIL PENALTIES ONLY

SUMMONS NUMBER: 0199 199 698

ENFORCEMENT AGENCY: **Police Department**

Respondent Last Name	First	M.I.
GILFILLIAN	ALWYANE	K

Phone No.		D.O.B.	Sex
347-965-5437	☐ Cell ☐ Home	04/25/86	☑ Male ☐ Female

Mailing Address: 41-51 GRACE AVENUE PH, BRONX, NY, 10466

ID Number	ID Type
700007587	DRIVER LICENSE

Race ☐ White ☑ Black ☐ Hisp. White ☐ Hisp. Black ☐ Am. Ind./Alaskan Native ☐ Asian/Pacific. Is.

Date of Occurrence	Time of Occurrence	
09 / 12 / 24 (MM / DD)	14 : 20 (HH : MM)	☐ AM ☑ PM

Place of Occurrence (☐ At ☑ In Front Of ☐ Opposite)	Precinct
B/W 37 Avenue & 28 Street	114

Include the summons number above on all communications

HEARING DATE: 11 / 01 / 24 (MM / DD) AT: 09:00 (HH : MM) ☑ 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: Queens (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	OATH Code	
19-190(b)	016	
Mail-in Penalty	**Max. Penalty**	Property Removed ☐ Yes ☐ No
	$250	

Details of Charge(s):

Right of way failure to yield

Factual Allegations

Physical injury

OATH

NYC Charter Section 1048 and 1049-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	Command
PO [illegible]	114

Rank/Title	Name	Tax No.
PO	HOSSAIN	975543

0199 199 698