

NYCServ Violation Copy

Internet



0199207829



082900002002006
SUMMONS TO APPEAR
FOR CIVIL PENALTIES ONLY
 SUMMONS NUMBER: **0199 207 829**
 ENFORCEMENT AGENCY: **Police Department**

Respondent Last Name SHEV	First LI	M.I.
Phone No. 917-353-9327	Cell ☒ Home ☐	D.O.B. 07/22/89
Sex ☒ Male ☐ Female		
Mailing Address 4112 MAIN ST Queens Apt 3A		
ID Number 250 138 202	ID Type Drivers license (NYS)	
Race ☐ White ☐ Black ☐ Hisp. White ☐ Hisp. Black ☐ Am. Ind./Alaskan Native ☒ Asian/Pacific. Is.		
Date of Occurrence 08/05/25	Time of Occurrence 09:25 ☒ AM ☐ PM	
Place of Occurrence ☒ At ☐ In Front Of ☐ Opposite I/O UNION ST SANFORD AVE		Precinct 109

Include the summons number above on all communications

HEARING DATE: **10/27/25** 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 lose your license. 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 19-190CA (Failure to Yield)	OATH Code D 6 K
Mail-in Penalty \$100	Max. Penalty \$250
Property ☐ Yes	Removed ☒ No

Details of Charge(s):
At 100 Motorist states he was making a left turn from E/B Sanford Ave to N/B Union Street and was distracted by a bicyclist when he struck pedestrian crossing at the crosswalk resulting in physical injuries
 Factual Allegations

NYC Charter Section 104b and 104b-e 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 109
Rank/Title PO	Name MASINA
	Tax No. 979320



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