

NYCServ Violation Copy

Internet



0199899902



0542000013013021
SUMMONS TO APPEAR
FOR CIVIL PENALTIES ONLY
 SUMMONS NUMBER: **0199 899 902**
 ENFORCEMENT AGENCY: **Police Department**

Respondent Last Name XIA		First NING		M.I.	
Phone No 3476516202		☒ Cell ☐ Home	D.O.B. 11/30/70		Sex ☒ Male ☐ Female
Mailing Address 673 4th 1914 Avenue D Brooklyn NY 11230					
ID Number 157652313			ID Type NYS class E		
Race ☐ White ☐ Black ☐ Hisp. White ☐ Hisp. Black ☐ Am. Ind./Alaskan Native ☒ Asian/Pacific. Is.					
Date of Occurrence 11/16/24			Time of Occurrence 01:30 ☐ AM ☒ PM		
Place of Occurrence (☐ At ☒ In Front Of ☐ Opposite) 98 Veronica PL Brooklyn NY				Precinct 067	

Include the summons number above on all communications

HEARING DATE: **11/16/25** 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: **9 Bond St. 7th FL Brooklyn, NY 11201** (See back for address) **(844) 628-4692**
www.nyc.gov/oath

☒ Admin. Code	☐ Parks Rules: 56 RCNY	OATH Code D161K
☐ Rules of City of NY	☐ Traffic Rules: 34 RCNY ☐ Other	
Section/Rule 19-140(A)		
Mail-in Penalty \$100.00	Max. Penalty \$100.00	Property Removed ☐ Yes ☒ No

Details of Charge(s):
Right of Way Failure to yield
In regards to MV # 1720
 Factual Allegations

OATH

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 067
Rank/Title PO	Name Hickey	Tax No. 959426



0199 899 902