NYCServ Violation Copy

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SUMMONS TO APPEAR

FOR CIVIL PENALTIES ONLY

SUMMONS NUMBER: 0200 071 659

ENFORCEMENT AGENCY: **Police Department**

Respondent Last Name	First	M.I.
Girgis	Amanda	

Phone No.		D.O.B.	Sex
718 753 5445	☒ Cell ☐ Home	08/07/92	☐ Male ☒ Female

Mailing Address: 2834 42 ST Astoria NY 11103

ID Number	ID Type
125 985 896	NYS DL

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

Date of Occurrence	Time of Occurrence	
MM / 07 / 24	HH : 26	☐ AM ☒ PM

Place of Occurrence (☐ At ☐ In Front Of ☐ Opposite): I/O 92 ST & Gatling PL

Precinct: 068

Include the summons number above on all communications

HEARING DATE: MM / 16 / 24 AT: 09 : 30 ☐ 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		OATH Code
19-190(B)		DIGIL

Mail-in Penalty	Max. Penalty	Property Removed
	$250	☐ Yes ☐ No

Details of Charge(s): At TPO A/O was informed by Daniel Mezan that dept did fail to yield to pedestrian on (01/07/24) he was crossing in crosswalk causing MVA. Pedestrian suffered injury to left arm

Factual Allegations

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 am 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 Gomez		C8

Rank/Title	Name	Tax No.
PO	Gomez	968451

0200 071 659