NYCServ Violation Copy

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0200194354

0602000002002021

SUMMONS TO APPEAR

FOR CIVIL PENALTIES ONLY

SUMMONS NUMBER: 0200 194 354

ENFORCEMENT AGENCY: **Police Department**

Respondent Last Name	First	M.I.
Smiley, Richard, E		

Phone No		D.O.B.	Sex
347 666 3283	☑ Cell ☐ Home	08/20/78	☑ Male ☐ Female

Mailing Address: 157 N Elliott Walk Apt 5E

ID Number	ID Type
~~NYS Drivers License~~ 384821006	NYS Drivers License

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

Date of Occurrence	Time of Occurrence	
01/15/25	08:00	☐ AM ☑ PM

Place of Occurrence (☑ At ☐ In Front Of ☐ Opposite)	Precinct
I/T Ocean Ave & Parkside Ave	071

Include the summons number above on all communications

HEARING DATE: 03/06/25 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 / 9 Bond Street (New Location/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)	D 6 L	

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

Details of Charge(s):

Aided was crossing intersection in crosswalk when vehicle did strike her when making left hand turn w/ left hand mirror causing aided to fall to ground

(Actual 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, 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	071

Rank/Title	Name	Tax No.
PO	Donza	974071

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