NYCServ Violation Copy

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0202880893

0497000006006012

SUMMONS TO APPEAR

FOR CIVIL PENALTIES ONLY

SUMMONS NUMBER: **0202 880 893**

ENFORCEMENT AGENCY: **Police Department**

Respondent Last Name	First	MI
Donaldson	Kendall	K

Phone No		D.O.B.	Sex
3473737607	☒ Cell ☐ Home	06/DD/73	☒ Male ☐ Female

Mailing Address: 1558 Unionport Road BX NY 10462

ID Number	ID Type
302 354 225	Drivers License

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

Date of Occurrence	Time of Occurrence	
09/24/24	07:35	☒ AM ☐ PM

Place of Occurrence (☒ At ☐ In Front Of ☐ Opposite): 23 Street + 44 Drive

Precinct: 108

Include the summons number above on all communications

HEARING DATE: MM / 03 / 24 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: 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)	D 6 L

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

Details of Charge(s): At TPO Respondent failed to yield to a Bicyclist in marked bike lane. A collision occured resulting in injury.

Factual Allegation

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
	108

Rank/Title	Name	Tax No.
PO	Ksepka	967949

0202 880 893