NYCServ Violation Copy

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0203006679

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SUMMONS TO APPEAR

FOR CIVIL PENALTIES ONLY

SUMMONS NUMBER: **0203 006 679**

ENFORCEMENT AGENCY: **Police Department**

Respondent Last Name	First	M.I.
Sutherland	Christopher	B

Phone No.		D.O.B.	Sex
9293310317	☑ Cell ☐ Home	08/04/77	☐ Male ☐ Female

Mailing Address: 264 West Tremont Avenue, 4A, Bronx, NY, 10458

ID Number	ID Type
656131501	NYS Driver's License

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

Date of Occurrence	Time of Occurrence	
03/14/25	04:39	☐ AM ☑ PM

Place of Occurrence (☐ At ☑ In Front Of ☐ Opposite): 260 Columbus Avenue — Precinct: 020

Include the summons number above on all communications

HEARING DATE: 05/07/25 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: Manhattan (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 t/p/o, pedestrian was in the crosswalk with the [illegible] when respondent failed to yield and struck her causing physical injury.

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
	020

Rank/Title	Name	Tax No.
PO	Jairam	965757

0203 006 679