

NYCServ Violation Copy

Internet



0204775460



0826000005005006
SUMMONS TO APPEAR
FOR CIVIL PENALTIES ONLY
 SUMMONS NUMBER: **0204 775 460**
 ENFORCEMENT AGENCY: **Police Department**

Respondent Last Name Louis, James		First B	M.I. B
Phone No (347) 883-3349		☒ Cell ☐ Home	D.O.B. 06/24/94
Sex ☒ Male ☐ Female			
Mailing Address 1245 Findlay Ave. Bx, NY 6A			
ID Number 927267977		ID Type NYS DL	
Race ☐ White ☒ Black ☐ Hisp. White ☐ Hisp. Black ☐ Am. Ind./Alaskan Native ☐ Asian/Pacific. Is.			
Date of Occurrence 08/23/25		Time of Occurrence 09:32	
		☒ AM ☐ PM	
Place of Occurrence (☐ At ☐ In Front Of ☐ Opposite) East 100 Street / 2nd Ave.		Precinct 023	

Include the summons number above on all communications

HEARING DATE: **10/14/25** 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 **19-190 (b)** OATH Code **D 16 L**

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

Details of Charge(s): **At 11:10 driver of NY # LTU 5148**
did strike pedestrian/bicyclist resulting
in an injury. Factual Allegations OATH

NYC Charter Section 104b and 104b-a and the Rules of the City of New York authorize the NYC Office of Administrative Trials and Hearings (OATH) to hold hearings. 1) an employee of the agency named above, affirm under penalty of perjury that: 1) 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 **023**
 Rank/Title **PO** Name **E. Spinal** Tax No. **972280**



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