

NYCServ Violation Copy

Internet



0206142137



0619000004004011
SUMMONS TO APPEAR
FOR CIVIL PENALTIES ONLY
SUMMONS NUMBER: **0206 142 137**
ENFORCEMENT AGENCY: **Police Department**

Respondent Last Name		First	M.I.
JIMENEZ-ESTRADA		LORE-PAULETTE	
Phone No	☐ Cell ☐ Home	D.O.B.	Sex ☐ Male ☒ Female
(347) 659 6245		04/15/79	
Mailing Address			
22 CAMMANN RD CORAM, NY 11227			
ID Number	ID Type		
891 501 988	NYS ID (DM)		
Race ☐ White ☒ Black ☐ Hisp. White ☐ Hisp. Black ☐ Am. Ind./Alaskan Native ☐ Asian/Pacific. Is.			
Date of Occurrence		Time of Occurrence	
04/20/2025		00:12 ☒ AM ☐ PM	
Place of Occurrence ☒ At ☐ In Front Of ☐ Opposite		Precinct	
159 STREET & 84 RD		107	

Include the summons number above on all communications

HEARING DATE: **04/21/2025** 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: **QUEENS SOUTH** (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(3) FAILURE TO YIELD	
Mail-in Penalty	Max. Penalty
X	250 \$
OATH Code	
S 16 L	
Property	☐ Yes
Removed	☐ No

Details of Charge(s):

RIGHT OF WAY, FAILURE TO YIELD.
PHYSICAL INJURY

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. 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
[Signature]	107
Rank/Title	Name
PO	CZAVAR
	Tax No.
	969623



0206 142 137