NYCServ Violation Copy

Internet

0207766323

0531000007007050

SUMMONS TO APPEAR

FOR CIVIL PENALTIES ONLY

SUMMONS NUMBER: 0207 766 323

ENFORCEMENT AGENCY: **Police Department**

Respondent Last Name	First	M.I.
Sandy	Kern	B

Phone No		D.O.B.	Sex
(347) 463-3057	☒ Cell ☐ Home	MM/DD/YY	☒ Male ☐ Female

Mailing Address: 874 Troy Ave Apt 3A Brooklyn NY 11203

ID Number	ID Type
114-406-106	Driver License(NY)

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

Date of Occurrence	Time of Occurrence	
MM/DD/24	HH:MM	☒ AM ☐ PM

Place of Occurrence (☒ At ☐ In Front Of ☐ Opposite)	Precinct
Albany Ave & Midwood St	071

Include the summons number above on all communications

HEARING DATE: 12/23/24 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: Brooklyn (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)	Right of way-failure to yield-physical injury	D 6 L

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

Details of Charge(s):

At TPU I10 is informed by Rodriguez Maynard, Roxanne ((646-377-4109) that she was crossing crosswalk when above listed motorist did hit pedestrian while crossing in crosswalk causing ped to sustain physical injury.

Factual 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 evidence 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
	71

Rank/Title	Name	Tax No.
PO	Schimming	977392

0207 766 323