NYCServ Violation Copy

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SUMMONS TO APPEAR

FOR CIVIL PENALTIES ONLY

SUMMONS NUMBER: 0207 766 350

ENFORCEMENT AGENCY: **Police Department**

Respondent Last Name	First	M.I.
Lewis	Jenny	E

Phone No		D.O.B.	Sex
(347) 421-1273	☒ Cell ☐ Home	MM / DD / YY 11/22/60	☐ Male ☒ Female

Mailing Address: 695 Maple street Brooklyn NY 11203

ID Number	ID Type
906-801-335	NY IDL

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

Date of Occurrence	Time of Occurrence	
MM / DD / YY 09/05/25	HH:MM 12:40	☐ AM ☒ PM

Place of Occurrence (☒ At ☐ In Front Of ☐ Opposite): Maple ST(EB)@10 NIB Tray Ave

Precinct: 71

Include the summons number above on all communications

HEARING DATE: MM / DD / YY 10 / 27 / 25 AT: HH:MM 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)	D 1 6 L	
Mail-in Penalty	**Max. Penalty**	**Property Removed**
$250	$250	☐ Yes ☒ No

Details of Charge(s): AT TPO the undersigned was informed by Johnson, Shari cell (917-214-3340 OATH whose address is known to NYPD that while crossing on Maple street crosswalk from NIE corner to SIE corner when motorist did fail to yield to pedestrian, causing injuries to pedestrian.

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 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
C Schimming	71

Rank/Title	Name	Tax No.
PO	Schimming	977392

0207 766 350