

NYCServ Violation Copy

Internet



0211675494



0923000001001022
SUMMONS TO APPEAR
FOR CIVIL PENALTIES ONLY
SUMMONS NUMBER: 0211 675 494
ENFORCEMENT AGENCY: Police Department

Respondent Last Name Ramos	First Joshua	M.I.
Phone No	☐ Cell ☐ Home	D.O.B. 01/25/82 Sex ☒ Male ☐ Female
Mailing Address 123 Marine Ave 3D		
ID Number 268 884 381	ID Type Driver License	
Race ☒ White ☐ Black ☐ Hisp. White ☐ Hisp. Black ☐ Am. Ind./Alaskan Native ☐ Asian/Pacific. Is.		
Date of Occurrence 12/30/25	Time of Occurrence 10:03	☐ AM ☒ PM
Place of Occurrence (☐ At ☐ In Front Of ☐ Opposite) 86th and 5th Ave		Precinct 068

Include the summons number above on all communications

HEARING DATE: **02/10/25** 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: **Kings** (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 **Ac 19-190 (B)** OATH Code **D 6 F**

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

Details of Charge(s):
AT Tpo left (motorist)
failure to yield to Pedestrian OATH
Factual Negations

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 **[Signature]** Command **068**

Rank/Title **PO** Name **Funaro** Tax No. **1/9814**



0211 675 494