NYCServ Violation Copy

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NYC Department of Finance

SUMMONS • FOR CIVIL PENALTIES ONLY

SUMMONS NUMBER: 0215 092 305

ENFORCEMENT AGENCY: Dept. of Finance
AGENCY CONTACT INFORMATION: 311 DIVISION: Sheriff

To the Business operating at 39-06 108 Stret, Queens

CELL PHONE #: DBA: Bu convenience

STREET ADDRESS 39-06 108 stret APT. NO.

CITY Queens STATE NY ZIP 11368

ID NUMBER: N/A

TYPE OF ID/ISSUED BY: N/A

DATE OF OCCURRENCE: 06/10/2025 TIME OF OCCURRENCE: 12:40

PLACE OF OCCURRENCE: 39-06 108 stret

BOROUGH OF OCCURRENCE: Queens CB No. 115

☐ Alternative Service

You must respond to the Summons. You can appear on the hearing date and the location below or choose another option. For other options on how to respond, see the back of this page.

HEARING DATE: 06/17/2025 **AT:** 8:30am

OFFICE OF ADMINISTRATIVE TRIALS AND HEARINGS

N/A See reverse side for address

[borough]

Phone: (844)628-4692

FOR HEARING OPTIONS, SEE THE BACK OF THIS PAGE
REFER TO THE SUMMONS NUMBER ABOVE ON ALL CORRESPONDENCE

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.

Details of Violation(s)

Section/Rule AC 7-551(a) OATH Code A B E1

Mail-In Penalty: $ N/A Maximum Penalty: $25,000

☐ Respondent must appear in person ☐ _____ Offense: Seeking revocation / suspension

At TPO cannabis and cannabis marketed products were observed for sale without the valid cannabis retail license. Sealing order#QN3906108Stret06102025 was issued

☑ Property Removed ☐ 1-2 Family ☐ Multiple Dwelling ☑ Commercial

OATH

NYC Charter Sections 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 enforcement agency named above, affirm under penalty of perjury that I personally observed the commission of the violation(s) charged above and/or verified their existence through a review of departmental records. False statements made herein are punishable as a Class A Misdemeanor pursuant to section 210.45 of the Penal Law.

RANK (TITLE) SIGNATURE OF COMPLAINANT: Det. Rubanovs

REPORT LEVEL (For 4 quotes Comm'd, Sqd, Unit, etc.): 0837

COMPLAINANT'S NAME (Printed): A. RubaNovA

TAX REGISTRY NUMBER: 6081919

AGENCY: NYC Sheriff

NOTICE ALSO SENT TO

FIRST NAME

LAST NAME

STREET ADDRESS

CITY STATE ZIP

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