NYCServ Violation Copy

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SUMMONS • FOR CIVIL PENALTIES ONLY

SUMMONS NUMBER: 0218 036 868

CITIZEN PETITIONER: Dietmar Detering
CITIZEN PETITIONER CONTACT INFORMATION: ddetering@gmail.com

LAST NAME OR COMPANY NAME (Print) | FIRST NAME
~~XXXXXX~~#: Kokomo Caribbean Restaurant
STREET ADDRESS 65 Kent Avenue APT. NO.
CITY Brooklyn STATE NY ZIP 11249
ID NUMBER:
TYPE OF ID/ISSUED BY:

DATE OF OCCURRENCE: 06 / 09 / 2023 TIME OF OCCURRENCE: 6:03 PM
PLACE OF OCCURRENCE: 65 Kent Ave
BOROUGH OF OCCURRENCE: Brooklyn CB No.
☐ 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: 04 / 02 / 2024 **AT:** 9 AM

OFFICE OF ADMINISTRATIVE TRIALS AND HEARINGS
Manhattan 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 NYC Ad. Code 24-244(b) OATH Code AN 96

Mail-In Penalty: $ 880 Maximum Penalty: $ 3,500
☐ Respondent must appear in person

I personally observed this restaurant deploy speakers, outside, in order to attract attention for this business. | *SECOND OFFENSE* of this respondent. Prior's summons#: 000289083M.

☐ 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.

Per Section 1049-a(d)(1)(b) of the New York City Charter, which provides that the form and wording of summonses shall be prescribed by the Board,
THIS SUMMONS CANNOT BE SWORN TO OR AFFIRMED

SIGNATURE OF CITIZEN PETITIONER | REPORT LEVEL (Fill 4 spaces Comm'd, Sqd, Unit, etc.)
CITIZEN PETITIONER'S NAME (Printed) Dietmar Detering | TAX REGISTRY NUMBER | AGENCY 999
NOTICE ALSO SENT TO
LAST NAME Detering FIRST NAME Dietmar
STREET ADDRESS 3961 47th ST
CITY Sunnyside STATE NY ZIP 11104

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