NYCServ Violation Copy

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0218205680

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SUMMONS TO APPEAR

FOR CIVIL PENALTIES ONLY

SUMMONS NUMBER: 0218 205 680

ENFORCEMENT AGENCY: **Police Department**

Respondent Last Name	First	M.I.
Brost	Jeffery	

Phone No		D.O.B.	Sex
2128100305	☑ Cell ☐ Home	12/24/62	☑ Male ☐ Female

Mailing Address: 6619 242 St Apt 2F

ID Number	ID Type
623 576 366	Class D

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

Date of Occurrence	Time of Occurrence	Precinct
12/08/25	05 :55 ☐ AM ☑ PM	111

Place of Occurrence (☑ At ☐ In Front Of ☐ Opposite): 67 Ave and Douglaston Pkwy

Borough: M ☐ BK ☐ SI ☐ Q ☑ BX ☐

Include the summons number above on all communications

HEARING DATE: 01/28/26 AT: 08:00 ☑ AM ☐ PM

You must respond by the above date.
See the BACK OF THIS SUMMONS to learn about your options.

Hearing Location: Office of Administrative Trials and Hearings (OATH)

Borough: _____ (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 6 L	

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

Details of Charge(s): Right of way failure to yield, Physical injury (cross walk)

OATH

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.

☐ Unless otherwise indicated on the back, at the time and place of occurrence, I did personally serve a true copy of the Summons on the Respondent named therein.

I/O Signature	Command
	111

Rank/Title	Name	Tax No.
PO	Grant	976681

0218 205 680