NYCServ Violation Copy

Internet

0218279261

0586000002002072

SUMMONS TO APPEAR

FOR CIVIL PENALTIES ONLY

SUMMONS NUMBER: 0218 279 261

ENFORCEMENT AGENCY: **Police Department**

Respondent Last Name	First	M.I.
KVITSINADZE	GIORGI	

Phone No		D.O.B.	Sex
929 327 3381	☒ Cell ☐ Home	11/05/94	☒ Male ☐ Female

Mailing Address: 1819 Avenue L

ID Number	ID Type
609 773 300	NYSDL

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

Date of Occurrence	Time of Occurrence	Precinct
12/13/2024	21:14 ☐ AM ☒ PM	70

Place of Occurrence (☐ At ☐ In Front Of ☐ Opposite): OCEAN Avenue & Avenue L

Borough: M ☐ BK ☒ SI ☐ Q ☐ BX ☐

Include the summons number above on all communications

HEARING DATE: 02/03/25 AT: 9:30 ☒ 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: 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 16 L

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

Details of Charge(s): AT TPO Respondant states while making a left turn did collide with Pedestrian causing injuries. 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
	70

Rank/Title	Name	Tax No.
PO	PO MOUSA	977292

0218 279 261