

NYCServ Violation Copy

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0219037446



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SUMMONS TO APPEAR FOR CIVIL PENALTIES ONLY

SUMMONS NUMBER: **0219 037 446**
ENFORCEMENT AGENCY: **Police Department**

Respondent Last Name SALIM	First WAEEL	M.I. S
Phone No 347-2033-6406	Cell 321-02105	Sex ☒ Male ☐ Female
Mailing Address 20 E 132ND ST, NEW YORK, NY 10032		
ID Number 538 528 083	ID Type NYS LEARNER PERMIT	
Race ☒ White ☐ Black ☐ Hisp. White ☐ Hisp. Black ☐ Am. Ind./Alaskan Native ☐ Asian/Pacific. is.		
Date of Occurrence 12/15/2024	Time of Occurrence ☐ AM ☒ PM 10:00	Precinct 081
Place of Occurrence (☐ At ☐ In Front Of ☐ Opposite) BAINBRIDGE ST & PATCHEN AVE		Borough ☒ M ☐ BK ☐ SI ☐ Q ☐ BX

Include the summons number above on all communications

HEARING DATE: **02/03/25** AT: **09:00** ☒ 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: **BROOKLYN** (See back for address) (844) 628-4692
www.nyc.gov/oath

☒ Admin. Code	☐ Parks Rules: 56 RCNY	☐ Other
☐ Rules of City of NY	☐ Traffic Rules: 34 RCNY	
Section/Rule 19-140.13	OATH Code D 16 1C	
Mail-in Penalty	Max. Penalty 200	Property Removed ☐ Yes ☒ No

Details of Charge(s):
At GPO the undersigned observed the defendant operate a vehicle that had made contact with a pedestrian causing physical injury

NYC Charter Section 104b and 104b-e 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 Thamara T. Finn	Command 081
Rank/Title PO	Tax No. 976498



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