

NYCServ Violation Copy

Internet



44804494R

ENVIRONMENTAL CONTROL BOARD - NOTICE OF VIOLATION AND HEARING FOR CIVIL PENALTIES ONLY

City of New York, Petitioner vs Respondent:

Mailing Date: 7/8/2018 12:00:00 AM

LAST NAME	FIRST NAME	INITIAL	SEX
BELOT FRANCOIS			
STREET ADDRESS			
80 WARREN STREET			
CITY	STATE	ZIP	
STATEN Island	NY	10304	
TYPE OF LICENSE / PERMIT OR IDENTIFICATION			ISSUED BY
NUMBER:			

The Respondent is charged with violation of Law / Rule

DATE OF OFFENSE	TIME	BOROUGH	CB NO	VIOLATION CODE
7/3/2018	10:03 AM	SI	01	SS7-13th+

NYC Adm. Code - Sanitation Provisions - Title 16

SECTION / RULE
16- 118(2)(a)

GENERAL DESCRIPTION OF SECTION / RULE

Sidewalk Obstruction

PLACE OF OCCURRENCE

Side of 80 WARREN STREET

DETAILS OF VIOLATION

At T/P/O I did observe High grass, weeds Extending onto sidewalk obstructing the pedestrian pathway.

BASELINE PENALTY	PROPERTY TYPE	MAXIMUM PENALTY FOR VIOLATION
\$250.00	1-2 Family	\$250.00

DATE AND TIME OF HEARING	LOCATION
6th day of August 2018 08:30 AM at any ECB Location	
Proceedings will be held under the authority of Section 1049-a of the NYC Charter and the rules promulgated thereunder	

WARNING: If you do not appear (or pay by mail if permitted) you will be held in default and subject to the maximum penalties permitted by law. Failure to appear or pay a penalty imposed may lead to suspension of your license or other action affecting licenses you now have or may apply for as well as the possibility of a judgment entered against you in Civil Court. FURTHER INSTRUCTIONS ON THE REVERSE SIDE.

I, an employee of the below agency personally observed the commission of the civil violation charged above. False statements made herein are punishable as a class A Misdemeanor pursuant to section 210.45 of the Penal Law. Affirmed under penalty of perjury.

SIGNATURE OF COMPLAINANT - N.Y.C. DEPARTMENT OF SANITATION

E. Maguire

NAME (TITLE) NAME OF COMPLAINANT	TAX REG NO	AGENCY	REPORT LEVEL
SEA E. Maguire	693689	827	SIRU

E44804494R



Copy of Notice of Violation provided above

NOTICE ALSO SENT TO DOF ADDRESS

LAST NAME	FIRST NAME	INITIAL	SEX
WELLS FARGO BANK, N.A.			
STREET ADDRESS			
1 HOME CAMPUS			
CITY	STATE	ZIP	
DES MOINES	IA	50328	
NOTICE ALSO SENT TO DOF ADDRESS			
LAST NAME	FIRST NAME	INITIAL	SEX
STREET ADDRESS			
CITY	STATE	ZIP	

Affirmation of Service

The Undersigned under the penalties of section 210.45 of the Penal Law, hereby affirms that he or she is not a party to the action, is over 18 years of age, and;

Alternative Service per NYC Charter §1049-a(d)(2)

☒ At the time indicated on the front of the Notice of Violation with the below referenced number,

☐ At ____ on ____ at T/P/O I attempted to personally serve the Notice of Violation with the below referenced number on the respondent named therein but was unable to do so because:

☒ having attempted entry into the premises, I found the premises locked and no one responded to any bells, knocks or calls.

☐ having entered the premises and having identified myself, I was:

☐ advised by that respondent was not then present.

☐ advised by that no officer, director, managing agent or general agent of the respondent was present.

☐ unable to secure identification of the person(s) present.

☒ Therefore, I affixed a copy of the Notice of Violation with the below referenced number to the door of the premises at the time indicated above.

I, an employee of the below agency, served this notice of violation in the manner described above. False statements made herein are punishable as a class A Misdemeanor pursuant to section 210.45 of the Penal Law. Affirmed under penalty of perjury.

Date 07/03/2018

Signature

E. Maguire

E. Maguire

Agency: 827

Notice of Violation Number

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NOTICE ALSO SENT TO HPD ADDRESS

LAST NAME	FIRST NAME	INITIAL	SEX
STREET ADDRESS			
CITY	STATE	ZIP	