NYCServ Violation Copy

Internet

48713697Z

048713697Z

SUMMONS * FOR CIVIL PENALTIES ONLY

ENFORCEMENT AGENCY NAME: Department of Sanitation

DIVISION: 829 KSBO

AGENCY ADDRESS AND PHONE NUMBER: 125 Worth Street, NY 311

RESPONDENT:
PARIS BAGUETTE

GENDER:

RESPONDENT MAILING ADDRESS:
5810 8 AVENUE, Brooklyn, NY 11220

CELL PHONE:

RESPONDENT ID NUMBER:
88-1302487

TYPE OF ID AND ISSUED BY:
Certificate of Authority NYS

DATE AND TIME OF OCCURRENCE: 10/18/2024 09:30 PM

PLACE OF OCCURRENCE:
Front Of 5810 8 AVENUE

BOROUGH: BK **CB NO:** 07

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, read further on this Summons.

HEARING DATE: January 16, 2025 **AT:** 08:30 AM

OFFICE OF ADMINISTRATIVE TRIALS AND HEARINGS:

at any OATH location

Read further on this Summons for address. Phone: (844)628-4692

FOR HEARING OPTIONS, READ FURTHER ON THIS SUMMONS 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.

DETAILS OF VIOLATION

Law Description: Rules of the City of New York--Sanitation Provisions--Title 16

Section or Rule: 16-120(a)

OATH Code: Improper Receptacle Non-Residen. All Businesses {SPS-5th}

Mail-In Penalty: $200.00 **Maximum Penalty:** $300.00

At T/P/O I did observe refuse and/or organic waste placed out for collection in bags, uncovered receptacles and not in rigid receptacles with tight fitting lids as required, or other means as authorized by DSNY.

Property Commercial

NYC Charter Sections 1048, 1049, and 1049-a and the Rules of the City of New York authorizes the NYC Office of Administrative Trials and Hearings (OATH) to hold hearings.

I, an employee of the enforcement agency named above, affirm under penalty of perjury that I personally observed the commission of the violation(s) charged above and/or verified their existence through a review of departmental records. False statements made herein are punishable as a Class A Misdemeanor pursuant to section 210.45 of the Penal Law.

Rank/Title: SUP **Report Level:** KSBO

Name/ID: S. Dimartino , 627390 **Agency:** 829

048713697Z

Mailing Date: 10/21/2024

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 **12:07 PM** on **10/19/2024** at **PO**
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 10/19/2024

Signature

S. Lee **Agency:** 829

Summons Number
048713697Z

DOF Address	
DSNY Address	
HPD Address	