

NYCServ Violation Copy

Internet



0803446692



SUMMONS • FOR CIVIL PENALTIES ONLY

SUMMONS NUMBER: 0803446692

ENFORCEMENT AGENCY NAME: DEPT. OF HEALTH AND MENTAL HYGIENE

DIVISION: Environmental Health

BUREAU: Veterinary and Pest Control Services

AGENCY ADDRESS AND PHONE NUMBER: 42-09 28th St, Long Island City, NY 11101 Phone: 718 289-1791

RESPONDENT: FROM , AARON

Case ID: PC8503908

MAILING ADDRESS: P.O. BOX 654 KNICKBOCKER STATION
NEW YORK, New York 10002-0654

DATE OF OCCURRENCE: 04/09/2025 TIME OF OCCURRENCE: 11:49 AM BOROUGH: Manhattan
PLACE OF OCCURRENCE: 2306 2 AVENUE, Manhattan, New York 10035 Block: 1795 Lot: 3

You must respond to the Summons. See the reverse side for how to respond.

HEARING DATE: 5/13/2025

AT: 08:30 AM

OFFICE OF ADMINISTRATIVE TRIALS AND HEARINGS:

☒ Manhattan	☐ Staten Island	☐ Bronx	☐ Queens	☐ Brooklyn
66 John St, 10th Fl New York, NY 10038	350 St.Mark's Pl, Main Fl, Staten Island, NY 10301	260 E.161st St, 6th Fl Bronx, NY 10451	31-00 47th Ave, 4th Fl Long Island City, NY 11101	9 Bond St, 7th Fl Brooklyn, NY 11201

INSTRUCTIONS FOR RESPONDING TO THIS SUMMONS ARE ON THE BACK OF THIS PAGE.

REFER TO THE SUMMONS NUMBER ABOVE ON ALL CORRESPONDENCE.

WARNING: If you do not attend your hearing (or pay the penalty by mail if permitted) the Summons will be decided against you and penalties will be imposed. Your license may also be suspended or revoked. In addition, the City may enter a judgment against you in court.

Details of Violation(s)

Violation Code	NYC Health Code	Violation Description	Minimum Penalty	Maximum Penalty
AH3N	NYC HC 151.02(a)	Active rat signs exist in that two rat active structural burrows were observed in the following areas; one at the base of the metal gate post at front left and one next to gate at front right.	300.00	600.00

NYC Charter Sections 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.
For hearing options, see other side of this notice.

I, an employee of the 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.

Rashmi Pandey/3288

PHS

815

Name/ID:

Signature:

Rank/Title:

Agency Code:

I acknowledge that I have received a copy of this Summons, a copy of the inspection report, instructions for responding and that I am authorized to accept service of this Summons.

Received by: _____

Title: _____

Date: _____



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