

SCRN: CVPSSQV3 DEPT OF ENVIRONMENTAL PROTECTION DATE: 6/22/17
TERM: 2170 VIOLATION INQUIRY (HISTORY) TIME: 12:49:38
STATUS: HEARING COMPLETED
VIOLATION: 0191079231 ROLL: 08895 IMAGE: 06020 DISP: DISMISSED
DUE: NOTHING DUE
RESP LAST NAM: AITOMAR FIRST NAM: MOHAMED
HOUSE: 1150 BORO: 3 BROOKLYN
STREET: 71 STREET APT. NO:
CITY: BROOKLYN STATE: NY ZIP: 11228
VIOLATION ADDR: HOUSE: BORO: 1 MANHATTAN
STREET: C/O W 47 AND BROADWAY RTC:
VIO CODE: F18 SECTION: AC 17-315(E) ALJ ID: 9999
INF DESC: VEND IN BUS STOP, NEXT TO HOSPITAL/10 FT OF DRIVE, SUBWAY, CROSSWALK
ISSUE AGENCY: 056 POLICE DEPARTMENT RPT LVL: 0161
SERVICE: P PROPERTY REMOVED:
ISSUING OFFICER: FERRAZZO OFFICER ID: 955913
VIOLATION INPUT DATE: 05/12/17 MULTI OFFENSE: 000
VIOLATION DATE/TIME : 04/23/17 1055 TAX LIEN:
HEARING DATE/TIME: 06/01/17 1000 INT: 0.00+ DOCKET:
SCHEDULED LOCATION: H SAU: MANH IMPOSED AMOUNT : 0.00+
FACE AMOUNT: 50.00+ NET ALL ADJUSTS: 0.00+
LATE ADMIT : 50.00+ PAID TO DATE : 0.00+
MAX AMOUNT : 50.00+ BALANCE DUE : 0.00+
CMD: . _____ MSG: *PRESS PF6 FOR DATE OF PRIOR HEARING V

SCRN: CVPSSQV2 DEPT OF ENVIRONMENTAL PROTECTION DATE: 6/22/17
TERM: 2170 VIOLATION INQUIRY (HISTORY) - PAGE 01 OF 01 TIME: 12:49:45

VIOLATION NO.: 0191079231 ROLL: 08895 IMAGE: 06020

SEQ	REC	DATE	EVENT	AMOUNT	CHANGE	NEW BAL
001		04/23/17	ISS - NEW VIOL ISSUANCE	+50.00	+50.00	+50.00
RMK: , 1, 20170524, 1000, 9, R=08895, I=06020						
002		05/31/17	DEF - DEFAULT PROC - BATCH	+50.00	+0.00	+50.00
RMK: ,						
003		06/01/17	SAU - ASSIGNED TO SAU	+0.00	+0.00	+50.00
RMK: 20170601, H,						
004		05/24/17	HRG - HEARING RESULTS	+0.00	-50.00	+0.00
RMK: 9999, H, D, , S, N, , R= , I=						

RMK:

RMK:

RMK:

RMK:

CMD: _____ MSG: REMARKS ARE SUPPRESSED - PRESS PF6 TO DISPLAY V

NOTICE OF VIOLATION AND HEARING - FOR CIVIL PENALTIES ONLY

City of New York, Petitioner vs. Respondent

MOHAMED AITOMAR 1150 71ST ST BROOKLYN, NY 11228 1304				
RECORD ID 50055566		DECAL # AA05289		
TYPE OF LICENSE / PERMIT OR IDENTIFICATION NUMBER Health Department Permit/Decal AA05289				ISSUED BY DoHMH
NOTICE ALSO SENT TO:				MAIL DATE 5/12/2017
Date Of Offense 4/23/2017	Time 10:55 PM	Borough Manhattan	CB NO.	Violation Codes F18
The Respondent is charged with violating the following Law or Rule:				
NYC ADMINISTRATIVE CODE/RULES OF THE CITY OF NEW YORK Food Vendor Provisions				OTHER CODES
SECTION/RULE ADMIN CODE 17:315 (E)				
At X	Front Of	Opposite	Place of Occurrence C/O W 47 AND BROADWAY, ,	
DETAILS OF VIOLATION AT TPO A/O OBS RESPONDENT OFFER AND SELLING FOOD FROM HIS MOBILE FOOD CART 8 FEET FROM CROSSWALK. MEASURE BY TAPE MEASURE				
PROPERTY REMOVED Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> <input type="checkbox"/> ALTERNATIVE SERVICE				
Mail-In Penalty Schedule \$25 \$50 \$100 \$250 \$ _____ <input type="checkbox"/> NO MAIL-IN PENALTY Maximum Penalty For Violation 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> Other YOU MUST APPEAR \$ _____ Vendor Multiple Offense Schedule (See Reverse Side) <input type="checkbox"/> See Date and Time Below or see reverse side				
Date of Hearing 24		Day of May 2017		8:30 AM 1 <input type="checkbox"/>
				10:30 AM 2 <input type="checkbox"/>
				1:00 PM 3 <input type="checkbox"/>
				2:30 PM 4 <input type="checkbox"/>
Section 1049 a of the NYC Charter and the Rules of the City of New York allow the Environmental Control Board to hold hearings. For hearing options, see other side.				
WARNING: If you do not have a hearing (or pay by mail if permitted), the ticket will be decided against you and you will have to pay a fine. You may also have a license taken away or a new license request denied. The City may also go to Court and enter a judgment against you. See other side or www.nyc.gov/oath for more instructions.				
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.				
RANK (TITLE) OF COMPLAINANT PO				REPORT LEVEL 0161
COMPLAINANT'S NAME FERRAZZO		TAX REGISTRY NUMBER 955913		AGENCY 056

No. 0191079231



0191079231

The agency named on the front of this summons has alleged that you committed the described violation or violations. If the Summons contains a "Mail-in Penalty," you may admit the charge and pay the penalty. **Note:** If the charge on the front of the summons states you **DO NOT APPEAR IN PERSON**, you or an authorized representative must attend the hearing in person. See the front of this summons for the date, time and location of your hearing. In some cases, the agency that issued the Summons may offer you the chance to enter into a stipulation or settlement agreement. If you are eligible, the agency will send you a letter in the mail. To accept the stipulation or settlement, follow the instructions in the letter.

To admit the charge and pay the penalty by mail:

- Make the check or money order payable to "Finance Commissioner" in the amount shown in the Mail-In Penalty box and write the Summons Number on the check or money order.
- Within ten (10) days of the date on this Summons, mail a copy of this Summons and the check or money order to:
OATH Environmental Control Board, PO Box 2307, Peck Slip Station, New York NY 10272

To admit the charge and pay the penalty in person:

- On any business day before the Hearing Date listed on the front of this Summons, bring this Summons and your payment to an OATH Hearings Center where payment can be made between 8:00 AM and 3:30 PM. Checks, money orders and credit cards are accepted.

To admit the charge and pay the penalty online:

Go to <http://nyc.gov/citypay/nyc.gov/citypay/esh>

If you do not admit the charge, the Independent NYC Office of Administrative Trials and Hearings will hear and decide your case. If you do not pay the penalty or appear for your hearing using one of the methods stated below, a default judgment may be entered against you and additional penalties may be imposed. If your case is NOT marked "MUST APPEAR IN PERSON" you may deny the charge and present a defense online, by phone or by mail. To see if you are eligible, go to nyc.gov/oath.

- **Online:** To submit a defense online, visit www.nyc.gov/oath.
- **Phone:** To schedule a hearing by phone, call (212) 436-0817.
- **Mail:** To submit a defense by mail, send a signed statement of facts that must say "My signature in this statement certifies that all facts in it are true", with all documents you wish to have considered to: OATH Mail Unit, 66 John Street, 10th Floor, New York, NY 10038

To deny the charge and present a defense in person:

- You or an authorized representative may appear in person on the hearing date at the time and location shown on this Summons.
- If no location is listed or checked off, you may appear at any OATH Hearings Center (see locations below).
- Please be fully prepared for a hearing at that time by bringing this Summons and all of your evidence with you.
- If you require assistance with English, free language assistance will be provided.
- **Reasonable Accommodation:** If you have a disability and require a reasonable accommodation on the day of your hearing, call the phone number listed below.

Note: YOU HAVE THE RIGHT TO BE INFORMED OF THE MAXIMUM PENALTY. If no maximum penalty is shown on the front of this Summons, inquire in person at any location below or call 1-844-628-4692 for more information. Higher penalties may be imposed for each repeated violation up to the maximum penalty allowed by law or regulation.

To view the law or rule you were charged with, go to: <http://72.45.120.254/nycnew/index.html>

VENDOR MULTIPLE OFFENSE SCHEDULE (\$MIN/MAX)

1 st Offense:	\$50/50	3 rd Offense:	\$250/250
2 nd Offense:	\$100/100	4 th Offense:	\$500/500

OATH HEARINGS CENTERS

Tel: 1-844-OATH-NYC (1-844-628-4692)

www.nyc.gov/oath

- **Manhattan:** 66 John Street, 10th Floor, New York, NY 10038
- **Brooklyn:** 9 Bond Street, 7th Floor, Brooklyn, NY 11201
- **Queens:** 144-06 94th Avenue, Main Floor, Jamaica, NY 11435
- **Bronx:** 3030 Third Avenue, Room 250, Bronx, NY 10455
- **Staten Island:** 350 St. Mark's Place, Main Floor, Staten Island, NY 10301



SUMMONS • FOR CIVIL PENALTIES ONLY
NYC Police Department, Petitioner vs Respondent:

LAST NAME (Print) <i>MUSIC Food Vendor</i>		FIRST NAME	INITIAL	Sex
STREET ADDRESS				
CITY <i>Union St Bldg</i>		STATE	ZIP	
A1A05289				
TYPE OF LICENSE / PERMIT OR IDENTIFICATION NUMBER		7 <input type="checkbox"/> Cert. of Auth.		ISSUED BY
1 <input checked="" type="checkbox"/> Consumer Affairs License		8 <input type="checkbox"/> Build Reg. No.		<i>NYPH</i>
2 <input checked="" type="checkbox"/> Health Dept. License		9 <input type="checkbox"/> Telephone No.		
3 <input type="checkbox"/> Motorist Identification		10 <input type="checkbox"/> Other		
4 <input type="checkbox"/> Vehicle Plate				
5 <input type="checkbox"/> Meter Number				
6 <input type="checkbox"/> Soc. Sec. No.				
NOTICE ALSO SENT TO				
LAST NAME		FIRST NAME		INITIAL
STREET ADDRESS				
CITY		STATE	ZIP	

Date of Offense <i>04/03/17</i>	AM <input type="checkbox"/> PM <input checked="" type="checkbox"/>	Time <i>10:57 AM</i>	Borough <i>Manhattan</i>	CB NO.	Violation Code <i>F 1118</i>
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The Respondent is charged with violation of the following Law or Rule:
NYC ADMINISTRATIVE CODE/RULES OF THE CITY OF NEW YORK

- | | | | |
|---|---|--|---|
| 1. <input type="checkbox"/> "Air Code" Provisions | 5. <input type="checkbox"/> Sanitation Provisions | 9. <input type="checkbox"/> Park Rules | 11. <input type="checkbox"/> NYS Public Health Law |
| 2. <input type="checkbox"/> "Noise Code" Provisions | 6. <input type="checkbox"/> General Vendor Provisions | 10. <input type="checkbox"/> Other | 12. <input type="checkbox"/> NYC Health Code Provisions |
| 3. <input type="checkbox"/> "Water Code" Provisions | 7. <input checked="" type="checkbox"/> Food Vendor Provisions | | 13. <input type="checkbox"/> NYS VTL |
| 4. <input type="checkbox"/> "Sewer Code" Provisions | 8. <input type="checkbox"/> Transportation Provisions | | 14. <input checked="" type="checkbox"/> Other <i>AC</i> |

SECTION/RULE

Admin Code 17:31.5 (E)

At	Front of	Opposite	Place of Occurrence
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<i>CV W 47 and Broadway</i>

DETAILS OF VIOLATION
*At TPO A/B ORF Respondent area
am selling Food from his mobile food
cart which is 8 feet from curb, within 10 feet
by two cashiers*

Property Removed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> ALTERNATIVE SERVICE
1 <input type="checkbox"/> 1-2 Family	2 <input type="checkbox"/> Multiple Dwelling
3 <input type="checkbox"/> Commercial	
Mail-in Penalty Schedule \$25 <input type="checkbox"/> \$50 <input type="checkbox"/> \$100 <input checked="" type="checkbox"/> \$250 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input checked="" type="checkbox"/> 4 <input type="checkbox"/> Other <input type="checkbox"/> Vendor Multiple Offense Schedule (See Reverse Side) <input type="checkbox"/> 9	<input type="checkbox"/> NO MAIL-IN PENALTY. YOU MUST APPEAR See Date and Time Below:
Maximum Penalty For Violation \$ _____ or see reverse side	
Date of Hearing <i>24th</i> Day of <i>May</i> 2017	
8:30 AM 10:30 AM 1:00 PM 2:30 PM 1 2 3 4	

Section 1049-a of the NYC Charter and the Rules of the City of New York allow the OATH Environmental Control Board Tribunal to hold hearings. For Hearing options see other side.

WARNING: If you do not have a hearing (or pay by mail if permitted), the ticket will be decided against you and you will have to pay a fine. You may also have a license taken away or a new license request denied. The City may also go to Court and enter a judgment against you. See other side for more instructions.

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.

RANK (TITLE) SIGNATURE OF COMPLAINANT <i>PO [Signature]</i>		REPORT LEVEL (Fill 4 spaces Comm'd, Sqd, Unit, etc.) <i>0161</i>
COMPLAINANT'S NAME (Printed) <i>PO Ferrara</i>	TAX REGISTRY NUMBER <i>91559110</i>	AGENCY <i>NYPH</i>

No. E 191 079 231



191 079 231

OATH ECB

AFFIDAVIT (CERTIFICATE*) OF SERVICE

State of New York, County of New York SS: The undersigned being duly sworn deposes and says: That deponent is not a party to the action, is over 18 years of age, and;

☐ At the time and place of occurrence did personally serve a true copy of this Summons on the respondent named therein.

☒ On 4/23, 2017 at 10:15 AM/PM at LA did personally serve a true copy of this Summons on the respondent named therein by delivering said copy (two copies) to: Milana Lujan

- ☐ the respondent.
☐ a person of suitable age and discretion at respondent's place of business/abode.
☐ an officer/director/managing agent/(other): _____ of respondent corporation.
☐ designated agent in the Office of the Secretary of State, Albany, New York, as per Business Corporation Law §306(b).

Deponent herein describes the person served as follows:

- | | | | | |
|--|--|---|---|--|
| <input checked="" type="checkbox"/> Male | <input checked="" type="checkbox"/> Black Hair | <input type="checkbox"/> Fair Complexion | <input type="checkbox"/> Under 5' | <input type="checkbox"/> Under 100 Lbs. |
| <input type="checkbox"/> Female | <input type="checkbox"/> Brown Hair | <input checked="" type="checkbox"/> Medium Complexion | <input type="checkbox"/> 5'0" - 5'3" | <input type="checkbox"/> 100 - 150 Lbs. |
| <input type="checkbox"/> 14-20 Yrs. | <input type="checkbox"/> Blond Hair | <input type="checkbox"/> Dark Complexion | <input checked="" type="checkbox"/> 5'4" - 5'8" | <input checked="" type="checkbox"/> 150 - 200 Lbs. |
| <input type="checkbox"/> 21-35 Yrs. | <input type="checkbox"/> Gray Hair | | <input type="checkbox"/> 5'9" - 6'0" | <input type="checkbox"/> 200 - 250 Lbs. |
| <input type="checkbox"/> 36-50 Yrs. | <input type="checkbox"/> Red Hair | | <input type="checkbox"/> Over 6' | <input type="checkbox"/> 250 Lbs + |
| <input type="checkbox"/> 51-65 Yrs. | <input type="checkbox"/> White Hair | | | |
| <input type="checkbox"/> Over 65 Yrs. | <input type="checkbox"/> Balding | Other Identifying Features _____ | | |

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

- ☐ At the time indicated on the front of this Summons.
☐ At _____ AM/PM on _____ 20 ____ at _____
I attempted to personally serve this Summons on the respondent named herein but was unable to do so because;
☐ having attempted entry to 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 the respondent was not then present.
☐ advised by _____ that no officer, director, managing agent or general agent of respondent was present.
☐ unable to secure identification of the person(s) present.
☐ Service could not be made because _____

☐ Therefore, I affixed a copy of this Summons to the door of the premises at the time indicated above.

☐ Therefore, I delivered a copy of this Summons to _____, described above, whom I believe to be an employee of respondent at the premises, because employee:

- ☐ So identified him/herself.
☐ Was performing work consistent with such employment.
☐ Other _____

Date 4/23/17 Signature [Signature]
Print Name PR FELIX 220

Sworn to before me on _____

Signature of Certifying Officer Administering Oath _____

*If not sworn, this statement shall constitute a certificate of service.

Alternative Service Mailing Dates: _____



OFFICE OF ADMINISTRATIVE TRIALS AND HEARINGS
Hearings Division

66 John Street
10th Floor
New York, NY 10038
1-844-OATH-NYC

June 13, 2017

MOHAMED AITOMAR
1150 71 STREET
BROOKLYN, NY 11228

RE: Summons Number(s): 0191079231
Respondent Name: MOHAMED AITOMAR

Dear Respondent:

Upon review of the above referenced summons(es), OATH has found service of the summons(es) was defective.

Therefore, OATH is administratively dismissing the above-referenced summons(es).

Thank you.

OATH Hearings Division

c.c. File

New York City Police Department

RHU_ Admin Dism Letter 5_1_2017