



SUMMONS • FOR CIVIL PENALTIES ONLY

SUMMONS NUMBER: 05448699

ENFORCEMENT AGENCY: Department of Consumer Affairs  
AGENCY ADDRESS AND WEBSITE: 42 Broadway, New York, NY 10004 • nyc.gov/dca

RESPONDENT: The King Medical Equipment Co, INC DBA:  
MAILING ADDRESS: 1969 Westchester AVE  
Address Line 1  
Address Line 2 (if necessary): Bronx NY 10462  
City / State / ZIP Code  
LICENSE NO.:  
EXPIRATION DATE: MM / DD / YYYY  
PHONE: 718-828-1511 Cell

PLACE OF OCCURRENCE:  
☒ Same as Mailing Address  
☐ Intersection  
☐ Landmark  
No. / Direction (NE, SW, etc.) and Street  
Street 2 (Intersection only)  
City / State / ZIP Code  
Borough  
DATE OF OCCURRENCE: 03 / 25 / 2020  
TIME OF INSPECTION: 1255 AM to 125 PM

You must respond to this summons. You can appear at the hearing (date and location below) or choose another option. For other options on how to respond, see the back of this summons.

HEARING DATE: 05 / 06 / 2020 AT: 830 AM PM  
HEARING LOCATION: Office of Administrative Trials and Hearings (OATH)  
BOROUGH: ☒ Bronx ☐ Brooklyn ☐ Manhattan ☐ Queens ☐ Staten Island (See reverse side for address.)  
PHONE: (844) 628-4692

Refer to the Summons Number above on all communications.

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. See the back for more information.

Record ID No. 7143-2020-CMPL	<input type="checkbox"/> Cross Reference No.	Business Category 817
Type: <input type="checkbox"/> PTL (Patrol) <input type="checkbox"/> PRQ (Mediation) <input type="checkbox"/> RCS (Consumer Services Request) <input type="checkbox"/> REV (License Revoked) <input type="checkbox"/> SUS (License Suspended)	<input checked="" type="checkbox"/> Other PG	
<input type="checkbox"/> Vehicle Seizure Form	No. pages: 2	No. vehicles seized:

Respondent is charged with violating:

Key to Violations  
A. TITLE 20 of the NYC ADMINISTRATIVE CODE (see columns 1, 2, and 3)  
B. TITLE 6 of the RULES OF THE CITY OF NEW YORK (see column 3)  
C. NY AGRICULTURE & MARKETS LAW (see column 3)  
D. TITLE 1 of the NY CODES, RULES, and REGULATIONS (see column 3)  
E. NY GENERAL BUSINESS LAW (see column 3)  
F. TITLE 10 of the NYC ADMINISTRATIVE CODE, CHAPTER 1 (see column 3)  
G. NYC Health Code (see column 3)  
H. Other  
Start Date of Unlicensed Activity: (if applicable) MM / DD / YYYY  
☐ Date of inspection ☐ Date of license expiration  
☐ Date of prior decision ☐ Date of license suspension or revocation  
☐ Date of prior settlement ☐ Other:  
☐ Date of contract  
RECIDIVISM: See all Pages for any recidivist charge(s). A "2nd," "3rd," or "4th" recidivist charge means a second, third, or fourth occurrence of the same or a related violation at the business location. Recidivists are subject to higher penalties, up to and including the maximum penalty. In addition, you may be subject to license suspension or revocation and/or sealing of your business. See Penalties section on back. Also see Title 6 of the Rules of the City of New York, beginning at Section 6-10, for a full schedule of potential penalties, which are available at: nyc.gov/dca.  
A-H 1 2 3 OATH Recidivist Nature/Description of Violation Counts  
CH. SUB CH. SEC. Code Charge  
The number under "Counts" represents the number of individual violations of the Code, Rule, or other law with which you are being charged.  
B 5-42(b)(1) Merchant Sells or offers for Sale 6  
goods or services with an

continued on Page 2

See additional violation pages, if applicable. If not admitting the charge(s), you MUST APPEAR IN PERSON.

NYC Charter Sections 1048 and 1049-a and the Rules of the City of New York authorize the NYC OATH to hold hearings. For hearing options, see other side of this summons.

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.  
Method of Service: ☒ I/we affirm under penalty of perjury that on the Date of Occurrence, I/we served a copy of this summons in person on the Respondent by leaving a copy with:  
☐ Respondent or Owner ☐ Manager ☒ Person/employee of suitable age/discretion ☐ Owner/Operator of seized vehicle  
☐ To be served via United States Postal Service (See Affidavit/Affirmation of Service By Mail.)  
Inspector Name (Print): R Saizars Inspector Signature: [Signature] Badge: 735  
I received a copy of this summons on behalf of the Respondent.  
Name (Print): Refuse to Sign Position/Relationship to Respondent: Date: MM / DD / YYYY

HOW TO RESPOND TO THIS CIVIL SUMMONS

The Department of Consumer Affairs (DCA) has charged you with the violation(s) listed on this summons. You must respond to this summons. You may send an authorized representative to respond for you. Free language help will be provided, if needed. **If you do not respond, you may automatically be found responsible, and you may owe larger penalties.** If the Environmental Control Board or the Office of Administrative Trials and Hearings orders you to pay a civil penalty, failure to pay that penalty in a timely manner could lead to the denial of an application for a license, permit, or registration, or to the suspension, termination, or revocation of a license, permit, or registration issued to you by a City agency. See the bottom of this page to learn more about penalties.

Option 1: DENY the charge(s)

If you deny the charge(s), you can give an explanation for why you think you are not responsible to a hearing officer, who will make a decision. If you are found responsible, you will still need to pay the penalty and may face higher penalties for future charges. To deny:

- Go to the Hearing Center in the borough checked on the first page of this summons at the date and time listed.
- Bring this summons and any evidence you may have that shows you are not responsible for the charge(s).
- Call 1-844-628-4692 if you have a disability and require a reasonable accommodation for the hearing.

Option 2: ADMIT to the charge(s)

You may get an Offer of Settlement in the mail with information on how to settle and/or cure the charge(s). If you settle or cure by mail, online, or in person, you may no longer need to attend your hearing. If you settle or cure, you are admitting to the charge(s) and may face higher penalties for future charges. See the first page of this summons for your Hearing Date.

Settle: Admit to the charge(s) and pay a penalty

- Your Offer of Settlement will tell you how much you need to pay. If you would like to settle, follow the instructions in the letter. *You must settle before your hearing.*
- If you do not receive an Offer of Settlement in the mail, you may still be able to settle. Visit DCA’s Settlement Unit at 42 Broadway, 5th Floor, New York, NY 10004 or send an email or a text to **LegalSettlements@dca.nyc.gov** before your hearing to see if settlement is an option.

Cure: Admit to the charge(s) without paying a penalty (only for certain first-time charges)

Not all charges are curable. If you received a charge that is curable, you may be able to correct it without paying a penalty. Follow the steps below.

- Your Offer of Settlement will include information about which charge(s) you can cure and how to admit the charge(s) and submit a certification that you cured the charge(s) by mail, online, or in person. *You must submit the Cure Certification within 30 days from the date the summons is issued and before your hearing.*
- If you do not receive an Offer of Settlement in the mail, you may still be able to cure. Visit DCA’s Settlement Unit at 42 Broadway, 5th Floor, New York, NY 10004 or send an email or a text to **LegalSettlements@dca.nyc.gov** before your hearing to see if curing is an option.
- Go to **nyc.gov/dca** for more information about curing a DCA charge.

Unlicensed Activity Charges

If you are charged with unlicensed activity, you must deny the charge(s) or admit the charge(s) as described above. You should also:

- Stop the unlicensed activity.**
- Go to 42 Broadway, 5th Floor, New York, NY 10004 and meet with a DCA Settlement Officer or send an email or a text to **LegalSettlements@dca.nyc.gov**.
- Apply for a license online at **nyc.gov/BusinessToolbox** or in person at the DCA Licensing Center (42 Broadway, Lobby, New York, NY 10004) or the NYC Small Business Support Center (90-27 Sutphin Blvd., 4th Floor, Jamaica, NY 11435).
- If your vehicle was seized, be sure to read the back of the Vehicle Seizure Form.**

Penalties

**You have the right to be informed of the maximum penalty.** If no maximum penalty is shown on the first page of this summons, ask in person at any OATH Hearing Center location below or call 1-844-628-4692. See below for additional information. Higher penalties may be imposed for each repeated violation up to the maximum penalty allowed by law or rule.

- Except for unlicensed activity (described below), maximum penalties for the violation(s) in this summons may include a fine of as much as \$15,000 for each violation; revocation or suspension of your DCA license; the sealing of your business premises; and/or the removal of your property. Copies of the laws and rules, which include the maximum penalties for specific violations, are available on the DCA website: **nyc.gov/dca**.

**Unlicensed Activity Penalties:** In most cases, the penalty for unlicensed activity is \$100 per violation per day. See the first page of this summons for the “Start Date of Unlicensed Activity” under the “Key to Violations” section, which is the date this penalty would begin. Pursuant to Section 1-19 of Title 6 of the Rules of the City of New York, you will be presumed to have engaged in the unlicensed activity every day from the “Start Date of Unlicensed Activity” through the Hearing Date. Penalties for unlicensed activity could exceed \$15,000.

**Sidewalk Café Penalties:** Your Sidewalk Café license may be suspended or revoked, and your sidewalk café and restaurant sealed for up to 30 days for a third violation of the Sidewalk Café Law or Rules. Your sidewalk café and restaurant may also be sealed for up to 30 days for a second violation for operating an unlicensed sidewalk café.

**Sale of Toy or Imitation Firearms Penalties:** If you are found to have offered to sell or sold a toy or imitation firearm on three (3) or more occasions within a two-year period, the premises where the violations occurred may be sealed for up to five (5) days. See Administrative Code Section 10-131(g) (1) for more details.

DCA encourages business owners to view the **Business Owner’s Bill of Rights**, available at **nyc.gov/bizrights**

Questions?

أسئلة؟      任何疑问      Kesyon?  
Вопросы?      ¿Preguntas?  
질문 있으세요?      কোনো প্রশ্ন আছে কি?  
www.nyc.gov/oath  
844-OATH-NYC (844-628-4692)

OATH Hearing Center Locations

**Manhattan:** 66 John Street, 11th Floor, New York, NY 10038  
**Brooklyn:** 9 Bond Street, 7th Floor, Brooklyn, NY 11201  
**Bronx:** 3030 3rd Avenue, Room 250, Bronx, NY 10455  
**Queens:** 31-00 47th Avenue, 4th Floor, Long Island City, NY 11101  
**Staten Island:** 350 St. Mark’s Place, Staten Island, NY 10301



SUMMONS NUMBER: **05448699**

Page 2

Key to Violations

A. TITLE 20 of the NYC ADMINISTRATIVE CODE (see columns 1, 2, and 3)	E. NY GENERAL BUSINESS LAW (see column 3)
B. TITLE 6 of the RULES OF THE CITY OF NEW YORK (see column 3)	F. TITLE 10 of the NYC ADMINISTRATIVE CODE, CHAPTER 1 (see column 3)
C. NY AGRICULTURE & MARKETS LAW (see column 3)	G. NYC Health Code (see column 3)
D. TITLE 1 of the NY CODES, RULES, and REGULATIONS (see column 3)	H. Other

Respondent is charged with violating (continued):

A-H	1 CH.	2 SUB- CH.	3 SEC.	OATH Code	Recidivist Charge	Nature/Description of Violation	Counts
The number under "Counts" represents the number of individual violations of the Code, Rule, or other law with which you are being charged.							
					<input type="checkbox"/> 2nd <input type="checkbox"/> 3rd <input type="checkbox"/> 4th	excessive price increase during	
					<input type="checkbox"/> 2nd <input type="checkbox"/> 3rd <input type="checkbox"/> 4th	an imminent threat to public	
					<input type="checkbox"/> 2nd <input type="checkbox"/> 3rd <input type="checkbox"/> 4th	Health. At time of inspection, I	
					<input type="checkbox"/> 2nd <input type="checkbox"/> 3rd <input type="checkbox"/> 4th	inquired about Face masks and	
					<input type="checkbox"/> 2nd <input type="checkbox"/> 3rd <input type="checkbox"/> 4th	male employee verbally quoted	
					<input type="checkbox"/> 2nd <input type="checkbox"/> 3rd <input type="checkbox"/> 4th	that each mask that he was selling	
					<input type="checkbox"/> 2nd <input type="checkbox"/> 3rd <input type="checkbox"/> 4th	was \$ 12.00 a mask.	
					<input type="checkbox"/> 2nd <input type="checkbox"/> 3rd <input type="checkbox"/> 4th	MASK: Inovel 3000 series N95	
					<input type="checkbox"/> 2nd <input type="checkbox"/> 3rd <input type="checkbox"/> 4th	Respirator mask.	
					<input type="checkbox"/> 2nd <input type="checkbox"/> 3rd <input type="checkbox"/> 4th	3002 N95 - M	
					<input type="checkbox"/> 2nd <input type="checkbox"/> 3rd <input type="checkbox"/> 4th	Healthcare N95 Particulate	
					<input type="checkbox"/> 2nd <input type="checkbox"/> 3rd <input type="checkbox"/> 4th	Respirator and Surgical Mask	
					<input type="checkbox"/> 2nd <input type="checkbox"/> 3rd <input type="checkbox"/> 4th	Male employee presented to me	
					<input type="checkbox"/> 2nd <input type="checkbox"/> 3rd <input type="checkbox"/> 4th	a box which contained 6 Facial	
					<input type="checkbox"/> 2nd <input type="checkbox"/> 3rd <input type="checkbox"/> 4th	masks that were for sale.	
					<input type="checkbox"/> 2nd <input type="checkbox"/> 3rd <input type="checkbox"/> 4th		
					<input type="checkbox"/> 2nd <input type="checkbox"/> 3rd <input type="checkbox"/> 4th		
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					<input type="checkbox"/> 2nd <input type="checkbox"/> 3rd <input type="checkbox"/> 4th		

continued on Page 3



**inovel**  
Different by design.

**3002N95-M**  
Medium  
White Cover  
Blue Strap

3002-704 REV A 4/06

# 3000

## SERIES N95

HEALTHCARE  
PARTICULATE  
RESPIRATOR  
& SURGICAL  
MASK

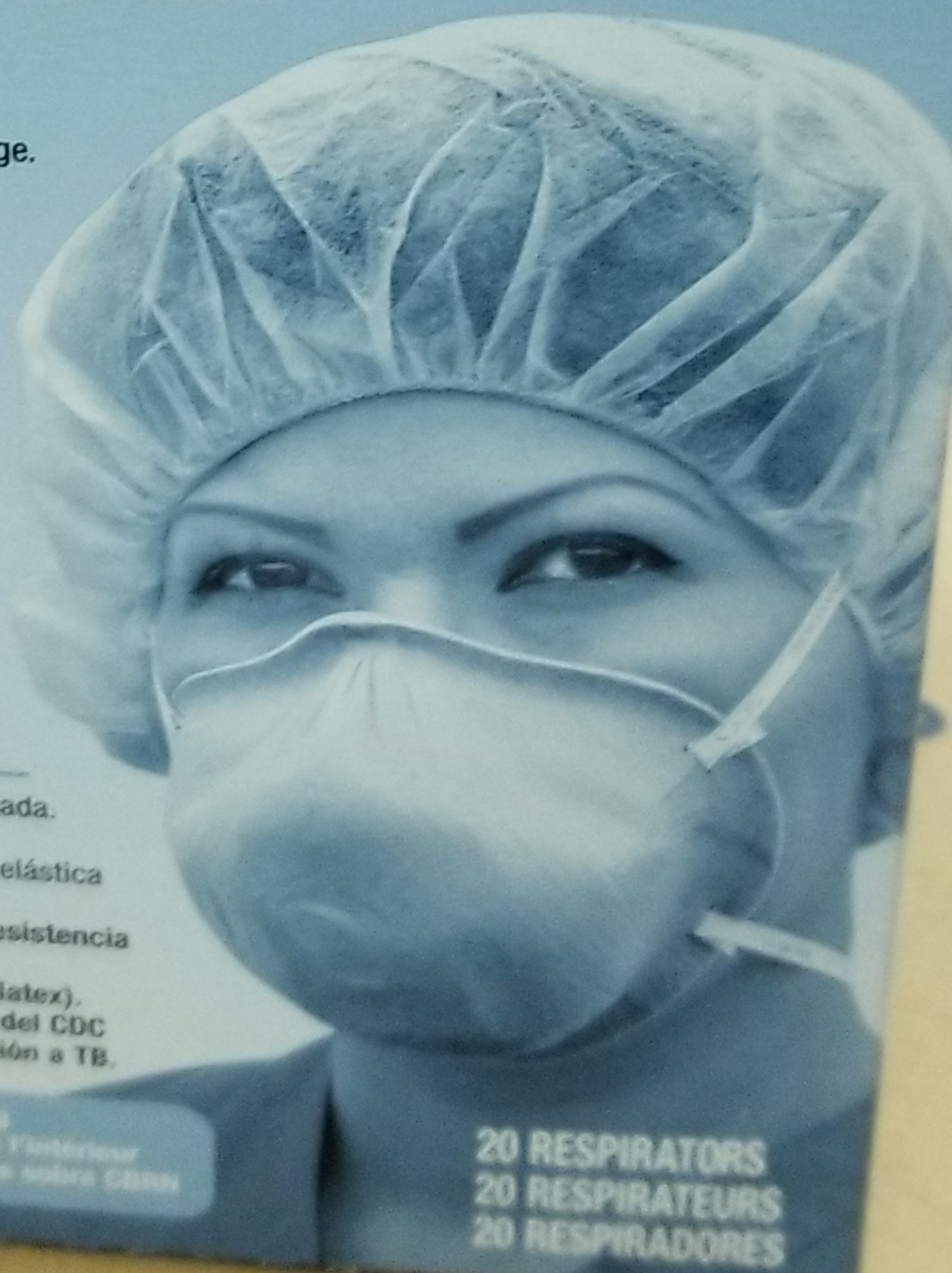
RESPIRATEUR  
CONTRE LES  
PARTICULES  
POUR SOINS  
DE LA SANTÉ  
ET MASQUE  
CHIRURGICAL

RESPIRADOR  
PARA PARTICULAS  
PARA EL CUIDADO  
DE LA SALUD  
Y MASCARA  
QUIRURGICAL

- Extra Comfort – Contoured Shape, Soft Foam Nose Cushion.
- Easy to fit – Molded Nose Bridge.
- Variety of sizes.
- Highest fluid resistance level.
- Latex free.
- Meets CDC guidelines for TB exposure control.

- Confort Supérieur – Contour moulé, Ailettes de Mousse Souple.
- Ajustement facile – Arête du Nez Moulée.
- La résistance de fluide la plus élevée.
- Exempt de latex.
- Respecte les Normes CDC pour le contrôle de l'exposition à la tuberculose.

- Extra cómodo – Forma moldeada.
- Fácil de poner – Es el único respirador N95 de una banda elástica aprobado por NIOSH.
- Ofrece el mas alto nivel de resistencia a los fluidos.
- Libre de cauchos naturales (latex).
- Conforma con las directivas del CDC para el control de la exposición a TB.



See inside for CBRN Warning  
Voir l'avertissement CBRN à l'intérieur  
Ver advertencias sobre CBRN

20 RESPIRATORS  
20 RESPIRATEURS  
20 RESPIRADORES



HEALTHCARE  
PARTICULATE  
RESPIRATOR  
& SURGICAL  
MASK

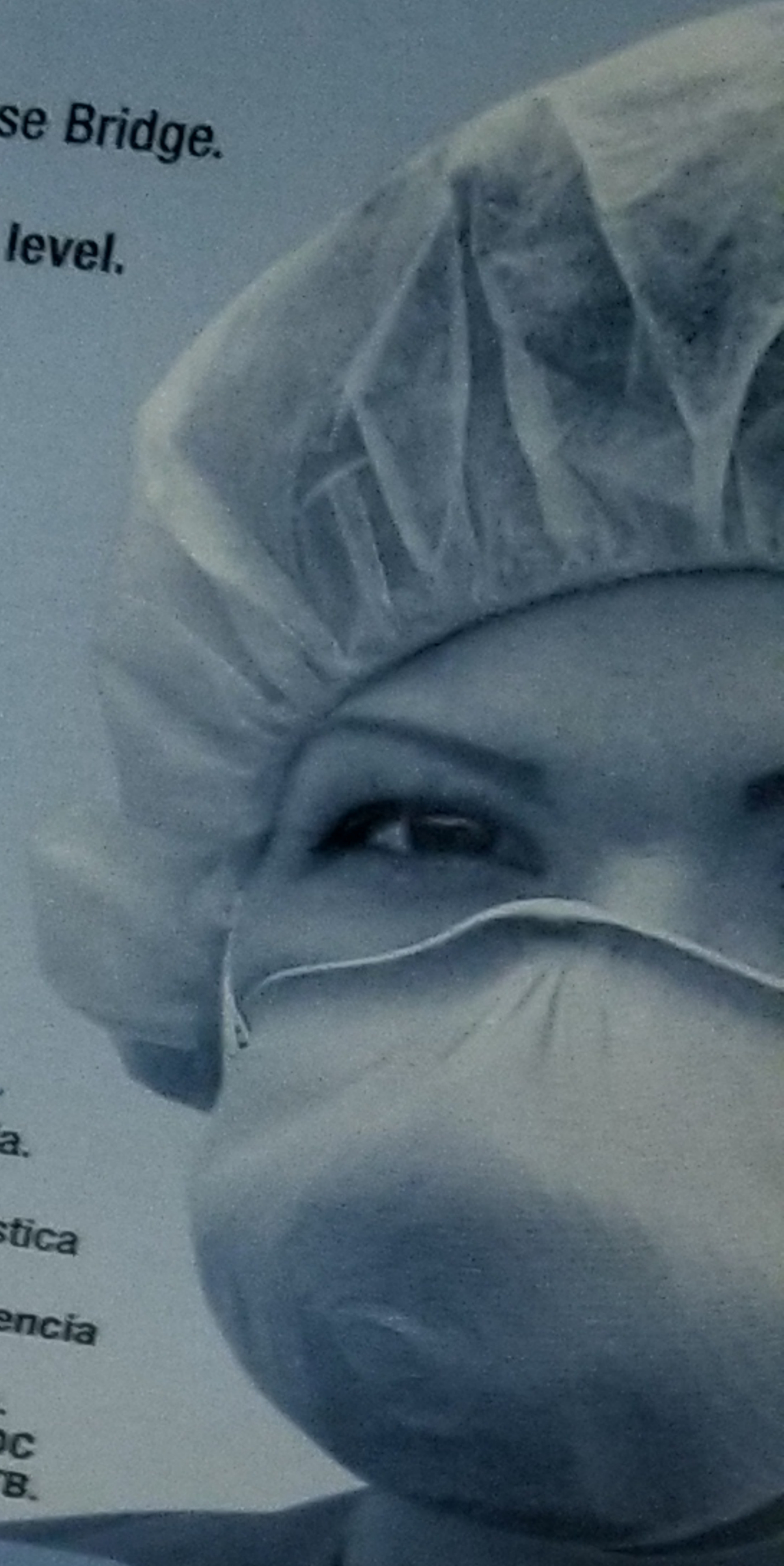
RESPIRATEUR  
CONTRE LES  
PARTICULES  
POUR SOINS  
DE LA SANTÉ  
ET MASQUE  
CHIRURGICAL

- Extra Comfort – Contoured Shape, Soft Foam Nose Cushion.
- Easy to fit – Molded Nose Bridge. Variety of sizes.
- Highest fluid resistance level.
- Latex free.
- Meets CDC guidelines for TB exposure control.

- Confort Supérieur – Contour moulé, Ailettes de Mousse Souple.
- Ajustement facile – Arête du Nez Moulée.
- La résistance de fluide la plus élevée.
- Exempt de latex.
- Respecte les Normes CDC pour le contrôle de l'exposition à la tuberculose.

- Extra cómodo – Forma moldeada.
- Fácil de poner – Es el único respirador N95 de una banda elástica aprobado por NIOSH.
- Ofrece el mas alto nivel de resistencia a los fluidos.
- Libre de cauchos naturales (latex).
- Conformo con las directivas del CDC para el control de la exposición a TB.

See inside for CBRN Warning  
Voir l'Avertissement CBRN à l'intérieur  
Vea dentro las advertencias sobre CBRN



20 RESPIR  
20 RESPIR  
20 RESPIR



Manufactured For:  
Drive DeVilbiss Healthcare  
3 Seaview Boulevard  
Trenton, NJ 08646 USA  
Made in China



50822383524110



added



**S**  
HEALTH  
PARTICUL  
RESPIRA  
& SURGI  
MASK

- Extra Comfort – Contoured Shape, Soft Foam Nose Cushion.
- Easy to fit – Molded Variety of sizes.
- Highest fluid resistance.
- Latex free.
- Meets CDC guidelines for TB exposure control.

- Comfort Supérieur – Contour moulé, Ailettes de Mousse Souple.
- Ajustement facile – Arrière du Nez Moulée.
- La résistance de fluide la plus élevée.
- Sans latex.
- Répond aux Normes de contrôle de l'exposition au TB.



with 6" Casters, Padded  
Locks, Red



5062283524110

MADE IN  
USA



If you have a complaint about this business, contact:



Department of  
Consumer Affairs

NYC Department of Consumer Affairs

42 Broadway, New York, NY 10004

Dial 311 or [www.nyc.gov/consumers](http://www.nyc.gov/consumers)

Licensee: THE KING MEDICAL EQUIPME

License Title(s): DLR PRODUCT/DISABLED

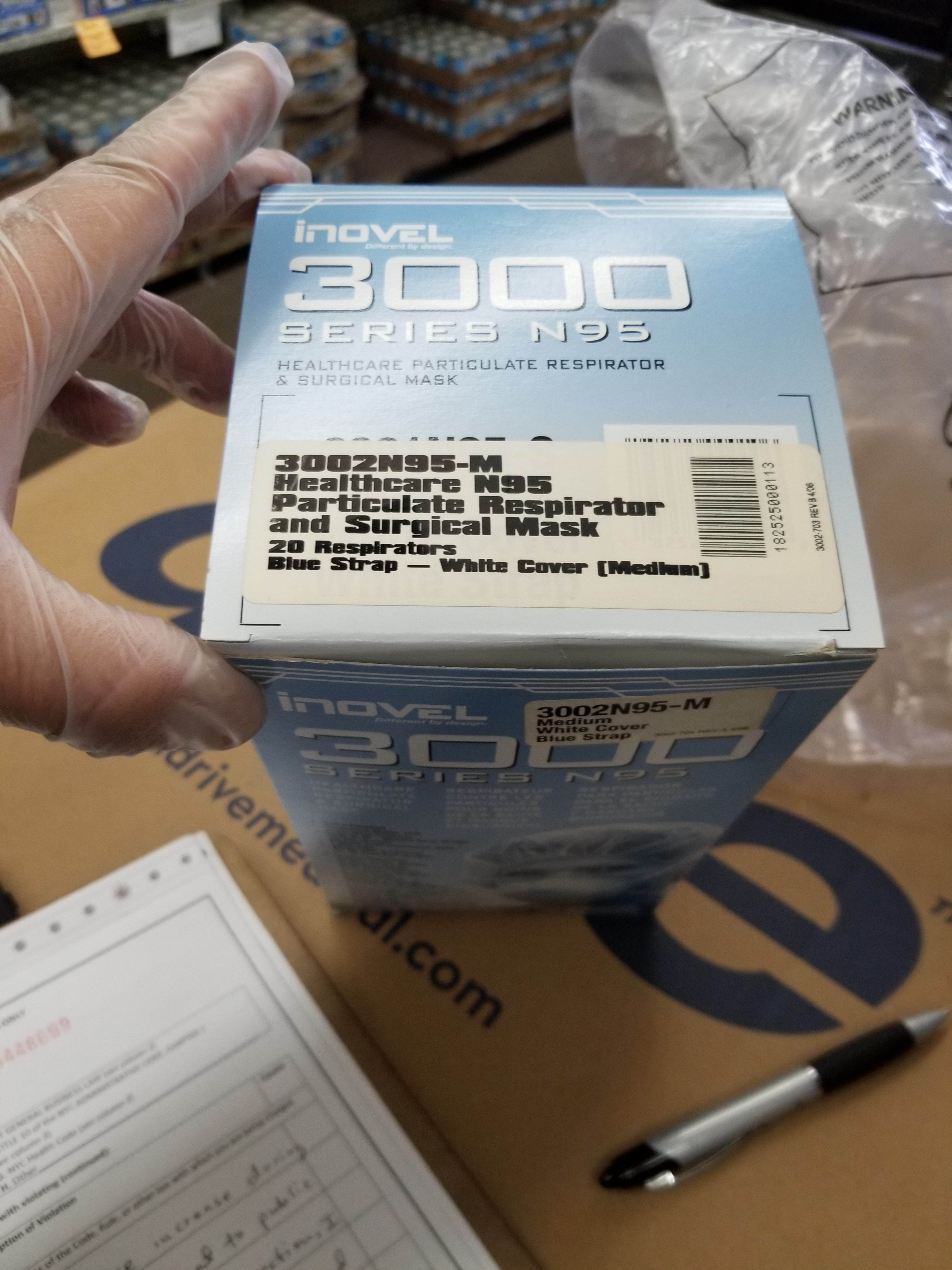
License Number(s): 1190702

DISPOSABLE

Distribut  
Comfort  
Brooklyn

• Ambidextr





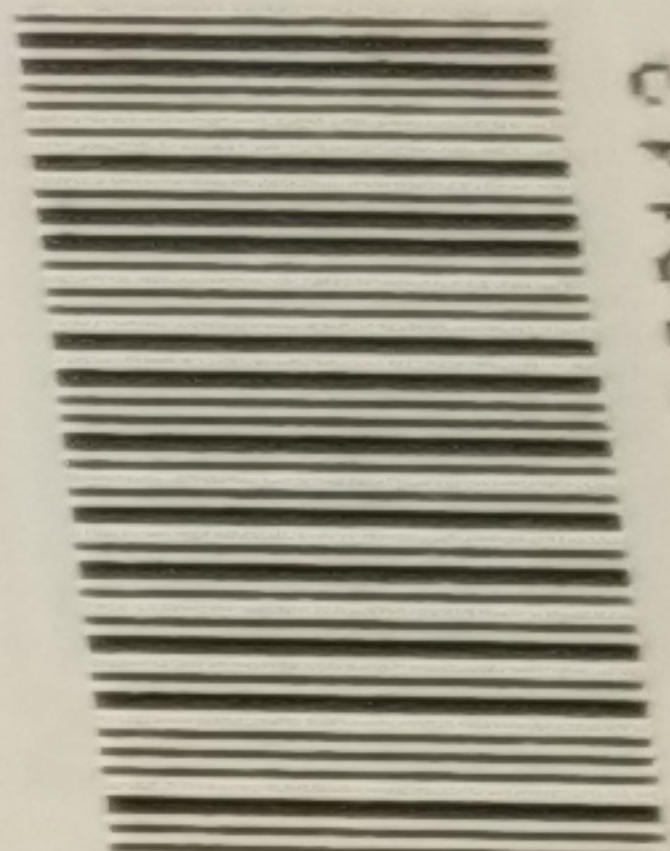
inoVEL  
Different by design.

30000

SERIES N95

HEALTHCARE PARTICULATE RESPIRATOR  
& SURGICAL MASK

**3002N95-M**  
**Healthcare N95**  
**Particulate Respirator**  
**and Surgical Mask**  
**20 Respirators**  
**Blue Strap — White Cover (Medium)**



182525000113

3002-703 REV B 4/06

inoVEL  
Different by design.

30000

SERIES N95

**3002N95-M**  
**Medium**  
**White Cover**  
**Blue Strap**

448699

GENERAL BUSINESS LAW (see volume 2)  
TITLE 20 of the NYC Administrative Code (see volume 2)  
NYC Health Code (see volume 2)  
H. Other

with violating (continued)

ption of Violation

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... to public

... tions, I



**inNOVEL**  
Different by design.

**3002N95-M**  
Medium  
White Cover  
Blue Strap

3002-704 REV A 4/06

# 3000

## SERIES N95

HEALTHCARE  
PARTICULATE  
RESPIRATOR  
& SURGICAL  
MASK

RESPIRATEUR  
CONTRE LES  
PARTICULES  
POUR SOINS  
DE LA SANTÉ  
ET MASQUE  
CHIRURGICAL

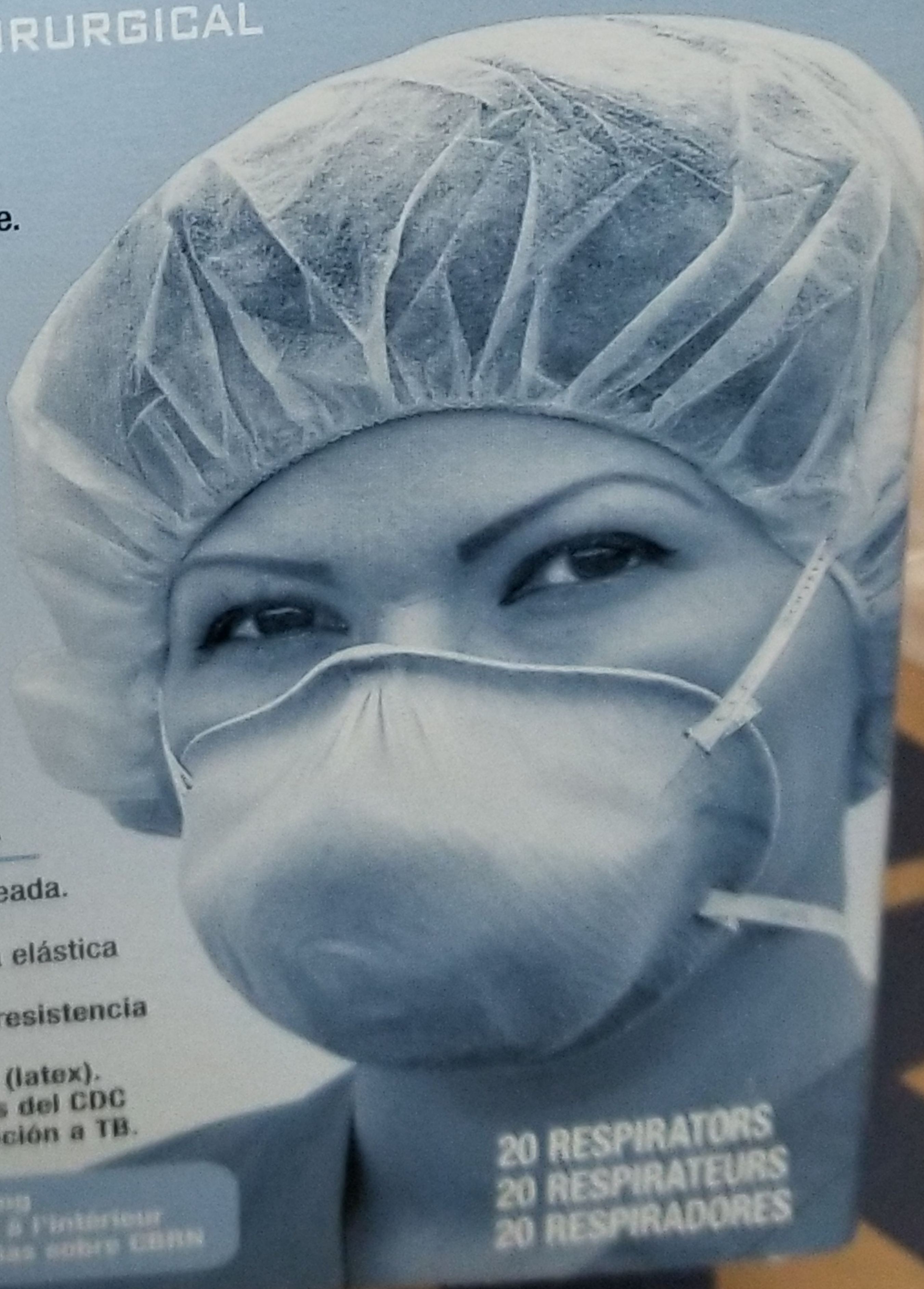
RESPIRADOR  
PARA PARTICULAS  
PARA EL CUIDADO  
DE LA SALUD  
Y MASCARA  
QUIRURGICA

- Extra Comfort – Contoured Shape, Soft Foam Nose Cushion.
- Easy to fit – Molded Nose Bridge. Variety of sizes.
- Highest fluid resistance level.
- Latex free.
- Meets CDC guidelines for TB exposure control.

- Confort Supérieur – Contour moulé, Ailettes de Mousse Souple.
- Ajustement facile – Arête du Nez Moulée.
- La résistance de fluide la plus élevée.
- Exempt de latex.
- Respecte les Normes CDC pour le contrôle de l'exposition à la tuberculose.

- Extra cómodo – Forma moldeada.
- Fácil de poner – Es el único respirador N95 de una banda elástica aprobado por NIOSH.
- Ofrece el mas alto nivel de resistencia a los fluidos.
- Libre de cauchos naturales (latex).
- Conform a las directivas del CDC para el control de la exposición a TB.

See inside for CDRN Warning  
Voir l'Avertissement CDRN à l'intérieur  
Vea adentro las advertencias sobre CDRN



20 RESPIRATORS  
20 RESPIRATEURS  
20 RESPIRADORES





- Extra Comfort - Contoured Shape, Soft Foam Nose Cushion.
- Easy to fit - Molded Nose Bridge.
- Variety of sizes.
- Highest fluid resistance level.
- Latex free.
- Meets CDC guidelines for TB exposure control.

- Comfort Superior - Contoured shape, Molded Nose Bridge.
- Highest fluid resistance level.
- Latex free.
- Meets CDC guidelines for TB exposure control.

www.drive

USE MAY RESULT  
OR DEATH FOR PROPER  
ALL INVEL 866-546-6835

USE MAY RESULT  
OR DEATH FOR PROPER  
ALL INVEL 866-546-6835

USE MAY RESULT  
OR DEATH FOR PROPER  
ALL INVEL 866-546-6835

USE MAY RESULT  
OR DEATH FOR PROPER  
ALL INVEL 866-546-6835

Male employee presented to me  
box which contained 6 filters  
That were for sale.



## SERIES

WE'LL PROTECT  
YOUR INVESTMENT  
AND YOUR REPUTATION  
WITH A GUARANTEE.

MAJULI  
EROL  
EL  
I. MOL  
I. MOL  
MOL  
MOL  
MOL  
MOL

PROP  
566-5

PRDF  
56-546

1-10-11

ATTENTION  
PRODUCTION  
BOITE QUER  
TE OU

30021957

[illegible]









March 28, 2020

Lorelei Salas  
Commissioner

42 Broadway  
New York, NY 10004

Dial 311  
(212-NEW-YORK)

[nyc.gov/dca](http://nyc.gov/dca)

Re: Your Complaint against: THE KING MEDICAL EQUIPMENT CO.,  
INC.  
Case Number: 7143-2020-CMPL  
Investigation Result: In Violation



\*7143-2020-CMPL\*





Dear Consumer:

Thank you again for contacting the NYC Department of Consumer Affairs (DCA). Above is the result of our investigation of the business.

If the result is "In Violation," DCA issued violations to the business.

If the result is "No Violation," DCA did not issue violations to the business. We will continue to monitor the business and its practices.

Sincerely,

Consumer Services Division







March 25, 2020

Lorelei Salas  
Commissioner

42 Broadway  
New York, NY 10004

Dial 311  
(212-NEW-YORK)

[nyc.gov/dca](http://nyc.gov/dca)



Re: Case Number: 7143-2020-CMPL - KING MEDICAL EQUIPMENT CO.

**Regarding your complaint against KING MEDICAL  
EQUIPMENT CO.**

Thank you for contacting the NYC Department of Consumer Affairs (DCA). We have carefully reviewed your complaint against KING MEDICAL EQUIPMENT CO. and are investigating further. We will notify you of the results. Please allow up to six weeks.

If you do not hear from us after that time, you can call the Consumer Services Division at +1 212 487-4110.



\*7143-2020-CMPL\*