

COMPLAINT AND SUMMONS

REQUEST TO DISMISS OR VOID COMPLAINT

ALL DISMISSALS AND VOIDS ARE TO BE PLACED ON THE RECORD
IN OPEN COURT, PER DIRECTIVE #02-06

NEW BRUNSWICK MUNICIPAL COURT

FORM TO BE DISMISSED OR VOIDED:

- ☒ Uniform Traffic Ticket # P10 250141
- ☐ Special Form of Complaint # _____
- ☐ CDR # _____

CHECK ONE BOX ONLY:

- ☒ **DISMISSAL REQUEST:** The undersigned has issued the above referenced ticket or complaint and requests that the ticket or complaint be DISMISSED because:

Please dismiss ticket officer
error wrong violation ticket
was not issued

- ☐ **VOID REQUEST:** The undersigned states that the above ticket or complaint was spoiled, not completed, or lost and requests that it be VOIDED because:

Replacement ticket/complaint number(s), if any:

CERTIFICATION:

I certify that the foregoing statements made by me are true. I am aware that if any of the foregoing statements made by me are willfully false, I am subject to punishment.

1-3-25

Date of Request

EL 37 700

Signature & Badge # of Officer/Requestor

OFFICER SUPERVISOR REVIEW:

I have reviewed and approved the above request to dismiss or void the above complaint.

1-13-25

Date of Review

[Signature]

Signature of Police Chief (or Supervisor)

REVIEW REQUEST TO DISMISS BY MUNICIPAL PROSECUTOR:

- ☐ **DISMISSAL RECOMMENDED**

Date

Municipal Court Prosecutor

- (1) All copies of the Uniform Traffic Ticket/Special Form of Complaint/CDR to be VOIDED MUST be attached to this request.
- (2) All copies (EXCEPT defendant copy) of the Uniform Traffic Ticket/Special Form of Complaint/CDR MUST be attached to the DISMISSAL request.
- (3) Officer may retain photocopy of request of police records.
- (4) Municipal Prosecutor may retain copy for prosecutor records.

COURT ID

1214

PREFIX

P10

TICKET NO.

250141

NEW BRUNSWICK MUNICIPAL COURT
25 KIRKPATRICK ST
NEW BRUNSWICK, NJ 08903

Telephone
732-745-5089
Hours
0830 AM - 0400

YOU ARE HEREBY SUMMONED TO APPEAR BEFORE THIS COURT TO ANSWER THIS COMPLAINT CHARGING YOU WITH THE OFFENSE LISTED

THE UNDERSIGNED CERTIFIES THAT THE OWNER/OPERATOR OF THIS VEHICLE DID UNLAWFULLY PARK A

Vehicle Make: Lincoln
Color: Black
Body Type: 4 Door
Year:

License Plate: LRK46G
Plate State: NJ
Exp. Date:

AND DID THEN AND THERE COMMIT THE FOLLOWING OFFENSE

10.16.020A NO PARKING ANYTIME

Offense Date

01/03/2025

Time

05:25 PM

First Observed

Meter No.

Municipality

NEW BRUNSWICK CITY

Location

NEILSON ST

Payable

Amount: \$47.00

Due Date: 01/22/2025

The undersigned further states that there are just and reasonable grounds to believe that you committed the above offense and will file this complaint in this court charging you with that offense.

01/03/2025 PEO E. NEGRON

Date Issued Electronic Signature

0235

1214

Officer ID Unit Code

1. PLEA OF NOT GUILTY

If you wish to plead not guilty, you must notify the court, whose address and telephone number are shown above, at least 5 days prior to the pay by date listed on this ticket. Please provide the court your contact information, including your email address and telephone number. If you fail to notify the court, it may be necessary for you to make additional court appearances.

2. COURT APPEARANCE REQUIRED

If "Court Appearance Required" is displayed, you must appear on the date and time indicated, even if you wish to plead guilty. Contact the court to confirm your appearance, and provide your email address and telephone number. The court may schedule you to appear in person or by video. You may also be able to resolve your matter online (see section 4 below).

3. PAYMENT AND GUILTY PLEA

If you wish to plead guilty and give up your rights to have a lawyer and a trial, you may do so provided a PAYABLE AMOUNT is listed on this ticket. If so, you may plead guilty and pay the penalty without the necessity of a court appearance. Go to www.NJMCdirect.com to plead guilty and pay this ticket online. You may also bring or mail in this ticket with the payment amount listed to the court at the address above. Payment must be made prior to the pay by date displayed on this ticket.

Payments by mail are to be made by check or money order payable to this Municipal Court. Do not send cash. Please print the ticket number on the front of the check or money order. If payment is received by the court after the pay by date, you may be assessed additional penalties. A receipt will be sent to you only if your payment is accompanied by a self-addressed, stamped envelope.

If you wish to plead guilty but are unable to pay your fines and costs in full, go to www.NJMCdirect.com or contact the court for more information.

4. ONLINE OPTIONS

Please visit www.NJMCdirect.com for information on how to resolve matters online without having to appear in court.

FOR MORE INFORMATION ON ANY OF THE ABOVE, GO TO:

www.NJMCdirect.com

NOTICE

IF YOU FAIL TO APPEAR IN RESPONSE TO THIS SUMMONS OR PAY THE PRESCRIBED PENALTY, ADDITIONAL PENALTIES MAY RESULT, A WARRANT MAY BE ISSUED FOR YOUR ARREST AND YOUR DRIVING PRIVILEGES IN NEW JERSEY MAY BE REVOKED. FAILURE TO APPEAR OR PAY THE PRESCRIBED PENALTY SHALL BE CONSIDERED AN ADMISSION OF LIABILITY AND A DEFAULT JUDGMENT MAY BE ENTERED AGAINST THE OWNER OF THE VEHICLE.

PLEASE NOTIFY THE COURT OF DISABILITY ACCOMMODATION NEEDS

