

COURT I.D.	PREFIX	TICKET NUM	TYPE	TOMS RIVER MUNICIPAL COURT			
1507	E25	003771	M	255 OAK AVENUE TOMS RIVER NJ 08753			
YOU ARE HEREBY SUMMONED TO APPEAR BEFORE THIS COURT TO ANSWER THIS COMPLAINT CHARGING YOU WITH THE OFFENSE LISTED:							
☐ No License	Driver's Lic. No.	L03394236406824					
			Exp. Date	State	☐ Commercial License		
			6/2025	NJ			
THE UNDERSIGNED CERTIFIES THAT							
Name First	Initial	Last (Please Print)					
JUSTIN	D	LAMB					
Address			Address 2				
632 MCKINLEY AVE							
City	State	Zip Code	Telephone	☐ Check If Cell Phone			
TOMS RIVER	NJ	08753	(732)330-5555				
Birth Date	Eyes	Sex	Height	Inches	Restrictions		
6/11/1982	4	M	6	1	D 0		
Email			Hispanic or Latinx?		Race		
			U		W		
DID UNLAWFULLY (PARK) (OPERATE) A							
Make of Vehicle	Year	Body Type	Color	☐ Commercial Vehicle			
CHEV	2012	18	WT	☐ Hazardous Material			
Lic. Plate No.	State	Exp. Date	☐ Out of Service				
PALMS13	NJ	6/2025	☐ Omnibus				
VIN							
1GCRCTE02CZ130595							
Offense Date	Month	Day	Year	Time: 01:27	☐ AM ☒ PM		
	05	26	2025				
LOCATION OF OFFENSE	Describe Location						
	ROUTE 37 E & RIVER D						
Municipality	County		Mun. Code (Offense)				
TOMS RIVER TWP	OCEAN			1507			
AND DID THEN AND THERE COMMIT THE FOLLOWING OFFENSE (ONE CHARGE PER COMPLAINT)							
TRAFFIC OFFENSES - (Check One) - TITLE 39							
☐ 3-4 Unregistered vehicle							
☐ 3-29 Failure to exhibit documents							
☐ D.L. or ☐ REG. or ☐ INS.							
☐ 3-33 Unclear plates							
☐ 3-66 Maintenance of lamps							
☐ 3-76.2f Failure to wear seatbelt							
☐ 4-81 Failure to observe signal							
☐ 4-85 Improper passing							
☐ 4-97 Careless driving							
☐ 4-124 Failure to turn							
☐ 4-144 Failure to stop or yield							
☐ 8-1 Failure to inspect							
☐ 8-4 Failure to make repairs							
☐ 4-98 Speeding _____ MPH in a _____ MPH Zone							
IN EXCESS OF SPEED LIMIT BY:							
☐ 1-9 MPH ☐ 10-14 MPH ☐ 15-19 MPH ☐ 20-24 MPH ☐ 25-29 MPH ☐ 30-34 MPH							
☐ 65 MPH Zone ☐ Safe Corridor ☐ Construction Zone							
☒ Accident ☐ Prop Damage ☐ DRE ☒ Bodily Injury Excess Weight _____							
☐ Drugs ☐ Alcohol ☐ Blood Test ☐ Urine Test							
☐ Death / Serious Bodily Injury ☐ EBTD							
PENALTY SCHEDULE ON REVERSE							
PARKING OFFENSE							
☐ Overtime Meter No. ☐ Prohibited Area ☐ Double							
OTHER TRAFFIC/PARKING OFFENSE (Describe)							
FOLLOWING TOO CLOSELY							
Statute No.			Ordinance/Code No.				
39:4-89							
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			Month	Day	Year		
			5	26	2025		
Signature of Complaining Witness			Officer's ID No.				
PTL. W. RESETAR			0428				
NOTICE TO APPEAR							
☐ COURT APPEARANCE REQUIRED	COURT DATE	Month	Day	Year	Time: 12:00 PM		
		06	27	2025			
CONDITIONS	AREA	☒ Business	☐ School	☐ Residential	☐ Rural		
	ROAD	☒ Dry	☐ Wet	☐ Snow	☐ Ice		
	TRAFFIC	☐ Light	☒ Medium	☐ Heavy			
	VISIBILITY	☒ Clear	☐ Rain	☐ Snow	☐ Fog		
Equipment Type	Operator's Name		Operator ID No.	Unit Code			
Notes							