# REQUEST

#### for MetroCard<sup>®</sup> Records for Transit Adjudication Bureau Hearing



Violation #

# **Your Information:**

Last Name	First Name	
Address		Apt #
CitySta	te	Zip Code
Phone Number		
Hearing Date	_Adjourned Hearing Date	
Date Traveled Approximate Time of Travel		
10 Digit MetroCard Serial Number		
Type of MetroCard: MetroCard	Reduced Fare MetroCar	d 🔲 Student MetroCard
Events Leading to the Issuance of the Summons:		

# **Submission Instructions:**

Please note that although you are submitting this form, **YOU ARE STILL REQUIRED TO DO ONE OF THE FOLLOWING:** 

• **APPEAR IN PERSON** at the Transit Adjudication Bureau 29 Gallatin Place, 3rd Floor Brooklyn, NY 11201 between 8:30AM and 2:30PM on any business day on or before the hearing date shown on your summons or the adjourned hearing date given to you.

# OR

• OR REQUEST A HEARING BY MAIL. Submit a sworn statement of facts explaining what led to the issuance of the summons and your defense to the charge. Please include all the evidence you wish to be considered and send to the mailing location listed above. By requesting a hearing by mail you will waive your right to an in-person hearing. Your hearing by mail request must be received by TAB on or before the hearing date or adjourned hearing date. If you have already completed a Request for Hearing By Mail form, you do not need to send in an additional request.



TAB.OnlineAFCRequests@nyct.com