

WALL TOWNSHIP PD

Event Report

Event ID: 2024-0303-0282

Call Ref #: 293

Date/Time Received: 03/03/24 18:16:27

Rpt #: 2024-00820

Prime W210

Services Involved

Call Source: SELF

Unit: MARTIN, TYLER D

LAW

Location: 2700 ALLAIRE RD

X-ST: SOUTH MANOR CT

Jur: WTPD Service: LAW Agency: WTPD

BAILEYS CORNER RD

St/Beat: PST1 District:

RA: S7

Business: WALL TOWNSHIP POLICE

Phone: (732) 449-4500

GP: PST1

Nature: SUSPICIOUS VEHICLE

Alarm Lvl: 1 Priority: 2

Medical Priority:

Reclassified Nature:

Caller:

Alarm:

Addr:

Phone:

Alarm Type:

Vehicle #: P54MUR

St: NJ

Report Only: No

Race:

Sex:

Age:

Call Taker: W622

Console: D3

Geo-Verified Addr.: Yes Nature Summary Code:

Disposition: REPT Close Comments:

Notes:

See Event Notes Addendum at end of this report

Times

		Time From Call Received		
Call Received:	03/03/24 18:16:27		Unit Reaction:	(1st Dispatch to 1st Arrive)
Call Routed:	03/03/24 18:16:27		En-Route:	(1st Dispatch to 1st En-Route)
Call Take Finished:	03/03/24 18:16:27		(Time Held)	On-Scene: 000:26:12 (1st Arrive to Last Clear)
1st Dispatch:	03/03/24 18:16:27			
1st En-Route:	03/03/24 18:16:27			
1st Arrive:	03/03/24 18:16:27			(Reaction Time)
Last Clear:	03/03/24 18:42:39	000:26:12		

Radio Log

Unit	Empl ID	Type	Description	Time Stamp	Comments (may truncate in portrait)	Close Code	User
W210	210	D	Dispatched	03/03/24 18:16:27	Out Srv: [1003] at 10-2		W622
W210	210	E	En-Route	03/03/24 18:16:27	Out Srv: [1003] at 10-2		W622
W210	210	A	Arrived	03/03/24 18:16:27	Out Srv: [1003] at 10-2		W622
W190	190	D	Dispatched	03/03/24 18:16:34			W622
W190	190	E	En-Route	03/03/24 18:16:34			W622
W190	190	A	Arrived	03/03/24 18:16:34			W622
W210	210	C	Cleared	03/03/24 18:42:39		REPT	W622
W190	190	C	Cleared	03/03/24 18:42:39		1010	W622

TMRZ

Event Log

Unit	Empl ID	Type	Description	Time Stamp	Comments (may truncate in portrait)	Close Code	User
		TR	Time Received	03/03/24 18:16:27	By: SELF		W622
		FIN	Finished Call Taking	03/03/24 18:16:27			W622
		VEHI	Vehicle Info	03/03/24 18:16:27	User-entered vehicle info: NJ P54MUR P		W622
		VEV	Viewed Event	03/03/24 18:16:42	User First Viewed Event CAD		52360
		ENT	Entered Remarks	03/03/24 18:16:44			W622
		ARM	Added Remarks	03/03/24 18:17:31			W622
		VEV	Viewed Event	03/03/24 18:18:21	User First Viewed Event CAD		W577
		ARM	Added Remarks	03/03/24 18:33:40			W622
		RPT	Requested Report#	03/03/24 18:35:26	WTPD Report #2024-00820		W622
		ARM	Added Remarks	03/03/24 18:51:21			W223
		ARM	Added Remarks	03/03/24 20:17:55			W210



Event Notes Addendum

Notes Subsequent to a suspicious vehicle, patrols observed the below listed vehicle parked in our Wall Police Headquarters parking lot parked in a parking spot. Patrols came in contact with the driver who was passed out at the wheel. The same was placed under arrest for DWI and was walked into Wall Police Hq's for processing. Driver refused to provide breathe samples and was charged accordingly. She was released in accordance with John's Law. Patrols drove the target vehicle into the impound lot due to it being at our Hq's.

SEE IR/AR.

- [03/03/24 20:17:55 W210]
4-50 [03/03/24 18:51:21 W223]
female 41 [03/03/24 18:33:40 W622]
=====

1L01
NJ0135200

MKE/NJ DMV RESPONSE

OLN/ [REDACTED]

NAM/FINNEGAN, PAIGE K

OLN EXP [REDACTED]

DOB [REDACTED]

SSN [REDACTED]

MIDDLETOWN, NJ 07748-2835

ENDORSEMENTS/RESTRICTIONS: NONE
IMAGE LOCATED IN FILE: 0000165905.JPG

@ [03/03/24 18:17:31 W622]

==veh==

1L01
NJ0135200

MKE/NJ DMV RESPONSE

LIC/P54MUR LIS/NJ LIY/08-2024
VIN/3MZBN1U77HM126305 PAS-GVW-LEN/7
VYR/2017 VMA/MAZ VMO/M3S VST/4 DR VCO/BK AXLES-PROP/2

NAM/FINNEGAN, KIMBERLY M

OLN [REDACTED]

DOB [REDACTED]

SSN [REDACTED]

MIDDLETOWN, NJ 07748-2835

ENDORSEMENTS/RESTRICTIONS: NONE

==== [03/03/24 18:16:44 W622]

**WALL TOWNSHIP POLICE DEPARTMENT
MONMOUTH COUNTY, NEW JERSEY
ARREST REPORT**

Complaint Number 202400820	Mun. Code 1352	Phone Number 732-449-4500	UCR	Prosecutor's Case Number	Department Case Number 202400820			
Name (Last, First, Middle) FINNEGAN, PAIGE K			Phone	Alias - Nickname				
Current Address MIDDLETOWN, NJ 07748-2835								
D.O.B. [REDACTED]	Age 20	Race W	Sex F	Hgt 5'0	Wgt 121	Hair Bln	Eye Blue	Complexion Light
Scars, Marks, Tattoos						Place of Birth [REDACTED]		
Employer's Name (School Name)						Occupation (Grade)	Social Security # [REDACTED]	
Address						Phone		

DETAILS OF ARREST

Date / Time Reported 03/03/2024 18:33 Sun	Place of Arrest 2700 ALLAIRE RD, WALL TOWNSHIP				Municipal Code 1352		
Charge #1 <i>Operating Under Influence</i>	Type Misd	Counts 1	IBR Code 210	Warrant / Summons # E24001409	Statute # 39:4-50	Warr. Date	
Charge #2 <i>Consent To Take Samples</i>	Type Fel	Counts 1	IBR Code 210	Warrant / Summons # E24001411	Statute # 39:4-50.2	Warr. Date	
Charge #3 <i>Refusal To Submit To</i>	Type Misd	Counts 1	IBR Code 210	Warrant / Summons # E24001412	Statute # 39:4-50.4A	Warr. Date	
If Armed, Type of Weapon <i>None / Not Applicable</i>	Type of Arrest ON-VIEW						
VYR 2017	Make Maz	Model M3S	Style 4 Door	Color Bk	Lic/Lis P54MUR	Vin NJ3MZBNIU77HMI26305	
Vehicle: <i>John's Law Impound</i>	03/03/2024					Patrols drove the target vehicle into the <i>Inventory on File</i>	

BAIL INFORMATION

Date/Time Confined 03/03/2024	Court of Wall Township	City WALL	Committing Magistrate
Amt. Bond	Type Bond	Trial Date	Place Confined WALL POLICE HQS
Date/Time Released 03/03/2024 00:00:00	Released By: Name/ID Number/Bureau WHEELER, J. 1ST		

NARRATIVE

Subsequent to a suspicious vehicle the driver was placed under arrest for DWI. She was double lock handcuffed and transported to processing where she refused to provide breathe samples and was charged accordingly. She was released in accordance with John's Law.

Arresting Officer Signature/ID#/Bureau 	MARTIN, T. D. (PATL, HQ) (210)	
Case Status Ar	Arrestee Signature	

ARREST REPORT (Additional Charges)

Agency Name Wall Township Police Department	ORI NJ0135200	Date/Time Arrested 03/03/2024 18:33	Case # 202400820
Arrestee Name FINNEGAN, PAIGE K			Arrest Number 33885

Charge	Fel/Misd	Counts	IBR Code	Warrant/Summons #	Statute #	Warr. Da
4) Oper Mv Person Who Has Consumed Alcohol While Underage	Misd	1	210	E24001410	39:4-50.14	
5) Reckless Driving	Misd	1	9939	E24001413	39:4-96	





NEW JERSEY STATE POLICE

DRINKING DRIVER/OPERATOR QUESTIONNAIRE

Defendant (First name)	(Initial) (Last name)	Case Number	Sequential File No.
Parke	K. Finnegan	29-00820	335

1. QUESTIONS:

The following Questions were asked: On <u>March 3rd</u> , 20 <u>29</u> At <u>1423</u>			<input type="checkbox"/> AM	Occupation?
Are you under the care of a Doctor? If so, provide name & address			<input type="checkbox"/> PM	
Are you taking Medicine? If so, What and What for?			Last Visit Date: _____ Time: _____	<input type="checkbox"/> AM <input type="checkbox"/> PM
Do you have Diabetes?			Last Dose? Date: _____ Time: _____	<input type="checkbox"/> ... <input type="checkbox"/> AM <input type="checkbox"/> PM
Are you Injured?	Where?			
Are your Injuries Affecting you now? If so, What and How?				
Note any Physical Injuries or Deformities observed:				

2. ADVISE SUBJECT OF MIRANDA WARNING:

What kind of Alcoholic Drinks have you had? <u>Wish to remain Silent</u>		How many?
Where?		What was the time between each drink?
Date:	Time: <input type="checkbox"/> AM <input type="checkbox"/> PM	When did you finish your Last Drink? Date: _____ Time: _____ <input type="checkbox"/> AM <input type="checkbox"/> PM
What time did you Finish eating?	(34) What did you Eat?	
Remarks:		

3. COMPLETE THE FOLLOWING WHEN A BREATH TEST IS ADMINISTERED AND NO CHARGE FOR DRIVING/OPERATING IS ENFORCED:

Operation of the Vehicle/Vessel:	
When Stopped or Arrival at Scene:	
<u>Officer 18</u> (Rank) (Signature)	<u>210</u> (Badge No.)

Copy given to Subject:

On _____, 20 _____

TOWED VEHICLE & INVENTORY RECEIPT FORM

Vehicle ID 234723625

OWNER INFORMATION		STREET ADDRESS:	
REGISTERED OWNER: Not Available			
RACE:	SEX:	DATE OF BIRTH:	AGE:

PHONE#	BUSINESS:		MOBILE:
RESIDENCE:			

VEHICLE DESCRIPTION		VIN	
License Plate / State / Year P54MUR NJ 2024	License Type Passenger	3MZBN1U77HM126305	
Veh Year / Make / Model 2017 MAZ M3S		Veh Type Passenger Car	Veh Style 4 Door
		Veh Color Bk	

TOW / IMPOUND / REPOSSESSION INFORMATION				Status Date/Time
Type Impound	Hold YES	Inventory YES	Reason JOHNS LAW	03/03/2024 18:33
Date / Time Requested		Date/Time Arrived : : :		

Officer MARTIN, T. D.	Agency WALL TOWNSHIP POLICE DEPARTMENT	Case # 2024-00820
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Towed From	Phone #
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Tow Company	Phone #
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Towed To	Phone #
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Lien Holder	Phone #
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Notes Patrols drove the target vehicle into the impound lot due to the vehicle being parked at Wall Police Hq's. Johns Law.		
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RELEASE INFORMATION		Claim Ticket
Date/Time	Released By	

Released To		Relation	Phone #
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Notes			
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Wall Township Police Department

IMPOUNDED VEHICLE TRACKING FORM

Incident Date: 03/03/2024 Report #: 2024-00820

REGISTRATION:
PS4MUR

STATE:
NJ

N

MAKE:
MAZ

MODEL:
MAZ

MODEL:
MAZ

COLOR:
MAZ

BK

Reason for Vehicle Impound

<input checked="" type="checkbox"/> Driver Arrested	<input checked="" type="checkbox"/> Under Influence of Alcohol or Drugs	In possession of unlawful item (drugs, alcohol, weapon, etc.)
<input type="checkbox"/> Insurance Violation	<input type="checkbox"/> Warrant for Arrest for Operator	Violation of New Jersey or United States law
<input type="checkbox"/> Vehicle is Unsafe	<input type="checkbox"/> License or Endorsement Violation	Vehicle abandoned on roadway or in public area

Notice To Vehicle Owner / Operator

I have been advised by the Wall Township Police Department that the vehicle that I own, or operated, is being impounded for the reasons set forth by the undersigned officer. Furthermore, I have also been advised that an inventory of the contents of my vehicle will be taken and recorded and that I will be provided a copy of the inventory list upon request.

I understand that I have the right to refuse to have the contents of my vehicle inventoried. If I decline to permit the inventory to occur, I expressly waive any cause of action against the undersigned officer, the towing company and the Wall Township Police Department. Additionally, I understand that if I do not permit an inventory of the aforementioned vehicle, I am waiving my right to file any claims for damage to, or loss of, any and all contents in or on the vehicle against any aforementioned parties. I understand that I have the right to have any items removed from the vehicle prior to the inventory.

I request an inventory of the vehicle I was operating.

(Owner / Operator's Signature)

(Owner / Operator's Printed Name)

I DO NOT consent to an inventory of the vehicle I was operating and I waive any liability on the part of the arresting officer, towing agency, Wall Twp. Police Department, or the Township of Wall for any damage to any portion of the vehicle, and/or, any contents of the vehicle. I further waive any liability on the part of the arresting officer, impounding officer, Wall Twp. Police Department or the Township of Wall based upon any allegation that they failed to safeguard the vehicle or its contents.

Paige Finnegan

(Owner / Operator's Signature)

(Owner / Operator's Printed Name)

Vehicle Release Eligibility

Owner / Operator: To retrieve your vehicle, you must satisfy any of the conditions set forth by the impounding Officer below. Additionally, you must pay in full all associated costs to include towing, storage, and administrative fees. The registered owner or legally appointed representative must be present to claim the vehicle. Vehicles will ONLY be released during the regular business hours of the Records Section of the Wall Township Police Department. If the impounding Officer checked the "Vehicle WILL NOT be released..." box, your vehicle will not be released. In this case, you will be notified if the vehicle becomes available for release at a future time. For more information, please visit the Wall Township Police Department website at www.wallpolice.org.

<input type="checkbox"/> Vehicle may be released:	<input type="checkbox"/> During regular Records Section Business Hours (see website for details)
	<input checked="" type="checkbox"/> At the following Date / Time: 3/4/24 0900
<input type="checkbox"/> Vehicle may be released upon the following conditions:	<input type="checkbox"/> Proof of valid registration can be demonstrated (no photo copies)
	<input type="checkbox"/> Proof of valid insurance can be demonstrated (no photo copies)
	<input type="checkbox"/> Must be towed from impound lot by an authorized towing company
<input type="checkbox"/> Vehicle WILL NOT be released for the following reason(s):	<input type="checkbox"/> Vehicle is evidence in an ongoing police investigation
	<input type="checkbox"/> Vehicle is the subject of an in-process Search Warrant
	<input type="checkbox"/> Vehicle has been SEIZED for forfeiture proceedings under New Jersey law

Visit the Wall Police website at www.wallpolice.org to learn more about the requirements for vehicle release and associated costs

Officer's Notes and Inventory

<input type="checkbox"/> Keys enclosed	<input type="checkbox"/> Registration card enclosed	<input type="checkbox"/> Insurance card enclosed
Please shade any damaged areas on diagram to right and annotate any notes relevant to damage or inventory contents		
<p>Officer's Signature: </p>		Officer's Printed Name and Badge #: Ptl. Martin #210

Vehicle Release Information

Name: _____	Signature: _____
Address: _____	
Date / Time of Release: _____	Released By: _____
[(Storage Fee: \$30.00 /day) X (# of Days: _____) = \$ _____ Storage Fee Total] + [(Tow Fee: \$ _____) + (Service Fee: \$25.00)] = \$ _____ TOTAL	
Rev. 8-2011	

Court ID 1352	Prefix E24	Ticket Number 001410	WALL TOWNSHIP MUNICIPAL CT 2700 ALLAIRE RD WALL NJ 07719
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YOU ARE HEREBY SUMMONED TO APPEAR BEFORE THIS COURT TO ANSWER THIS COMPLAINT CHARGING YOU WITH THE OFFENSE LISTED:

Drivers License No: [REDACTED] State: NJ Expiration Date: 04/07/2024 Commercial License

THE UNDERSIGNED CERTIFIES THAT

PAIGE K FINNEGAN

Birth Date: [REDACTED]

Telephone: () -

Check if cell phone

Eyes: Blue

Height: 5'06"

Hispanic or Latinx? **0**

Sex: Female

Restrictions: D 0

Race:

MIDDLETOWN, NJ 07748-2835

Email: [REDACTED]

DID UNLAWFULLY (PARK) (OPERATE) A

License Plate No. P54MUR	Vehicle Make: MAZ	Year: 2017	Color: BK	Body Type: 4 Door
Plate State: NJ		Exp Date: 08/2024		
<input type="checkbox"/> Commercial Vehicle	<input type="checkbox"/> Omnibus	<input type="checkbox"/> Hazardous Materials	<input type="checkbox"/> Out of Service	

AND DID THERE AND THEN COMMIT THE FOLLOWING OFFENSE

39:4-50.14 OPER MV PERSON WHO HAS CONSUMED ALCOHOL WHILE

Date of Offense: 03/03/2024 Time: 06:58 PM

Other Offense Information Construction Zone Safe Corridor 65 MPH Zone
 Accident Prop. Damage Bodily Injury Death/Serious Bodily Injury
 Drugs Alcohol

Equipment: Operator: Operator's ID: Unit Code

Notes:

Location: Municipality: County: Mun. Code (Offense):
2700 ALLAIRE RD WALL TOWNSHIP MONMOUTH 1352

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.

03/03/2024

TYLER MARTIN

0210

Date

Electronic Signature

Officer ID

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

Court Date: 03/19/2024 Court Time: 09:00 AM

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 court date listed on this ticket. **Please confirm with 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. OFFENSE IS NOT PAYABLE OR COURT APPEARANCE REQUIRED

If the offense charged is not payable, or 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, 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 3 below).

3. ONLINE PLEA OPTIONS

Please visit www.NJMCdirect.com for information on how to resolve matters online without having to appear in court. You may be able to submit a request through the online Municipal Case Resolution system to, among other things, plead guilty or not guilty to the offense charged on this ticket or to submit a request for a lesser charge to the municipal prosecutor.

COURT APPEARANCE REQUIRED

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

www.NJMCdirect.com

NOTICE

Except for a parking ticket, a record of this conviction will be sent to the Motor Vehicle Commission (MVC) that issued your license. If you hold a commercial driver's license and you are convicted of two or more serious traffic violations, the MVC may, depending on your record, suspend your commercial driving privileges **even if the violations were committed in a non-commercial motor vehicle** For more information, visit the official MVC website at www.NJMVC.gov

PLEASE NOTIFY THE COURT OF DISABILITY ACCOMMODATION NEEDS



ADA
Americans with
Disabilities Act

ENSURING
AN OPEN, INDEPENDENT
JUSTICE



Court ID 1352	Prefix E24	Ticket Number 001409	WALL TOWNSHIP MUNICIPAL CT 2700 ALLAIRE RD WALL NJ 07719
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YOU ARE HEREBY SUMMONED TO APPEAR BEFORE THIS COURT TO ANSWER THIS COMPLAINT CHARGING YOU WITH THE OFFENSE LISTED:

Drivers License No: [REDACTED] State: NJ Expiration Date: 04/07/2024 Commercial License

THE UNDERSIGNED CERTIFIES THAT

PAIGE K FINNEGAN [REDACTED]	Birth Date: [REDACTED]	Telephone: () -	<input type="checkbox"/> Check if cell phone
	Eyes: Blue	Height: 5'06"	Hispanic or Latinx? 0
	Sex: Female	Restrictions: D 0	Race:

MIDDLETOWN, NJ 07748-2835

Email:

DID UNLAWFULLY (PARK) (OPERATE) A

License Plate No. P54MUR	Vehicle Make: MAZ	Year: 2017	Color: BK	Body Type: 4 Door
	Plate State: NJ	Exp Date: 08/2024		
	<input type="checkbox"/> Commercial Vehicle	<input type="checkbox"/> Omnibus	<input type="checkbox"/> Hazardous Materials	<input type="checkbox"/> Out of Service

AND DID THERE AND THEN COMMIT THE FOLLOWING OFFENSE

39:4-50 OPERATING UNDER INFLUENCE OF LIQUOR OR DRUGS

Date of Offense: 03/03/2024 Time: 06:58 PM

Other Offense Information Construction Zone Safe Corridor 65 MPH Zone
 Accident Prop. Damage Bodily Injury Death/Serious Bodily Injury
 Drugs Alcohol

Equipment: Operator: Operator's ID: Unit Code

Notes:

Location: Municipality: County: Mun. Code (Offense):
2700 ALLAIRE RD **WALL TOWNSHIP** **MONMOUTH** **1352**

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.

03/03/2024

TYLER MARTIN

0210

Date

Electronic Signature

Officer ID

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

Court Date: 03/19/2024 Court Time: 09:00 AM

1. PLEA OF NOT GUILTY

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NOTICE

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PLEASE NOTIFY THE COURT OF DISABILITY ACCOMMODATION NEEDS



Court ID 1352	Prefix E24	Ticket Number 001411	WALL TOWNSHIP MUNICIPAL CT 2700 ALLAIRE RD WALL NJ 07719
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YOU ARE HEREBY SUMMONED TO APPEAR BEFORE THIS COURT TO ANSWER THIS COMPLAINT CHARGING YOU WITH THE OFFENSE LISTED:

Drivers License No: [REDACTED] State: NJ Expiration Date: 04/07/2024 Commercial License

THE UNDERSIGNED CERTIFIES THAT

PAIGE K FINNEGAN [REDACTED]	Birth Date: [REDACTED]	Telephone: () -	<input type="checkbox"/> Check if cell phone
	Eyes: Blue	Height: 5'06"	Hispanic or Latinx? 0
	Sex: Female	Restrictions: D 0	Race:

MIDDLETOWN, NJ 07748-2835

Email:

DID UNLAWFULLY (PARK) (OPERATE) A

License Plate No. P54MUR	Vehicle Make: MAZ	Year: 2017	Color: BK	Body Type: 4 Door
	Plate State: NJ	Exp Date: 08/2024		
	<input type="checkbox"/> Commercial Vehicle	<input type="checkbox"/> Omnibus	<input type="checkbox"/> Hazardous Materials	<input type="checkbox"/> Out of Service

AND DID THERE AND THEN COMMIT THE FOLLOWING OFFENSE

39:4-50.2 CONSENT TO TAKE SAMPLES OF BREATH; RECORD

Date of Offense: 03/03/2024 Time: 06:58 PM

Other Offense Information	<input type="checkbox"/> Construction Zone	<input type="checkbox"/> Safe Corridor	<input type="checkbox"/> 65 MPH Zone
	<input type="checkbox"/> Accident	<input type="checkbox"/> Prop. Damage	<input type="checkbox"/> Bodily Injury
	<input type="checkbox"/> Drugs	<input type="checkbox"/> Alcohol	<input type="checkbox"/> Death/Serious Bodily Injury

Equipment: Operator: Operator's ID: Unit Code

Notes:

Location: 2700 ALLAIRE RD	Municipality: WALL TOWNSHIP	County: MONMOUTH	Mun. Code (Offense): 1352
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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.

03/03/2024

TYLER MARTIN

0210

Date

Electronic Signature

Officer ID

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

Court Date: 03/19/2024 Court Time: 09:00 AM

1. PLEA OF NOT GUILTY

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PLEASE NOTIFY THE COURT OF DISABILITY ACCOMMODATION NEEDS



ADA
Americans with
Disabilities Act

ENSURING
AN OPEN DOOR TO
JUSTICE



Court ID 1352	Prefix E24	Ticket Number 001412	WALL TOWNSHIP MUNICIPAL CT 2700 ALLAIRE RD WALL NJ 07719
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YOU ARE HEREBY SUMMONED TO APPEAR BEFORE THIS COURT TO ANSWER THIS COMPLAINT CHARGING YOU WITH THE OFFENSE LISTED:

Drivers License No: [REDACTED] State: NJ Expiration Date: 04/07/2024 Commercial License

THE UNDERSIGNED CERTIFIES THAT

PAIGE K FINNEGAN Birth Date: [REDACTED] Telephone: () - Check if cell phone
Eyes: Blue Height: 5'06" Hispanic or Latinx? **0**
Sex: Female Restrictions: D 0 Race:

MIDDLETOWN, NJ 07748-2835

Email:

DID UNLAWFULLY (PARK) (OPERATE) A

License Plate No. P54MUR	Vehicle Make: MAZ	Year: 2017	Color: BK	Body Type: 4 Door
	Plate State: NJ	Exp Date: 08/2024		
	<input type="checkbox"/> Commercial Vehicle	<input type="checkbox"/> Omnibus	<input type="checkbox"/> Hazardous Materials	<input type="checkbox"/> Out of Service

AND DID THERE AND THEN COMMIT THE FOLLOWING OFFENSE

39:4-50.4A REFUSAL TO SUBMIT TO CHEMICAL TEST; PENALTIES

Date of Offense: 03/03/2024 Time: 06:58 PM

Other Offense Information Construction Zone Safe Corridor 65 MPH Zone
 Accident Prop. Damage Bodily Injury Death/Serious Bodily Injury
 Drugs Alcohol

Equipment: Operator: Operator's ID: Unit Code

Notes:

Location: Municipality: County: Mun. Code (Offense):
2700 ALLAIRE RD **WALL TOWNSHIP** **MONMOUTH** **1352**

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.

03/03/2024

TYLER MARTIN

0210

Date

Electronic Signature

Officer ID

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

Court Date: 03/19/2024 Court Time: 09:00 AM

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 court date listed on this ticket. **Please confirm with 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. OFFENSE IS NOT PAYABLE OR COURT APPEARANCE REQUIRED

If the offense charged is not payable, or 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, 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 3 below).

3. ONLINE PLEA OPTIONS

Please visit www.NJMCdirect.com for information on how to resolve matters online without having to appear in court. You may be able to submit a request through the online Municipal Case Resolution system to, among other things, plead guilty or not guilty to the offense charged on this ticket or to submit a request for a lesser charge to the municipal prosecutor.

COURT APPEARANCE REQUIRED

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

www.NJMCdirect.com

NOTICE

Except for a parking ticket, a record of this conviction will be sent to the Motor Vehicle Commission (MVC) that issued your license. If you hold a commercial driver's license and you are convicted of two or more serious traffic violations, the MVC may, depending on your record, suspend your commercial driving privileges **even if the violations were committed in a non-commercial motor vehicle** For more information, visit the official MVC website at www.NJMVC.gov

PLEASE NOTIFY THE COURT OF DISABILITY ACCOMMODATION NEEDS



ADA
Americans with
Disabilities Act

ENSURING
AN EQUAL OPPORTUNITY FOR
JUSTICE



Court ID 1352	Prefix E24	Ticket Number 001413	WALL TOWNSHIP MUNICIPAL CT 2700 ALLAIRE RD WALL NJ 07719
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YOU ARE HEREBY SUMMONED TO APPEAR BEFORE THIS COURT TO ANSWER THIS COMPLAINT CHARGING YOU WITH THE OFFENSE LISTED:

Drivers License No. [REDACTED] State: NJ Expiration Date: 04/07/2024 Commercial License

THE UNDERSIGNED CERTIFIES THAT

PAIGE K FINNEGAN	Birth Date: [REDACTED]	Telephone: () -	<input type="checkbox"/> Check if cell phone
	Eyes: Blue	Height: 5'06"	Hispanic or Latinx? 0
	Sex: Female	Restrictions: D 0	Race:

MIDDLETOWN, NJ 07748-2835

Email:

DID UNLAWFULLY (PARK) (OPERATE) A

License Plate No. P54MUR	Vehicle Make: MAZ	Year: 2017	Color: BK	Body Type: 4 Door
	Plate State: NJ	Exp Date: 08/2024		
	<input type="checkbox"/> Commercial Vehicle	<input type="checkbox"/> Omnibus	<input type="checkbox"/> Hazardous Materials	<input type="checkbox"/> Out of Service

AND DID THERE AND THEN COMMIT THE FOLLOWING OFFENSE

39:4-96	RECKLESS DRIVING		
Date of Offense: 03/03/2024	Time: 06:58 PM		
Other Offense Information	<input type="checkbox"/> Construction Zone	<input type="checkbox"/> Safe Corridor	<input type="checkbox"/> 65 MPH Zone
	<input type="checkbox"/> Accident	<input type="checkbox"/> Prop. Damage	<input type="checkbox"/> Bodily Injury
	<input type="checkbox"/> Drugs	<input type="checkbox"/> Alcohol	<input type="checkbox"/> Death/Serious Bodily Injury
Equipment:	Operator:	Operator's ID:	Unit Code
Notes:			

Location: 2700 ALLAIRE RD	Municipality: WALL TOWNSHIP	County: MONMOUTH	Mun. Code (Offense): 1352
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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.

03/03/2024	TYLER MARTIN	0210
Date	Electronic Signature	Officer ID

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

Court Date: **03/19/2024** Court Time: **09:00 AM**

1. PLEA OF NOT GUILTY

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NOTICE

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