SUFFOLK COUNTY
TRAFFIC AND PARKING VIOLATIONS AGENCY

H. Lee Dennison Building
100 Veterans Memorial Highway
Hauppauge, New York 11788

CRIMINAL APPEAL

To commence an appeal under CPL §460.10 you may:

(1) serve and file a Notice of Appeal within 30 days from the date of sentence (CPL 460.10 (1)(a) & (b)) **AND** within sixty (60) days after the Appellant receives a transcript of the Court proceedings, must file with such Court an Affidavit of Errors. (CPL 460.10 (3)(a)) **OR**

(2) file and serve an Affidavit of Errors only, within 30 days from the date of sentence.

Appealing by Notice of Appeal and Affidavit of Errors:

- ☐ Complete an **ORIGINAL** Notice of Appeal and make two (2) copies.
- ☐ Serve one copy of the Notice of Appeal upon the **Prosecution** of the S.C.T.P.V.A. *(service must be made by someone who is NOT a party to the action and is over the age of 18)*
- ☐ Complete the Affidavit of Service
- ☐ File the **ORIGINAL** Notice of Appeal along with the Affidavit of Service with the Clerk of the S.C.T.P.V.A – the Clerk will time stamp your remaining copy and return to you upon filing.
- ☐ You will need to purchase the "Transcript" (minutes) of the court proceedings. To have a transcript produced from an electronically recorded matter, you may contact one of the transcription services listed in the accompanying attachment. Once transcription services have been retained, the transcriber MUST contact the Appeals Clerk at the S.C.T.P.V.A. via email at: tpva.appeals@suffolkcountyny.gov. The transcriber MUST include in their email:
  (1) the name of motorist (2) case number (3) date of trial and (4) their contact information.
- ☐ Within sixty (60) days after you have received a transcript of the Court proceedings, you must complete an **ORIGINAL** Affidavit of Errors and make two (2) copies. (An Affidavit of Errors is an affidavit setting forth the alleged errors or defects in the proceedings which are the subject of your appeal)
- ☐ File the **ORIGINAL** Affidavit of Errors with the Clerk of the S.C.T.P.V.A.

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Hauppauge, New York 11788

- ☐ Serve a *copy* of the Affidavit of Errors to the **Prosecution** of the S.C.T.P.V.A. within three (3) days of filing the original *(service must be made by someone who is NOT a party to the action and is over the age of 18)* (CPL 460.10 (3)(b))
- ☐ Complete the Affidavit of Service
- ☐ File the Affidavit of Service with the Clerk of the S.C.T.P.V.A.

Appealing by Affidavit of Errors Only

- ☐ Complete an **ORIGINAL** Affidavit of Errors and make two (2) copies. (An Affidavit of Errors is an affidavit setting forth the alleged errors or defects in the proceedings which are the subject of your appeal)
- ☐ File the **ORIGINAL** Affidavit of Errors with the Clerk of the S.C.T.P.V.A.
- ☐ Serve a *copy* of the Affidavit of Errors to the **Prosecution** of the S.C.T.P.V.A. within three (3) days of filing the original *(service must be made by someone who is NOT a party to the action and is over the age of 18)*
- ☐ Complete the Affidavit of Service
- ☐ File the Affidavit of Service with the Clerk of the S.C.T.P.V.A.
- ☐ **An Affidavit of Errors must be filed within 30 days from the date of sentence**
- ☐ You will need to purchase the "Transcript" (minutes) of the court proceedings. To have a transcript produced from an electronically recorded matter, you may contact one of the transcription services listed in the accompanying attachment. Once transcription services have been retained, the transcriber MUST contact the Appeals Clerk at the S.C.T.P.V.A. via email at: tpva.appeals@suffolkcountyny.gov. The transcriber MUST include in their email:
  (1) the name of motorist (2) case number (3) date of trial and (4) their contact information.

Written instructions for perfecting an appeal are available from the Appellate Term, Clerk's Office located at 141 Livingston Street, 15th Floor, Brooklyn, New York, 11201. You may refer to the Court's website for procedures, forms, instructions, deadlines and other information at nycourts.gov (Intermediate Appellate Courts→ Appellate Term 2nd Dept) or call the Clerk of the Court at (347) 401-9580.

SUFFOLK COUNTY TRAFFIC & PARKING VIOLATIONS AGENCY
COUNTY OF SUFFOLK : STATE OF NEW YORK

The People of the State of New York,

NOTICE OF APPEAL

- against -

Case No: _____

_____
(fill in name) Defendant.

PLEASE TAKE NOTICE, that the above named Defendant, hereby appeals to the Appellate Term of the Supreme Court for the Ninth and Tenth Judicial Districts from the Judgment of Conviction of the Suffolk County Traffic and Parking Violations Agency, County of Suffolk, rendered by Judicial Hearing Officer _____ on the _____ day of _____
(name of Judge)
20____, for a conviction of the Vehicle Traffic Law Sections(s): _____

Sentencing Defendant to fine(s), surcharge(s) and [ ] points.
The appeal is taken from each and every part thereof.

Dated: _____

_____
(Defendant/Appellant's Signature)

Address: _____

_____

Tel No. _____

To:

Prosecution
Suffolk County Traffic & Parking Violations Agency
100 Veterans Memorial Highway
Hauppauge, NY 11788

Clerk of the Court
Suffolk County Traffic & Parking Violations Agency
100 Veterans Memorial Highway
Hauppauge, NY 11788

SUFFOLK COUNTY TRAFFIC & PARKING VIOLATIONS AGENCY
COUNTY OF SUFFOLK : STATE OF NEW YORK

The People of the State of New York,

AFFIDAVIT OF SERVICE

- against -

Case No: _____

_____
(fill in name) Defendant.

STATE OF NEW YORK
COUNTY OF _____ ss.:

1. _____, being duly sworn, deposes and says, that
(name of person serving papers)
Deponent is NOT a party to the action, is over 18 years of age and resides at the following address:

_____.

2. On _____, 20_____, I served the within Notice of Appeal upon the Prosecution of the Suffolk County Traffic & Parking Violations Agency at 100 Veterans Memorial Highway, Hauppauge, New York 11788 by:

(choose one)
[ ] PERSONAL SERVICE – personally delivering a true copy of the same to

_____, _____.
(name of individual served) (title)

[ ] FIRST CLASS MAIL – by depositing a true copy of the same in a post-paid properly addressed envelope at a post office under the exclusive care and custody of the United States Postal Service within the State of New York

Dated: _____ _____
(Signature)

Sworn to before me this _____ day

of _____, 20____

_____
Notary Public

SUFFOLK COUNTY TRAFFIC & PARKING VIOLATIONS AGENCY
COUNTY OF SUFFOLK : STATE OF NEW YORK

The People of the State of New York,

AFFIDAVIT OF ERRORS

- against -

Case No: _____

_____
(fill in name) Defendant.

STATE OF NEW YORK
COUNTY OF SUFFOLK ss.:

I, _____, being duly sworn, depose and say:
(fill in name)

1. I am the Defendant / Appellant and I am appealing my judgment of conviction rendered by the Suffolk County Traffic and Parking Violations Agency on _____.
(date of conviction)

2. A judgment of conviction was rendered by District Court Judicial Hearing Officer _____ _____.
(name of Judge)

3. Appellant was convicted of violating Vehicle and Traffic Law Section(s): _____ _____

4. I have attached a general outline of the errors which I believe occurred at the Suffolk County Traffic & Parking Violations Agency relative to my conviction.

5. I believe these errors warrant a reversal of my conviction and/or remand of this matter to the Suffolk County Traffic & Parking Violations Agency for further proceedings.

Dated: _____

_____
(Defendant/Appellant's Signature)

Sworn to before me this _____ day

of _____, 20_____

_____
Notary Public

Address: _____

_____

Tel No. _____

SUFFOLK COUNTY TRAFFIC & PARKING VIOLATIONS AGENCY
COUNTY OF SUFFOLK : STATE OF NEW YORK

The People of the State of New York,

AFFIDAVIT OF SERVICE

- against -

Case No: _____

_____
(fill in name) Defendant.

STATE OF NEW YORK
COUNTY OF _____ ss.:

1. _____, being duly sworn, deposes and says, that
(name of person serving papers)
deponent is NOT a party to the action, is over 18 years of age and resides at the following address:

_____.

2. On _____, 20_____, I served the within Affidavit of Errors upon the Prosecution of the Suffolk County Traffic & Parking Violations Agency at 100 Veterans Memorial Highway, Hauppauge, New York 11788 by:

(choose one)
[ ] PERSONAL SERVICE – personally delivering a true copy of the same to

_____, _____.
(name of individual served) (title)

[ ] FIRST CLASS MAIL – by depositing a true copy of the same in a post-paid properly addressed envelope at a post office under the exclusive care and custody of the United States Postal Service within the State of New York

Dated: _____ _____
(Signature)

Sworn to before me this _____ day

of _____, 20____

_____
Notary Public

S.C.T.P.V.A.

APPROVED LIST OF TRANSCRIBERS

REVISED 3/19/18

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Pugliese Court Reporting & Transcription Service **Digital SONY BM-246** P.O. Box 994 Riverhead, NY 11901 Contact Person: Judy Pugliese Phone #631-727-7221 (Riverhead Courts) Phone #631-878-8355 (Central Islip & Nassau Courts) Fax # 631-874-2581 Email: jamp916@aol.com **and** 4 Saddlebrook Lane Manorville, NY 11949	**Reynolds Reporting, Inc** **Digital** P.O. Box 1543 Mattituck, NY 11952 Contact Person: Gaitri Reynolds Phone #631-839-6153 Fax # 631-298-1310 Email: greynolds@renoldsreporting.com
Alan Rubin, CSR **Digital SONY BM-246** 5 Arlene Street Farmingville, NY 11738 Contact Person: Patricia Rubin Phone & Fax #631-331-0233 Email: patriciabrubin@yahoo.com	**Stenotec** **Digital SONY BM-246** 10 Oakcrest Ave Middle Island, NY 11953 Contact Person: Carol Potts Phone #631-345-2537
Bandy Words **Digital** 21 Shang Lee Drive Manorville, NY 11949 Contact Person: Janine Doran Phone #631-399-3515 Cell # 631-525-8101 Email: doranedele@optonline.net	