



IDA Appointment of Project Operator or Agent For Sales Tax Purposes

The industrial development agency or authority (IDA) must submit this form within 30 days of the appointment of a project operator or agent, whether appointed directly by the IDA or indirectly by the operator or another agent.

For IDA use only

Name of IDA New York City Industrial Development Agency			IDA project n	IDA project number (use OSC numbering system for projects after 1998) 600 1 1 7 0 0 3 A	
Street address				Telephone number	
One Liberty Plaza				(212) 619-5000 State ZIP code	
New York				NY 10006	
Name of IDA project operator or agent Gabrielli Hutchinson LLC		Y in the box if ppointed by the IDA	X Employer i	dentification or social security number	
Street address 153-20 South Conduit Avenue			elephone number 516) 931-7915	Primary operator or agent?	
City Jamaica				State ZIP code NY 11434	
Name of project Gabrielli Truck Sales Ltd. Project			urpose of project (see a	instructions)	
Street address of project site 3501 Hutchinson Avenue					
City Bronx				State ZIP code NY 10475	
Description of goods and services intended to be exem from New York State and local sales and use taxes	pted Materials, goods,	personal propert	y and fixtures, sur	oplies, machinery,	
and equipment, and freight, installation, mainten-	ance and repair service	es at the Project :	site, as described		
in more detail in the Lease Agreement between I	NYCIDA and the Project	ot Operator.			
Date project operator or agent appointed (mm/dd/yy) 06/28/17	Date project operato agent status ends (n	or or nm/dd/yy) 12/01/2	22	Mark an X in the box if this is an extension to an original project:	
Estimated value of goods and services that will be exer and local sales and use tax:	mpt from New York State	Estimated value of provided:	New York State and	d local sales and use tax exemption	
\$5,665,625		\$502,824.00			
Certification: I certify that the above statements are to with the knowledge that willfully providing false or fraud Law, punishable by a substantial fine and possible jail information entered on this document.	dulent information with this	s document may co	institute a felony or	other crime under New York State	
Print name of officer or employee signing on behalf of the IDA Emily Marcus		Print title Deputy Executive Director			
Signature Cyruly, Marcu	10		Date 12/20/2021	Telephone number (212) 619-5000	
	Instruc	tions			

Filing requirements

An IDA must file this form within 30 days of the date the IDA appoints any project operator or other person as agent of the IDA, for purposes of extending any sales and compensating use tax exemptions

The IDA must file a separate form for each person it appoints as agent, whether directly or indirectly, and regardless of whether the person is the primary project operator or agent. If the IDA authorizes a project operator or agent to appoint other persons as agent of the IDA, the operator or agent making such an appointment must advise the IDA that it has done so, so that the IDA can file a form within 30 days of the date of the new agent's appointment. The IDA should not file this form for a person hired to work on an IDA project if that person is not appointed as agent of the IDA. The IDA need not file this form if the IDA does not extend any sales or use tax exemption benefits for the project.

If an IDA modifies a project, such as by extending it beyond its original completion date, or by increasing or decreasing the amount of sales and use tax exemption benefits authorized for the project, the IDA must, within 30 days of the change, file a new form with the new information.

If an IDA amends, revokes, or cancels the appointment of an agent, or if an agent's appointment becomes invalid for any reason, the IDA must, within 30 days, send a letter to the address below for filing this form, indicating that the appointment has been amended, revoked, or cancelled, or is no longer valid, and the effective date of the change. It should attach to the letter a copy of the form it originally filed. The IDA need not send a letter for a form that is not valid merely because the "Completion date of project" has

Construction

- Retail trade

- Manufacturing

- Other (specify)

- Wholesale trade

Purpose of project

For Purpose of project, enter one of the following:

- Services
- Agriculture, forestry, fishing
- Finance, insurance, real estate
- Transportation, communication, electric, gas, sanitary services

Mailing Instructions

Mail completed form to

NYS TAX DEPARTMENT **IDA UNIT** WA HARRIMAN CAMPUS **ALBANY NY 12227**

The Commissioner of Taxation and Finance may collect and maintain personal information pursuant to the New York State Tax Law, including but not limited to, sections 5-a, 171, 171-a, 287, 308, 429, 475, 505, 697, 1096, 1142, and 1415 of that Law, and may require disclosure of social security numbers pursuant to 42 USC 405(c)(2)(C)(0).

This information will be used to determine and administer tax liabilities and, when authorized by law, for certain tax offset and exchange of tax information programs as well as for any other lawful purpose.

Information concerning quarterly wages paid to employees is provided to certain state agencies for purposes of fraud prevention, support enforcement, evaluation of the offictiveness of certain employment and training programs and other purposes authorized by law.

Failure to provide the required information may subject you to civil or criminal penalties, or both under the Tax Law.

This information is maintained by the Manager of Document Management, NYS Tax Department W A Harriman Campus, Albany NY 12227; telephone (518) 457-5181.

Need help?



Internet access: www.tax.nv.gov (for information, forms, and publications)



Sales Tax Information Center:

(518) 485-2889

To order forms and publications:

(518) 457-5431



speech disabilities using a TTY):

(518) 485-5082

Text Telephone (TTY) Hotline (for persons with hearing and