



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

IDA information

Name of IDA New York City Industrial Development Agency			IDA project number (use OSC numbering system for projects after 1998) 600106029A		
Street address 1 Liberty Plaza			Telephone number (212) 619-5000		
City New York	State NY	ZIP code 10006	Email address (optional)		

Project operator or agent information

Name of IDA project operator or agent Turner Construction Company		Mark an X in the box if directly appointed by the IDA: <input type="checkbox"/>	Employer identification or Social Security number [REDACTED]		
Street address 66 Hudson Boulevard East		Telephone number ()		Primary operator or agent? Yes <input type="checkbox"/> No <input type="checkbox"/>	
City New York	State NY	ZIP code 10001	Email address (optional)		

Project information

Name of project Queens Ballpark Stadium Project a/k/a Queens Ballpark Company LLC					
Street address of project site 41 Seaver Way					
City Flushing	State NY	ZIP code 11368	Email address (optional) Bsciacca@nymets.com		
Purpose of project Renovation of Clover Club, Team Store, and Clubhouse.					

Description of goods and services intended to be exempted from New York State and local sales and use taxes All goods and services provided by Turner Construction Company for the projects list above (all hard costs).					
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Date project operator or agent appointed (mmddyy) 010924	Date project operator or agent status ends (mmddyy) 123146	Mark an X in the box if this is an extension to an original project: <input type="checkbox"/>
Estimated value of goods and services that will be exempt from New York State and local sales and use tax: 26,013,840.00		Estimated value of New York State and local sales and use tax exemption provided: 2,308,728.30

Certification: I certify that the above statements are true, complete, and correct, and that no material information has been omitted. I make these statements with the knowledge that willfully providing false or fraudulent information with this document may constitute a felony or other crime under New York State Law, punishable by a substantial fine and possible jail sentence. I also understand that the Tax Department is authorized to investigate the validity of any information entered on this document.

Print name of officer or employee signing on behalf of the IDA Noah Schumer		Print title Deputy Executive Director	
Signature 	Date 2/7/24	Telephone number (212) 213-3711	