New York State Department of Taxation and Finance

ST-60

IDA Appointment of Project Operator or Agent For Sales Tax Purposes

The industrial development agency or authori whether appointed directly by the IDA or indir			tment of a project	ct operator or agent	Ę.	or IDA use o	nlv
Name of IDA		gent.	IDA project nun	nber (use OSC numb		for projects after 1	
New York City Industrial Street address	Development Agency			Tele	ephone Numb	er	
110 William Street			L'arrent	12) 619-5	000		
City New York		(4)			State NY	ZIP code 10038	
Name of IDA project operator or agent		Mark an X in the box if	[v]	Employer identification		l security number	- Orași
Eclectic Properties Holding LLC Street address](directly appointed by the II	DA: X	mher	Primary one	rator or agent?	
620 West 26th Street			212-645-88		Yes Yes	□ No	
City	THE RESIDENCE OF THE PARTY OF T	***************************************	-	***************************************	State	ZIP code	-
New York Name of project			Purpose of pro	ject (see instruction	NY	10001	-
Eclectic/ Encore Properties, Inc.			prop rental				
Street address of project site 47-51 33rd Street							
City			**************************************		State	ZIP code	-
Long Island City					NY	0	
Description of goods and services intende from New York State and local sales and							
	rnish & equip a prop renta	al compnay business	s. See attach	ed Sales Tax I	Letter		
							1000000
Date project operator or agent appointed (mm/dd/yy)	07/26/13 Date project operat agent status ends		07/26/15	hweight action and	in the box if to an original	Street Street Carrier	
Estimated value of goods and services that w		the state of the s	ew York State a				-
and local sales and use tax:		provided:					
\$ 100,000.00		\$ 8,875.	00				
Certification: I certify that the above stateme with the knowledge that willfully providing fals							20-40
Law, punishable by a substantial fine and pos							
information entered on this document.	1						
Print name of officer or employee signing on but Jeffrey Lee	enall of the IDA	Print 1	cutive Direct	or			
Signature		ILACC	Date		ephone num	ber	
			7	/26/13 (2)	12) 619-5	000	
(1	Inst	tructions					
Filing Requirements	no to an american source	Mailing Ins	structions				
An IDA must file this form within 30 days of the any project operator or appoints a person as a		Mail completed form to: NYS TAX DEPARTMENT					
extending any sales and compensating use ta	The second secon	IDA UNIT					
The IDA must file a separate form for each pe		W A HARRIMAN CAMPUS					
whether directly or indirectly, and regardless of primary project operator or agent. If the IDA a		NY NY 12227					
agent to appoint other persons as agent of the		Privacy notification The Commissioner of Taxation and Finance may collect and maintain personal information pursuar					
making such an appointment must advise the that the IDA can file a form within 30 days of t	to the New York	to the New York State Tax Law, including but not limited to, sections 5-a, 171-a, 287, 308, 429, 475, 505, 697, 1096, 1142, and 1415 of that Law, and may require disclosure of social securit					
appointment. The IDA should not file this form	numbers pursua	numbers pursuant to 42 USC 405(c)[2)(C)(i).					
on an IDA project if that person is not appoint IDA need not file this form if the IDA does not	law, for certain t	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.					
exemption benefits for the project.	onterio trij strico or doo tax	purpose. Information con	cerning quarterly w	rages paid to employe	es is provided	to certain state agenc	ies
If an IDA modifies a project, such as by extend	ding it beyond its original	for purposes of employment an	fraud prevention, s d training programs	upport enforcement, e s and other purposes a	valuation of the authorized by It	e effectiveness of cert aw,	lain
completion date, or by increasing or decreasing use tax exemption benefits aurhorized for the		Failure to provide the required information may subject you to civil or criminal penalties, or both, under the Tax Law.					
30 days of the change, file a new form with the		This information	is maintained by t	he Manager of Docum 12227; telephone (51		ent, NYS Tax Departm	ent,
If an IDA amends, revokes, or cancels the app	pointmen of an agent, or if an	WARailinaire	Jampos, Albany IVI	12227, telephone (51	0,437-3101.		
agent's appointment becomes invalid for any i 30 days, send a letter to the address below fo		Need I	nelp?				
thet the appointment has been amended, revo							7
longer valid, and the effective date of the char letter a copy of the form it originally filed. The	-			ess: www.ta			
a form that is not valid merely because the "C			(for inform	ation, forms, a	ind public	ations)	J
passed.			los Tay Inf-	motion Conta-		(E4D) 405 000	0
Purpose of project	2.2	#		mation Center:		(518) 485-288	
For Purpose of project, enter one of the for- - Services	ollowing: - Construction	То	order forms	and publications	d.	(518) 457-543	11
- Agriculture, forestry, fishing	 Wholesale trade 	Te Te	xt Telephone	(TTY) Hotline			
 Finance, insurance, real estate Transportation, communication, 	 Retail trade Manufacturing 			with hearing and	Í.		
electric, gas, sanitary services	- Other (specify)		speech disab	ilities using a TT	Y):	(518) 485-508	2