New York State Department of Taxation and Finance



# **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, For IDA use only whether appointed directly by the IDA or indirectly by the operator or another agent. IDA project number (use OSC numbering system for projects after 1998) Name of IDA New York City Industrial Development Agency Street address Telephone Number 110 William Street (212) 619-5000 ZIP code New York 10038 NY Name of IDA project operator or agent Mark an X in the box if Employer identification or social security number X Walsh Electrical Contracting, Inc. directly appointed by the IDA: Street address Telephone Number Primary operator or agent? □ No 76 Midland Ave 718-351-3399 Yes 7IP code State Staten Island 10306 NY Name of project Purpose of project (see instructions, Walsh Electrical Contracting, Inc. manufacturing Street address of project site 15 Newark Avenue City State ZIP code Staten Island 10302 NY Description of goods and services intended to be exempted from New York State and local sales and use taxes Renovating, furnishing and equipping a manufacturing facility. Date project operator Date project operator or Mark an X in the box if this is an 10/28/13 06/30/39 or agent appointed (mm/dd/yy) agent status ends (mm/dd/yy) extension to an original project: Estimated value of goods and services that will be exempt from New York State Estimated value of New York State and local sales and use tax exemption and local sales and use tax: provided 26,625.00 500,000,00 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

#### Instructions

### **Filing Requirements**

Jeffrey Lee

Signature

information entered on this document.

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

Print name of officer or employee sighing on behalf of the IDA

The IDA must file a separate form for each person it appoints as agent, whether directly or indirectly, and regardless of whetherthe 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 aurhorized for the project, the IDA must, within 30 days of the change, file a new form with the new informaiton.

If an IDA amends, revokes, or cancels the appointmen 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 thet 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 passed.

#### 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
- Construction - Wholesale trade
- Retail trade
- Manufacturing
- Other (specify)

# Mailing Instructions

Print Title

Mail completed form to:

NYS TAX DEPARTMENT **IDA UNIT** W A HARRIMAN CAMPUS **ALBANY NY 12227** 

**Executive Director** 

Date

10/28/13

#### Privacy notification

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)(i).

Telephone number

(212) 619-5000

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

Information concerning quarterly wages paid to employees is provided to certain state agencies for purposes of fraud prevention, support enforcement, evaluation of the effectiveness 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.ny.gov

(for information, forms, and publications)

Sales Tax Information Center:

(518) 485-2889

To order forms and publications:

(518) 457-5431



# Text Telephone (TTY) Hotline

(for persons with hearing and speech disabilities using a TTY):

(518) 485-5082