



# 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<br>New York City Industrial Development Agency |             |                   | IDA project number (use OSC numbering system for projects after 1998)<br>600124004A |
| Street address<br>1 Liberty Plaza                          |             |                   | Telephone number<br>( )   |
| City<br>New York   | State<br>NY | ZIP code<br>10006 | Email address (optional)  |

### Project operator or agent information

|  |             |   |   |
|--|-------------|---|---|
| Name of IDA project operator or agent<br>BIR Restoration Inc |             | Mark an X in the box if directly appointed by the IDA:<br><input checked="" type="checkbox"/> | Employer identification or Social Security number<br>[REDACTED]                                   |
| Street address<br>1936 Hempstead Tpke, Suite 341             |             | Telephone number<br>( 718 ) 932-2613  | Primary operator or agent?<br>Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> |
| City<br>East Meadow  | State<br>NY | ZIP code<br>11554   | Email address (optional)<br>artstonerp@yahoo.com  |

### Project information

|   |             |                   |   |
|---|-------------|-------------------|---|
| Name of project<br>VM 4401 LLC Project  |             |                   |   |
| Street address of project site<br>44-01 11th Street   |             |                   |   |
| City<br>Long Island City  | State<br>NY | ZIP code<br>11101 | Email address (optional)<br>j.lewis@vorea.com |
| Purpose of project<br><p>The Project will seek to attract manufacturing jobs to the area and serve as a home for the creative class at affordable rental rates. The building will be designed to meet market demand for smaller suites, dividing the floor plates into small individual units and introducing special design features within the building. The goal is to create an incubator type environment, with tenants in the building working within the same industries, forming connections by working alongside each other. The Sponsors are seeking to create a safe, attractive environment for tenants while maintaining the features that make the building unique and special.</p> |             |                   |   |

|   |   |  |  |
|---|---|--|--|
| Description of goods and services intended to be exempted from New York State and local sales and use taxes<br><p>The project agent will purchase materials, goods, personal property, and fixtures that will become integral components of the subject property. The project agent will purchase materials, goods, and supplies to be substantially consumed during construction or renovation of the Facility, and leases of machinery and equipment for temporary use during these activities.</p> |   |  |  |
| Date project operator or agent appointed (mmddyy)<br>120224   | Date project operator or agent status ends (mmddyy)<br>063026 | Mark an X in the box if this is an extension to an original project:<br><input type="checkbox"/> |  |
| Estimated value of goods and services that will be exempt from New York State and local sales and use tax:<br>5,336,254.00  |   | Estimated value of New York State and local sales and use tax exemption provided:<br>476,255.00  |  |

**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 information entered on this document.

|  |  |                                   |                                      |
|--|--|-----------------------------------|--------------------------------------|
| Print name of officer or employee signing on behalf of the IDA<br>Emily Marcus Falda |  | Print title<br>Executive Director |                                      |
| Signature<br>  |  | Date<br>12/2/24                   | Telephone number<br>( 212 ) 619-5000 |

## Instructions

### When to file

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

### Requirements to file

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 should not file this form if they do 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, they must, within 30 days of the change, file a new form with the new information.

### If the information on this form changes

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, within 30 days, must 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. They must attach to the letter a copy of the form it originally filed. The IDA should not send a letter for a form that is not valid merely because the *Completion date of project* has passed.

### Mailing instructions

Mail completed form to:

NYS TAX DEPARTMENT  
IDA UNIT  
W A HARRIMAN CAMPUS  
ALBANY NY 12227-0866

**Private delivery services** – See Publication 55,  
*Designated Private Delivery Services.*

### Privacy notification

New York State Law requires all government agencies that maintain a system of records to provide notification of the legal authority for any request for personal information, the principal purpose(s) for which the information is to be collected, and where it will be maintained. To view this information, visit our website, or, if you do not have Internet access, call and request Publication 54, *Privacy Notification*. See *Need help?* for the Web address and telephone number.

### Need help?



Visit our website at [www.tax.ny.gov](http://www.tax.ny.gov)

- get information and manage your taxes online
- check for new online services and features

### Telephone assistance

|  |  |
|--|--|
| Sales Tax Information Center:                  | 518-485-2889                                 |
| To order forms and publications:               | 518-457-5431                                 |
| Text Telephone (TTY) or TDD<br>equipment users | Dial 7-1-1 for the<br>New York Relay Service |