



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

Form fields for IDA information: Name of IDA (New York City Industrial Development Agency), Street address (110 William Street), City (New York), Telephone Number ((212) 619-5000), IDA project number, etc.

Form fields for project operator information: Date project operator or agent appointed (11/06/11), Date project operator or agent status ends (06/30/18), Estimated value of goods and services that will be exempt from New York State and local sales and use tax (\$ 940,000.00).

Certification section: I certify that the above statements are true, complete, and correct, and that no material information has been omitted. Includes signature of Howard Spieler, Assistant Secretary, dated 8/8/13.

Instructions

Filing Requirements

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

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...

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the address below for filing this form, indicating that the appointment has been amended, revoked, or cancelled, or is no longer valid, and the effective date of the change.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.

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

Mail completed form to: NYS TAX DEPARTMENT, IDA UNIT, W A HARRIMAN CAMPUS, ALBANY NY 12227

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, 1095, 1142, and 1415 of that Law; and may require disclosure of social security numbers pursuant to 42 USC 405(c)(2)(C)@.

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 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





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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

Form fields for IDA information: Name of IDA (New York City Industrial Development Agency), Street address (110 William Street), City (New York), Telephone Number (212) 619-5000, Name of IDA project operator or agent (Bogopa Service Corp.), Mark an X in the box if directly appointed by the IDA, Employer identification or social security number (11-3504577), Street address (650 Fountain Ave.), Telephone Number (718) 346-6500, Primary operator or agent? (Yes), City (Brooklyn), State (NY), ZIP code (11208), Name of project (2011 Bogopa Service Corp. Project -), Purpose of project (Construction), Street address of project site (21 Manhattan Ave.), City (Brooklyn), State (NY), ZIP code ( ), Description of goods and services intended to be exempted from New York State and local sales and use taxes (See attached Sales Tax Letter).

Form fields for dates and values: Date project operator or agent appointed (11/06/11), Date project operator or agent status ends (06/30/18), Mark an X in the box if this is an extension to an original project (X), Estimated value of goods and services that will be exempt from New York State and local sales and use tax (\$ 940,000.00), Estimated value of New York State and local sales and use tax exemption provided (\$ 83,425.00).

Certification section: 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 (Howard Spieler), Print Title (Assistant Secretary), Date (8/2/13), Telephone number (212) 312-4254.

Instructions

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Mailing Instructions: Mail completed form to: NYS TAX DEPARTMENT, IDA UNIT, W A HARRIMAN CAMPUS, ALBANY NY 12227. 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, 1086, 1142, and 1415 of that Law; and may require disclosure of social security numbers pursuant to 42 USC 405(c)(2)(C)(i). 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 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.

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