

New York State Tax Commission TAX:APPEALS BUREAU

State Campus Albany, New York 12227 John J. Sollecito, Director (518) 457-1723

January 11, 1984

Petro Plus Tobacco Ltd. and Jay L. Fill, President 189 Pinewood Rd. Hartsdale, NY 10530

Gentlemen:

Please take notice of the Default Order of the State Tax Commission enclosed herewith.

Please take further notice that pursuant to Section(s) 1138 of the Tax Law, any proceeding in court to review this decision must be commenced within 4 months from the date of this notice.

Inquiries concerning the computation of tax due or refund allowed in accordance with this decision may be addressed to the undersigned at the above address.

Very truly yours,

Joseph rvwaty Supervisor of Tax Conferences

cc: Taxing Bureau's Representative

STATE OF NEW YORK STATE TAX COMMISSION

In the Matter of the Petition	:	
of	:	
Petro Plus Tobacco Ltd.	:	DEFAULT ORDER
and Jay L. Fill, President	:	83-C-36
for Redetermination of a Deficiency or Revision of	:	
a Determination or Refund of	:	
Sales & Use Tax under Article 28 & 29	:	
of the Tax Law for the Period 12/1/79 - 12/31/81.	:	

Petitioner(s) Petro Plus Tobacco Ltd. and Jay L. Fill, President filed a petition for redetermination of a deficiency or revision of a determination or refund of Sales & Use Tax under Article 28 & 29 of the Tax Law for the Period 12/1/79 - 12/31/81. File No. 43093.

A pre-hearing conference on the petition was scheduled before Frank Fleury, at the offices of the State Tax Commission, 99 Church Street, Second Floor, White Plains, New York 10601 on Thursday, September 22, 1983 at 1:00 p.m. Notice of said pre-hearing conference was given to petitioner(s). Petitioner(s) did not appear at the pre-hearing conference. A default has been duly noted.

Now on motion of the State Tax Commission, it is

ORDERED that the petition of Petro Plus Tobacco Ltd. and Jay L. Fill, President be and the same is hereby denied.

> DEFAULT ORDER ADOPTED BY THE STATE TAX COMMISSION ALBANY, NEW YORK JANUARY 11, 1984

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RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED-NOT FOR INTERNATIONAL MAIL

	(See Reverse)	
	Street and No. You LFIII 169 Prna woo P.Q., State and ZIP Code	<u>d</u> 6 (053)
	Postage	\$
	Cartified Fee	
	Special Celivery Fee	
	Restricted Delivery Fee	
	Return Receipt Showing to whom and Data Delivered	
2	Return Receipt Showing to whom, Date, and Address of Delivery	
b. 198	TOTAL Postage and Fees	\$
PS Form 3800, Feb. 1982	Postmark or Date	

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