



New York State Tax Commission
TAX APPEALS BUREAU

State Campus
Albany, New York 12227

John J. Sollecito, Director
(518) 457-1723

May 1, 1985

Mohammed A. Hag
c/o Felipe Latman
2150 East 27th Street
Brooklyn, NY 11229

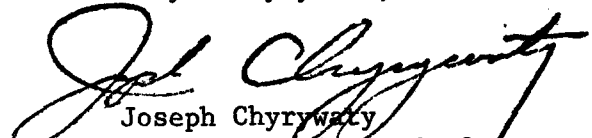
Dear Mr. Hag:

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 Chyrywaty
Supervisor of Tax Conferences

cc: Petitioner's Representative
Kamal Aped
966 Manor Rd.
Staten Island, NY 10314
Taxing Bureau's Representative

STATE OF NEW YORK

STATE TAX COMMISSION

In the Matter of the Petition	:	
of	:	
Mohammed A. Hag	:	<u>DEFAULT ORDER</u>
	:	85-C-7
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 8/31/80 - 5/31/83.	:	

Petitioner(s) Mohammed A. Hag 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 8/31/80 - 5/31/83. File No. 46947.

A pre-hearing conference on the petition was scheduled before Robert Healey, at the offices of the State Tax Commission, 141 Livingston Street - 8th Floor, Brooklyn, New York 11201 on Wednesday, January 9, 1985 at 2:00 p.m. Notice of said pre-hearing conference was given to petitioner(s) and the representative of 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 Mohammed A. Hag be and the same is hereby denied.

DEFAULT ORDER
ADOPTED BY THE STATE TAX COMMISSION
ALBANY, NEW YORK
MAY 1, 1985

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RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED
NOT FOR INTERNATIONAL MAIL

(See Reverse)

PS Form 3800, Feb. 1982
★ U.S.G.P.O. 1983-403-517

Sent to <i>Kamal aped</i>	
Street and No. <i>966 Manor Rd.</i>	
P.O., State and ZIP Code <i>Staten Island, NY 10314</i>	
Postage	\$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to whom and Date Delivered	
Return receipt showing to whom, Date, and Address of Delivery	
TOTAL Postage and Fees	\$
Postmark or Date	

P 693 166 388

RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED
NOT FOR INTERNATIONAL MAIL

(See Reverse)

PS Form 3800, Feb. 1982
★ U.S.G.P.O. 1983-403-517

Sent to <i>Mohammed A. Hag</i>	
Street and No. <i>2150 E. 27th St.</i>	
P.O., State and ZIP Code <i>Brooklyn, NY 11229</i>	
Postage	\$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to whom and Date Delivered	
Return receipt showing to whom, Date, and Address of Delivery	
TOTAL Postage and Fees	\$
Postmark or Date	