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

January 9, 1985

Nelson's Auto Care Center, Inc. 1845 Webster Ave. Bronx, NY 10457

#### 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.

ruly yours

Joseph Chyrywaty

Supervisor of Tax Conferences

Petitioner's Representative Frederick P. Altman 1009 East 163rds Street Bronx, NY 10459

Taxing Bureau's Representative

#### STATE TAX COMMISSION

In the Matter of the Petition

of

Nelson's Auto Care Center, Inc.

DEFAULT ORDER

84-C-38

:

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 4/80 - 3/83.

Petitioner(s) Nelson's Auto Care Center, Inc. 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 4/80 - 3/83. File No. 45139.

A pre-hearing conference on the petition was scheduled before Dennis A.

Adelman, at the offices of the State Tax Commission, Two World Trade Center,

Room 65-51, New York, New York 10047 on Tuesday, September 25, 1984 at 9:00

a.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 Nelson's Auto Care Center, Inc. be and the same is hereby denied.

DEFAULT ORDER
ADOPTED BY THE STATE TAX COMMISSION
ALBANY, NEW YORK
JANUARY 9, 1985

## P 440 977 436

### RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED— NOT FOR INTERNATIONAL MAIL

(See Reverse)

1	Sent to  HELOTICE P. A  Street and No.  100 9 East 16 36  P.O., State and 21P Cgde  BRANCY, A)Y 1045	Hmax eds St
	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	
PS Form 3800, Feb. 1982	TOTAL Postage and Fees	\$
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3800	·	
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# P 440 977 435

### RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED— NOT FOR INTERNATIONAL MAIL

(See Reverse)

	Sent to SON'S Auto Cake Street and No. Webster Au	e Etr.	Ja
	BROWK, AVY 104	\$ 7 \$	
ŀ	Postage Certified Fee		
	Special Delivery Fee		
	Restricted Delivery Fee		-
	Return Receipt Showing to whom and Date Delivered		
2	Return Receipt Showing to whom,		
. 198	TOTAL Postage and Fees	\$	
PS Form 3800, Feb. 1982	Postmark or Date		