STATE OF NEW YORK STATE TAX COMMISSION ALBANY, NEW YORK 12227

PAUL B. COBURN
SECRETARY
Telephone: (518) 457-6162

May 29, 1985

Norman Vought d/b/a Noran Enterprises, Inc. 236 Carfield St. Freeport, NY 11520

Dear Mr. Vought:

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

Please take further notice that pursuant to Section(s) 1138 and/or 1139 of the Tax Law, any proceeding in court to review this decision must be commenced within 4 months from the date of this notice.

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

Very truly yours,

PAUL B. COBURN
SECRETARY TO THE
STATE TAX COMMISSION

cc: Petitioner's Representative
Steve Pasvankias
634 City Island Ave.
Bronx, NY 10464
Taxing Bureau's Representative

In the Matter of the Petition

of

Norman Vought : DEFAULT ORDER

d/b/a Noran Enterprises, Inc. : 85-P-12

:

for Redetermination of a Deficiency or Revision of :
a Determination or Refund of Sales & Use Tax under :
Article(s) 28 & 29 of the Tax Law for the Period :

11/30/80.

Petitioner(s) Norman Vought, d/b/a Noran Enterprises, Inc. filed a petition for redetermination of a deficiency or revision of a determination or refund of Sales & Use Tax under Article(s) 28 & 29 of the Tax Law for the Period 11/30/80. File No. 45670

Under Section 601.5 of the State Tax Commission Rules of Practice and Procedure, a notice was served on the representative of the petitioner(s) to file a perfected petition. Notice to file the perfected petition was sent to the representative's last known address. Petitioner(s) failed to file a perfected petition. A default has been duly noted.

Now on motion of the Secretary to the State Tax Commission, it is

ORDERED that the petition of Norman Vought, d/b/a Noran Enterprises, Inc.
be and the same is hereby denied.

DEFAULT ORDER
ADOPTED BY THE STATE TAX COMMISSION
ALBANY, NEW YORK
MAY 29, 1985

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RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED NOT FOR INTERNATIONAL MAIL

(See Reverse)

* U.S.G.P.O. 1983-403-517	Stave Pasvankias Street 34 40. City Island ave		
.0.19	Pa State and ZIP Godey 10464		
.S.G.F	Postage	\$	
1 ★	Certified Fee		
	Special Delivery Fee		
	Restricted Delivery Fee		
	Return Receipt Showing to whom and Date Delivered		
1982	Return receipt showing to whom, Date, and Address of Delivery		
Feb. 1982	TOTAL Postage and Fees	\$	
Form 3800,	Postmark or Date		
Forn			

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RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED NOT FOR INTERNATIONAL MAIL

(See Reverse)

★ U.S.G.P.O. 1983-403-517	Street and Dio nan Entry In BD. State and ZIP Code Carfield At Postage Certified Fee Certified Fee		
	Special Delivery Fee		
	Restricted Delivery Fee Return Receipt Showing to whom and Date Delivered		
1982	Return receipt showing to whom, Date, and Address of Delivery		
Feb.	TOTAL Postage and Fees	S	
PS Form 3800, Feb. 1982	Postmark or Date		