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

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

June 11, 1986

Beirne Bros. Service Center, Inc. 3300 Hempstead Turnpike Levittown, New York 11756

Re: File No. 50354/53880

Gentlemen:

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

Please take further notice that pursuant to Section(s) 1138/1139 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: Taxing Bureau's Representative

Petitioner's Representative: Eugene T. White 257 Middle Country Road Smithtown, NY 11787 STATE OF NEW YORK -STATE TAX COMMISSION

In the Matter of the Petition	:	• •
of	:	
Beirne Bros. Service Center, Inc.	:	DEFAULT ORDER
	:	86-P-13
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 9/1/80 - 11/30/83.	:	

Petitioner(s) Beirne Bros. Service Center, 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 9/1/80 -11/30/83. File No. 50354/53880

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 Beirne Bros. Service Center, Inc. be and the same is hereby denied.

> DEFAULT ORDER ADOPTED BY THE STATE TAX COMMISSION ALBANY, NEW YORK JUNE 11, 1986

+				
U.S.G.P.O. 1985-480-794	P 319 373 35 RECEIPT FOR CERTIFIE NO INSURANCE COVERAGE PROV NOT FOR INTERNATIONAL MAI (See Reverse) Server and No. Street and No. Street and No. Street and No. State and ZIP code MULTING Postage	D MAIL	P 319 373 RECEIPT FOR CERTIF NO INSURANCE COVERAGE P NOT FOR INTERNATIONAL (See Reverse) Sept to Street and NO Street and NO P.O Statsband ZIP 255 Postage	IED MAIL ROVIDED MAIL
* U.S	Certified Fee	*	Certified Fee	· ·
1	Special Delivery Fee		Special Delivery Fee	
	Restricted Delivery Fee		Restricted Delivery Fee	
	Return Receipt showing to whom and Date Delivered		Return Receipt showing to whom and Date Delivered	
1985	Return Receipt showing to whom. Date, and Address of Delivery	a 1985	Return Receipt showing to whor Date, and Address of Delivery	n.
June	TOTAL Postage and Fees	s number of the second	TOTAL Postage and Fees	S
3800,	Postmark or Date	000 F	Postmark or Date	
PS Form	-	E G S S		•
	Fold at has over top of anyelong	to the right	Fold at line over top of envelo	ope to the right

of the return address.

3

Ċ