



New York State Tax Commission
TAX APPEALS BUREAU

W.A. Harriman Campus
Albany, New York 12227

June 11, 1986

Bridge View Nursing Home
143-10 20th Ave.
Whitestone, NY 11357

Re: File No. 56496

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,

A handwritten signature in cursive script, reading "Joseph Chyrywaty".

Joseph Chyrywaty
Supervisor of Tax Conferences

cc: Taxing Bureau's Representative

STATE OF NEW YORK

STATE TAX COMMISSION

In the Matter of the Petition :
of :
Bridge View Nursing Home : DEFAULT ORDER
: 86-C-11
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 1/1/79-5/31/80. :

Petitioner(s) Bridge View Nursing Home 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 1/1/79-5/31/80. File No. 56496.

A pre-hearing conference on the petition was scheduled before Dennis A. Adelman, at the offices of the State Tax Commission, 97-77 Queens Blvd., 3rd Floor Rego Park, New York 11374 on Thursday, March 20, 1986 at 2:00 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 Bridge View Nursing Home be and the same is hereby denied.

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

P 319 372 372

RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED
NOT FOR INTERNATIONAL MAIL

(See Reverse)

★ U.S.G.P.O. 1985-480-794

PS Form 3800, June 1985

Sent to <i>Bridge View Nursing Home</i>	
Street and No. <i>143-10 20th Ave.</i>	
P.O., State and ZIP Code <i>Whitestone, Ny 11357</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	