

Department of Taxation and Finance

## **IDA Appointment of Project Operator or Agent** For Sales Tax Purposes



The industrial development agency or authority (IDA) must submit this form within 30 days of the appointment of a project operator or agent, whether appointed directly by the IDA or indirectly by the operator or another agent.

For IDA use only

**IDA** information

Name of IDA		IDA project number (use OSC numbering system for projects after 1998		
Onondaga County Industrial De	evelopment Agency	3101-21-15B		
Street address			Telephone number	
333 West Washington Street, S	uite 130	(315) 435-3770		
City	State	ZIP code	Email address (optional)	
Syracuse	NY	13209		

### Project operator or agent information

Name of IDA project operator or agent			Mark an X in th	he box if directly	Employer ide	entification or Social Se	curity number
245 Commerce LLC			appointed by t	he IDA:			
Street address			1	Telephone number		Primary operator or a	gent?
245 Commerce Boulevard				(315)437-418	9	Yes 🔀	No 🗌
City	State	ZIP cod	e	Email address (optic	nal)		
Liverpool	NY	13088	3				

## **Project information**

Name of project				
245 Commerce LLC / Immediate M	ailing Services, Inc.	Project		
Street address of project site				
4575 Buckley Road				
City	State	ZIP code	Email address (optional)	
Clay	NY	13088		
Purpose of project				

Facility to be used as warehousing and office space for an integrated service provider for conversational artificial intelligence and omnichannel communications.

Description of goods and services intended to be exempted from New York State and local sales and use taxes

Construction materials, machinery and equipment necessary for the completion of renovation and reconstruction of the facility or to be incorporated into or installed in the facility and all furnitures, fixtures, equipment, apparatus and other tangible property to be used in connection with the facility

Date project operator or agent appointed (mmddyy)	Date project operator or agent status ends (mmddyy)	ASUN ZII	Mark an <b>X</b> in the box if this is an extension to an original project:	, 🗆
Estimated value of goods and exempt from New York State a		Estimated value of New Yor use tax exemption provided		38,000.00

<b>Certification:</b> I certify that the above statements are true, complete, and correct, and that no material information has been omitted. I make these statements with the knowledge that willfully providing false or fraudulent information with this document may constitute a felony or other crime under New York State Law, punishable by a substantial fine and possible jail sentence. I also understand that the Tax Department is authorized to investigate the validity of any information entered on this document.							
Print name of officer or employee signing on behalf of the IDA	Print name of officer or employee signing on behalf of the IDA Print title						
Robert M. Petrovich Executive Director							
Signature Doc 11	Date	Telephone number					
ON X F		( 315 ) 435-3770					



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## IDA Appointment of Project Operator or Agent For Sales Tax Purposes



# The industrial development agency or authority (IDA) **must** submit this form within **30 days** of the appointment of a project operator or agent, whether appointed directly by the IDA or indirectly by the operator or another agent.

For IDA use only

88,000.00

Name of IDA			IDA project number (use OSC numbering system for projects after 1998
Onondaga County Industrial	Development Agency		3101-21-15B
Street address		1	Telephone number
333 West Washington Street	, Suite 130		(315) 435-3770
City	State	ZIP code	Email address (optional)
Syracuse	NY	13209	

### Project operator or agent information

Name of IDA project operator or agent			Mark an X in t	ne box if directly	Employer ide	entification or Social Se	curity number
Immediate Mailing Services, Inc.			appointed by t	he IDA:	$\mathbf{X}$		
Street address				Telephone numbe	r	Primary operator or a	gent?
245 Commerce Boulevard				(315)437-4	189	Yes 🔀	No 🗌
City	State	ZIP cod	)	Email address (op	otional)		
Liverpool	NY	13088					

## **Project information**

Name of project					
245 Commerce LLC / I	mmediate Mailing Sei	rvices, Inc. I	Project		
Street address of project site					
4575 Buckley Road					
City		State	ZIP code	Email address	(optional)
Clay		NY	13088		
Purpose of project		8			
Facility to be used a	s warehousing and of	ffice space f	or an integrate	d service provider f	or conversational artificial intelligence and
omnichannel comm	unications.				
Description of goods and ser					
Construction materials	, machinery and equip	oment nece	ssary for the co	mpletion of renovation	tion and reconstruction of the facility or to be
incorporated into or ins	talled in the facility ar	nd all furnitu	res, fixtures, e	quipment, apparatu	s and other tangible property to be used in
connection with the fac	liity				
Date project operator or agent appointed (mmddyy)	051022	Date project agent status	operator or ends <i>(mmddyy)</i>	051024	Mark an <b>X</b> in the box if this is an extension to an original project:

Estimated value of goods and services that will be exempt from New York State and local sales and use tax:	Estimated value of New York use tax exemption provided:	

<b>Certification:</b> I certify that the above statements are true, complete, and correct, and that no material information has been omitted. I make these statements with the knowledge that willfully providing false or fraudulent information with this document may constitute a felony or other crime under New York State Law, punishable by a substantial fine and possible jail sentence. I also understand that the Tax Department is authorized to investigate the validity of any information entered on this document.							
Print name of officer or employee signing on behalf of the IDA Print title							
Robert M. Petrovich Executive Director							
Signature DSMD 17	Date	Telephone number ( 315 ) 435-3770					