

MARTHA M STONE
SABINE COUNTY
TAX ASSESSOR/COLLECTOR
P. O. BOX 310 HEMPHILL, TX. 75948
(409) 787-2257

January 7, 2019

Sabine County
Hemphill, Texas 75948

Re: Refund Request

Dear Commissioner,

Sabine County Tax Office has a refund request in the amount of \$ 1440.98 due to James Belk. The paperwork is attached for the request.

Sincerely,

Martha M Stone
Sabine County
Tax Assessor/Collector

VOL 3-P PG 425

SABINE COUNTY TAX OFFICE
 P.O. BOX 310
 HEMPHILL, TX 75948
 PHONE: (409)787-2257
 FAX: (409)787-4753

2016 TAX STATEMENT

IF PAID IN	*ADDN FEES	AMOUNT DUE
JAN OF 2019	0.00	-5,582.87
FEB OF 2019	0.00	-5,582.87
MAR OF 2019	0.00	-5,582.87
APR OF 2019	0.00	-5,582.87
MAY OF 2019	0.00	-5,582.87
JUN OF 2019	0.00	-5,582.87

* ADD'L FEES MAY INCLUDE, BUT ARE NOT LIMITED TO: LATE FILING, PENALTIES, INTERESTS, ATTORNEY, OR ANY APPLICABLE COST OR FEE

PENALTY & INTEREST IF PAID AFTER JANUARY 31ST						
FEB	MAR	APR	MAY	JUN	* JUL	
07%	09%	11%	13%	15%	18%	

* IF NOT PAID PRIOR TO JULY 1ST, ADDITIONAL ATTORNEY FEES MAY APPLY

BELK JAMES
 8220 GRAVEL HILL RD
 HEMPHILL, TX 75948

PROPERTY IDENTIFICATION		LEGAL DESCRIPTION	VALUATION		SUMMARY			
PROP ID: R000158491		31,32,33 WARRS HARBORLIGHT MOBILE HOME/BOAT IMPROVEMENT	65,980	APPRAISED		119,980		
GEOID: 28040-00000-00000-000000		DOCK ACRES: 0.341 **SUIT FILED** FILE DT: LAND	54,000	LESS CAP		-2,470		
DV 100% DISABLED		5/10/2018 NUM: CV1801013		ASSESSED		117,510		
YEAR	TAXING ENTITIES	EXEMPTIONS	TAXABLE	TAX RATE	TAX AMT	TAX DUE	*ADDN FEES	TOTAL DUE
2016	01 COUNTY		117,510	0 .428826	0.00	-514.51	0.00	-514.51
2016	31 HEMPHILL ISD (FROZEN 2016)		117,510	0 1.040000	0.00	-1,247.79	0.00	-1,247.79
2016	60 HOSPITAL DT		117,510	0 .195091	0.00	-234.07	0.00	-234.07
2017	01 COUNTY		123,270	0 .428826	0.00	-528.61	0.00	-528.61
2017	31 HEMPHILL ISD (FROZEN 2016)		123,270	0 1.040000	0.00	-1,282.01	0.00	-1,282.01
2017	60 HOSPITAL DT		123,270	0 .2027914	0.00	-249.98	0.00	-249.98
2018	01 COUNTY		123,270	0 .428826	0.00	-397.86	0.00	-397.86
2018	31 HEMPHILL ISD (FROZEN 2016)		123,270	0 1.040000	0.00	-897.21	0.00	-897.21
2018	60 HOSPITAL DT		123,270	0 .2074461	0.00	-230.83	0.00	-230.83
						-5,582.87	\$0.00	-5,582.87

NOTE: PLEASE APPLY A DVD 100 PERCENT EXEMPTION FOR 2016 AND ISSUE A NEW STATEMENT FOR TAXES OWED OR FOR A REFUND

For real property, state for the current tax year and each of the preceding five tax years: (A) The appraised and taxable value of the property; (B) The total tax rate for the unit; (C) The amount of taxes imposed on the property by the unit; and (D) The difference, expressed as a pct increase or decrease, as applicable, in the amount of taxes imposed on the property by the unit compared to the amount imposed by the preceding tax year; (12) For real property, state the differences, expressed as a pct increase or decrease, as applicable, in the following for the current tax year as compared to the fifth tax year before that tax year: (A) The appraised and taxable value of the property; (B) The total tax rate for the unit; and (C) The amount of taxes imposed on the property by the unit; and (13) Include any other info required by the controller.

ENTITY	FIVE YEARS	APPR %CHG	TXBL %CHG	RATE %CHG	TAX %CHG	TAX %CHG	TAX %CHG
01		N/A	-100	0.561	-100	N/A	
31		N/A	-100	0	-100	N/A	
60		N/A	-100	2.584	-100	N/A	

ENTITY	2013 APPRAISED VALUE	2014 APPRAISED VALUE	2015 APPRAISED VALUE	2016 APPRAISED VALUE	2017 APPRAISED VALUE
01	89560	89450	90810	90810	90810
31	90360	90240	81830	81830	81830
60	105360	105240	106830	106830	106830

IF YOU ARE 65 YEARS OF AGE OR OLDER OR ARE DISABLED, AND YOU OCCUPY THE PROPERTY DESCRIBED IN THIS DOCUMENT AS YOUR RESIDENCE HOMESTEAD, YOU SHOULD CONTACT THE APPRAISAL DISTRICT REGARDING ANY ENTITLEMENT YOU MAY HAVE TO A POSTPONEMENT IN THE PAYMENT OF THESE TAXES.
 IF THE PROPERTY DESCRIBED IN THIS DOCUMENT IS YOUR RESIDENCE HOMESTEAD, YOU SHOULD CONTACT THE TAX OFFICE REGARDING A RIGHT YOU MAY HAVE TO ENTER INTO AN INSTALLMENT AGREEMENT DIRECTLY WITH THE TAX OFFICE FOR THE PAYMENT OF THESE TAXES.
 1. IF YOUR MORTGAGE COMPANY PAYS YOUR TAXES, THEN MAIL THIS STATEMENT TO THEM.
 2. FOR OVER 65 OR DISABLED HOMESTEAD ONLY, 1/4 PAYMENT OPTION IS AVAILABLE. YOU MUST PROVIDE WRITTEN NOTICE OF INTENT TO PAY BY INSTALLMENT BEFORE THE INITIAL DELINQUENCY DATE, AND PAY 1/4 OF THE BASE TAX AMOUNT BEFORE FEB 1ST AND THREE EQUAL INSTALLMENTS BEFORE APRIL 1, JUNE 1, AND AUGUST 1 TO AVOID PENALTY AND INTEREST.
 FOR ONLINE PAYMENT VISIT WWW.GOVPAY.NET/SABINE-COUNTY-TX_WEB_PAYMENT

RETURN BOTTOM PORTION WITH PAYMENT

CHECK IF INFORMATION BELOW HAS CHANGED

BELK JAMES
 8220 GRAVEL HILL RD
 HEMPHILL, TX 75948

MAKE PAYABLE AND REMIT PAYMENT TO

SABINE COUNTY TAX OFFICE
 P.O. BOX 310
 HEMPHILL, TX 75948

David Smith

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APR OF 2019	0.00	-5,582.87
MAY OF 2019	0.00	-5,582.87
JUN OF 2019	0.00	-5,582.87

TOTAL AMOUNT ENCLOSED \$



OFFICE USE ONLY 55R158491 1/7/2019 1
 2018 | R000158491 | 0000-558287 |

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