

**MAHOPAC CENTRAL - SCHOOL 2024-2025**

FISCAL YEAR: 7/1/2024 to 6/30/2025	WARRANT DATE: 8/22/2024	STATE AID: SCHL \$40,168,985
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**MAKE CHECKS PAYABLE TO:**

Kathleen Kraus, Tax Receiver  
 P.O. BOX 887  
 MAHOPAC, NY 10541

**BANK**

**BILL**

**TAX MAP NUMBER**

4077

372000 76.19-1-37

**TO PAY IN PERSON:**

Carmel Town Hall  
 Mon-Fri 8:30 AM - 4:30 PM  
 Sat 9:00 AM - 12:00 PM  
 9/7, 9/14, 9/21, 9/28 only

**PROPERTY INFORMATION:**

ACCOUNT#: 176805  
 DIMENSION: 136.00 X 140.00  
 ROLL SECTION: 1 CLASS: 210 - 1 Family Res  
 LOCATION: 18 Fox Hill Rd  
 MUNICIPALITY: Carmel  
 SCHOOL: 372001 Mahopac Central  
 FULL MARKET VALUE: As of 7/1/23 539,900  
 UNIFORM % OF VALUE: 100  
 LAND ASSESSMENT: 88,900  
 TOTAL ASSESSMENT: 539,900

**PROPERTY OWNER:**

JUREK JANUSZ  
 JUREK JOHN  
 18 FOX HILL RD  
 MAHOPAC, NY 10541

EXEMPTION	VALUE	FULL VALUE	TAX PURPOSE
BAS STAR	46,600	46,600	S

APPLY FOR THIRD PARTY NOTIFICATION BY: 07/15/25

**PROPERTY TAX PAYERS BILL OF RIGHTS:**

If you feel the assessment on your property is too high, you have the right to file a grievance to lower it for future tax bills. For information, please contact your assessor for the booklet "How to File a Complaint on Your Assessment" and to inquire about exemptions. Any reduction in assessment will NOT be reflected on this bill. The filing date for this assessment has passed.

LEVY DESCRIPTION	TOTAL TAX LEVY	% CHANGE FROM PRIOR YEAR LEVY	TAXABLE VALUE OR UNITS	RATE	TAX AMOUNT
SCHOOL TAX	95,027,287	0.2	539,900.00	18.918754	10,214.24
LIBRARY TAX	2,676,642	-0.1	539,900.00	0.560706	302.73
STAR Savings					-881.62

This year's STAR exemption benefit cannot exceed last year's benefit.

**INSTALLMENT PAYMENT OPTION**

Paid From	Paid To	Tax Amount	Penalty	Surcharge	Total Due
<b>2nd Installment</b>					
PAY TO COUNTY	11/01/2024 03/15/2025	4,817.68		192.70	5,010.38

**MAHOPAC CENTRAL - SCHOOL 2024-2025**

MUNICIPALITY: Carmel  
 SCHOOL: 372001 MAHOPAC CENTRAL  
 LOCATION: 18 FOX HILL RD

**RECEIVER'S STUB**

Please consult the payment schedule above for any additional penalty you may owe. Please write your Bill Number on your check.

**BILL NUMBER: 4077**  
 Tax Map: 372000 76.19-1-37  
 BANK:

**TOTAL BASE TAX: \$9,635.35**  
**AMOUNT ENCLOSED:**

\$

CHECK THIS BOX TO REQUEST A RECEIPT

RECEIVER STUB MUST BE RETURNED WITH PAYMENT

Printed On: 01/18/2025 At: 07:44:45 PM