

## Fill in this information to identify the case:

Debtor United Site Services, Inc.

United States Bankruptcy Court for the: \_\_\_\_\_ District of New Jersey  
(State)Case number 25-23630

## Modified Official Form 410

## Proof of Claim

04/25

Read the instructions before filling out this form. This form is for making a claim for payment in a bankruptcy case. Do not use this form to make a request for payment of an administrative expense. Make such a request according to 11 U.S.C. § 503.

**Filets must leave out or redact** information that is entitled to privacy on this form or on any attached documents. Attach redacted copies or any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements. **Do not send original documents;** they may be destroyed after scanning. If the documents are not available, explain in an attachment.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

Fill in all the information about the claim as of the date the case was filed. That date is on the notice of bankruptcy (Form 309) that you received.

## Part 1: Identify the Claim

1. Who is the current creditor?	Dallas County		
	Name of the current creditor (the person or entity to be paid for this claim) _____		
	Other names the creditor used with the debtor _____		
2. Has this claim been acquired from someone else?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. From whom? _____		
3. Where should notices and payments to the creditor be sent?	Where should notices to the creditor be sent?	Where should payments to the creditor be sent? (if different)	
	See summary page		
	Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)		
	Contact phone <u>2148800089</u>	Contact phone _____	
	Contact email <u>John.Turner@lgbss.com</u>	Contact email _____	
	Uniform claim identifier (if you use one): _____		
4. Does this claim amend one already filed?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Claim number on court claims registry (if known) _____ Filed on _____ MM / DD / YYYY		
5. Do you know if anyone else has filed a proof of claim for this claim?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Who made the earlier filing? _____		



**Part 2: Give Information About the Claim as of the Date the Case Was Filed**

6. Do you have any number you use to identify the debtor?	<input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor: <u>EXHIBIT</u>
7. How much is the claim?	\$ <u>211089.74</u>	Does this amount include interest or other charges?
		<input checked="" type="checkbox"/> No
		<input type="checkbox"/> Yes. Attach statement itemizing interest, fees, expenses, or other charges required by Bankruptcy Rule 3001(c)(2)(A).
8. What is the basis of the claim?	Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card. Attach redacted copies of any documents supporting the claim required by Bankruptcy Rule 3001(c). Limit disclosing information that is entitled to privacy, such as health care information.	
	<u>AD VALOREM TAXES</u>	
9. Is all or part of the claim secured?	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. The claim is secured by a lien on property. <b>Nature or property:</b> <input type="checkbox"/> Real estate: If the claim is secured by the debtor's principle residence, file a <i>Mortgage Proof of Claim Attachment</i> (Official Form 410-A) with this <i>Proof of Claim</i> . <input type="checkbox"/> Motor vehicle <input checked="" type="checkbox"/> Other. Describe: <u>SEE ATTACHED EXHIBITS</u>	
	<b>Basis for perfection:</b> <u>Secured by Tax Lien §§ 32.01 and 32.05</u> Attach redacted copies of documents, if any, that show evidence of perfection of a security interest (for example, a mortgage, lien, certificate of title, financing statement, or other document that shows the lien has been filed or recorded.)	
	<b>Value of property:</b> <u>\$ SEE ATTACHED EXHIBITS</u> <b>Amount of the claim that is secured:</b> <u>\$ 211089.74</u> <b>Amount of the claim that is unsecured:</b> <u>\$ _____</u> (The sum of the secured and unsecured amount should match the amount in line 7.)  <b>Amount necessary to cure any default as of the date of the petition:</b> <u>\$ 211089.74</u>	
	<b>Annual Interest Rate</b> (when case was filed) <u>12</u> % <input checked="" type="checkbox"/> Fixed <input type="checkbox"/> Variable	
10. Is this claim based on a lease?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. <b>Amount necessary to cure any default as of the date of the petition.</b> <u>\$ _____</u>	
11. Is this claim subject to a right of setoff?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Identify the property: _____	



<p><b>12. Is all or part of the claim entitled to priority under 11 U.S.C. § 507(a)?</b></p> <p>A claim may be partly priority and partly nonpriority. For example, in some categories, the law limits the amount entitled to priority.</p>	<p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes. <i>Check all that apply:</i></p>	<p><b>Amount entitled to priority</b></p>
	<p><input type="checkbox"/> Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).</p>	\$ _____
	<p><input type="checkbox"/> Up to \$3,800* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use. 11 U.S.C. § 507(a)(7).</p>	\$ _____
	<p><input type="checkbox"/> Wages, salaries, or commissions (up to \$17,150*) earned within 180 days before the bankruptcy petition is filed or the debtor's business ends, whichever is earlier. 11 U.S.C. § 507(a)(4).</p>	\$ _____
	<p><input type="checkbox"/> Taxes or penalties owed to governmental units. 11 U.S.C. § 507(a)(8).</p>	\$ _____
	<p><input type="checkbox"/> Contributions to an employee benefit plan. 11 U.S.C. § 507(a)(5).</p>	\$ _____
	<p><input type="checkbox"/> Other. Specify subsection of 11 U.S.C. § 507(a)(____) that applies.</p>	\$ _____

**Part 3: Sign Below**

**The person completing  
this proof of claim must  
sign and date it.  
EBRP 2011(b)**

If you file this claim electronically, FRBP 5005(a)(3) authorizes courts to establish local rules specifying what a signature is.

**A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both.**

18 U.S.C. §§ 152, 157, and 3571.

*Check the appropriate box:*

- I am the creditor.
- I am the creditor's attorney or authorized agent.
- I am the trustee, or the debtor, or their authorized agent. Bankruptcy Rule 3004.
- I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.

I understand that an authorized signature on this *Proof of Claim* serves as an acknowledgement that when calculating the amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.

I have examined the information in this *Proof of Claim* and have reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on date 01/13/2026  
MM / DD / YYYY

/s/John Turner  
Signature

**Print the name of the person who is completing and signing this claim:**

Name	<u>John Turner</u>		
	First name	Middle name	Last name

Title Attorney TXBN 00788563

Company LINBARGER GOGGAN BLAIR AND SAMPSON, LLP

844

Contact phone Email



# Verita (KCC) ePOC Electronic Claim Filing Summary

For phone assistance: Domestic (877) 634-7164 | International (424) 236-7220

<b>Debtor:</b> 25-23630 - United Site Services, Inc.		
<b>District:</b> District of New Jersey, Trenton Division		
<b>Creditor:</b> Dallas County Linebarger Goggan Blair and Sampson, LLP c/o John Kendrick Turner 3500 Maple Avenue, Suite 800 Dallas, TX, 75219 United States <b>Phone:</b> 2148800089 <b>Phone 2:</b> <b>Fax:</b> <b>Email:</b> John.Turner@lgb.com	<b>Has Supporting Documentation:</b> Yes, supporting documentation successfully uploaded	
	<b>Related Document Statement:</b>	
	<b>Has Related Claim:</b> No	
	<b>Related Claim Filed By:</b>	
	<b>Filing Party:</b> Authorized agent	
<b>Other Names Used with Debtor:</b>	<b>Amends Claim:</b> No <b>Acquired Claim:</b> No	
<b>Basis of Claim:</b> AD VALOREM TAXES	<b>Last 4 Digits:</b> Yes - EXHI	<b>Uniform Claim Identifier:</b>
<b>Total Amount of Claim:</b> 211089.74	<b>Includes Interest or Charges:</b> No	
<b>Has Priority Claim:</b> No	<b>Priority Under:</b>	
<b>Has Secured Claim:</b> Yes: 211089.74 <b>Amount of 503(b)(9):</b> No <b>Based on Lease:</b> No <b>Subject to Right of Setoff:</b> No	<b>Nature of Secured Amount:</b> Other Describe: SEE ATTACHED EXHIBITS	
	<b>Value of Property:</b> SEE ATTACHED EXHIBITS	
	<b>Annual Interest Rate:</b> 12%, Fixed	
	<b>Arrearage Amount:</b> 211089.74	
	<b>Basis for Perfection:</b> Secured by Tax Lien §§ 32.01 and 32.05	
	<b>Amount Unsecured:</b>	
	<b>Submitted By:</b> John Turner on 13-Jan-2026 9:23:48 a.m. Pacific Time	
<b>Title:</b> Attorney TXBN 00788563		
<b>Company:</b> LINEBARGER GOGGAN BLAIR AND SAMPSON, LLP		

Fill in this information to identify the case:

Debtor 1 **UNITED SITE SERVICES, INC.**

Debtor 2  
(Spouse, if filing)

United States Bankruptcy Court for the: **District of NJ**

Case number **25-23630 - Chapter 11**

## Official Form 410

## Proof of Claim

04/25

Read the instructions before filling out this form. This form is for making a claim for payment in a bankruptcy case. Do not use this form to make a request for payment of an administrative expense. Make such a request according to 11 U.S.C. § 503.

**Filers must leave out or redact** information that is entitled to privacy on this form or on any attached documents. Attach redacted copies of any documents that support the claim such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages and security agreements. **Do not send original documents**; they may be destroyed after scanning. If the documents are not available, explain in an attachment.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both 18 U. S. C §§ 152, 157 and 3571.

Fill in all the information about the claim as of the date the case was filed. That date is on the notice of bankruptcy (Form 309) that you received.

### Part 1: Identify the Claim

1. Who is the current creditor?	<u>Dallas County</u> Name of the current creditor (the person or entity to be paid for this claim)  Other names the creditor used with the debtor _____	
2. Has this claim been acquired from someone else?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes From whom? _____	
3. Where should notices and payments to the creditor be sent?	Where should notices to the creditor be sent?  LINEBARGER GOGGAN BLAIR & SAMPSON, LLP 3500 MAPLE AVENUE SUITE 800 DALLAS, TX 75219 (214) 880-0089  dallas.bankruptcy@lgb.com	Where should payments to the creditor be sent? (If different)
Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)	Uniform claim identifier for electronic payments in chapter 13 (if you use one):  _____	
4. Does this claim amend one already filed?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Claim number on court claims registry (if known) _____ Filed On: _____	
5. Do you know if anyone else has filed a proof of claim for this claim?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Who made the earlier filing? _____	

### Part 2: Give Information About the Claim as of the Date the Case Was Filed

6. Do you have any	<input type="checkbox"/> No
--------------------	-----------------------------

number you use to identify the debtor?	<input checked="" type="checkbox"/> Yes Last 4 digits of the debtor's account or any number you use to identify the debtor: _____ <b>SEE ATTACHED EXHIBITS</b>								
7. How much is the claim?	\$ <u><b>\$211,089.74</b></u> Does this amount include interest or other charges? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Attach statement itemizing interest, fees, expenses or other charges required by Bankruptcy Rule 3001(c)(2)(A).								
8. What is the basis of the claim?	Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card. Attach redacted copies of any documents supporting the claim required by Bankruptcy Rule 3001(c). Limit disclosing information that is entitled to privacy, such as health care information.								
<b>AD VALOREM TAXES</b>									
9. Is all or part of the claim secured?	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes The claim is secured by a lien on property. <b>Nature of property:</b> <input type="checkbox"/> Real Estate. If claim is secured by the debtor's principal residence, file a <i>Mortgage Proof of Claim</i> Attachment (Official Form 410-A) with this Proof of Claim. <input type="checkbox"/> Motor Vehicle <input checked="" type="checkbox"/> Other. Describe: <u><b>SEE ATTACHED EXHIBITS</b></u> <b>Basis for perfection:</b> <u>Secured by Tax Lien §§ 32.01 and 32.05 of the Texas Property Tax Code.</u> <u>Secured claim to extent of collateral value. Unsecured Priority claim [11 U.S.C. 507 (a)(8)] to extent of any shortfall in collateral value and for personal liability.</u> Attach redacted copies of documents, if any, that show evidence of perfection of a security interest (for example, a mortgage, lien, certificate of title, financing statement, or other document that shows the lien has been filed or recorded.) <b>Value of property:</b> \$ <u><b>SEE ATTACHED EXHIBITS</b></u> <b>Amount of the claim that is secured:</b> \$ <u><b>\$211,089.74</b></u> <b>Amount of the claim that is unsecured:</b> \$ _____ (The sum of the secured and unsecured amounts should match the amount in line 7.) <b>Amount necessary to cure any default as of the date of the petition:</b> \$ <u><b>\$211,089.74</b></u> <b>Annual Interest Rate</b> (when case was filed) <u>12%</u> <input checked="" type="checkbox"/> Fixed <input type="checkbox"/> Variable								
10. Is this claim based on a lease?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Amount necessary to cure any default as of the date of the petition. \$ _____								
11. Is this claim subject to a right of setoff?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Identify the property: _____								
12. Is all or part of the claim entitled to priority under 11 U.S.C. 507(a)?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <i>Check all that apply:</i> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 80%;"></th> <th style="text-align: right; width: 20%;">Amount entitled to priority</th> </tr> </thead> <tbody> <tr> <td><input type="checkbox"/> Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).</td> <td style="text-align: right;">\$ _____</td> </tr> <tr> <td><input type="checkbox"/> Up to \$3,800* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use. 11 U.S.C. § 507(a)(7).</td> <td style="text-align: right;">\$ _____</td> </tr> <tr> <td><input type="checkbox"/> Wages, salaries, or commissions (up to \$17,150*) earned within 180 days before the bankruptcy petition is filed or the debtor's business ends, whichever is earlier. 11 U.S.C. § 507(a)(4).</td> <td style="text-align: right;">\$ _____</td> </tr> </tbody> </table> <p>A claim may be partly priority and partly nonpriority. For example, in some categories, the law limits the amount entitled to priority.</p>		Amount entitled to priority	<input type="checkbox"/> Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).	\$ _____	<input type="checkbox"/> Up to \$3,800* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use. 11 U.S.C. § 507(a)(7).	\$ _____	<input type="checkbox"/> Wages, salaries, or commissions (up to \$17,150*) earned within 180 days before the bankruptcy petition is filed or the debtor's business ends, whichever is earlier. 11 U.S.C. § 507(a)(4).	\$ _____
	Amount entitled to priority								
<input type="checkbox"/> Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).	\$ _____								
<input type="checkbox"/> Up to \$3,800* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use. 11 U.S.C. § 507(a)(7).	\$ _____								
<input type="checkbox"/> Wages, salaries, or commissions (up to \$17,150*) earned within 180 days before the bankruptcy petition is filed or the debtor's business ends, whichever is earlier. 11 U.S.C. § 507(a)(4).	\$ _____								

	<input type="checkbox"/> Taxes or penalties owed to governmental units. 11 U.S.C. § 507(a)(8). \$ _____ <input type="checkbox"/> Contributions to an employee benefit plan. 11 U.S.C. § 507(a)(5). \$ _____ <input type="checkbox"/> Other. Specify subsection of 11 U.S.C. § 507(a)(____) that applies. \$ _____
<small>• Amounts are subject to adjustment on 4/01/28 and every 3 years after that for cases begun on or after the date of adjustment.</small>	

**Part 3: Sign Below**

<p><b>The person completing this proof of claim must sign and date it. FRBP 9011(b).</b></p> <p><b>If you file this claim electronically, FRBP 5005(a)(2) authorizes courts to establish local rules specifying what a signature is.</b></p> <p><b>A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.</b></p>	<p><i>Check the appropriate box</i></p> <p><input type="checkbox"/> I am the creditor.  <input checked="" type="checkbox"/> I am the creditor's attorney or authorized agent.  <input type="checkbox"/> I am the trustee, or the debtor, or their authorized agent. Bankruptcy Rule 3004.  <input type="checkbox"/> I am a guarantor, surety, endorser, or other co-debtor. Bankruptcy Rule 3005.</p> <p>I understand that an authorized signature on this <i>Proof of Claim</i> serves as an acknowledgment that when calculating the amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.</p> <p>I have examined the information in this <i>Proof of Claim</i> and have a reasonable belief that the information is true and correct.</p> <p>I declare under penalty of perjury that the foregoing is true and correct.</p> <p>Executed on date December 31, 2025</p> <p><b>/s/John Turner</b></p> <p><b>Print the name of the person who is completing and signing this claim:</b></p> <p><b>Name :</b> John Turner</p> <p><b>Title :</b> Attorney TXBN 00788563</p> <p><b>Company :</b> LINEBARGER GOGGAN BLAIR &amp; SAMPSON, LLP  <small>Identify the corporate servicer as the company if the authorized agent is a servicer.</small></p> <p><b>Address :</b> 3500 MAPLE AVENUE          SUITE 800          DALLAS, TX 75219          (214) 880-0089</p> <p style="text-align: right;"><b>dallas.bankruptcy@lgbsonline.com</b></p>
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IN THE UNITED STATES BANKRUPTCY COURT  
FOR THE DISTRICT OF NEW JERSEY  
TRENTON DIVISION

IN RE: § § CASE NO. 25-23630  
UNITED SITE SERVICES, INC. § §  
DEBTOR(S) § § CHAPTER 11

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**DALLAS COUNTY**  
**PROOF OF CLAIM SUMMARY OF EXHIBITS**

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<u>Exhibit No.</u>	<u>Account No.</u>	<u>Tax Years included in Claim</u>	<u>Amount Due</u>
1	99000000215181600	2025	\$171,616.54
2	99060104540000000	2025	\$6,057.32
3	99190517500000000	2025	\$33,415.88
<b>TOTAL:</b>			<b>\$211,089.74</b>



**DALLAS COUNTY TAX OFFICE**  
**JOHN R. AMES, CTA**  
**TAX ASSESSOR/COLLECTOR**

500 Elm Street, Suite 3300  
 Dallas, Texas 75202  
[www.dallascounty.org/tax](http://www.dallascounty.org/tax) | 214-653-7811  
 email: [propertytax@dallascounty.org](mailto:propertytax@dallascounty.org)

**2025 TAX STATEMENT**



**UNITED SITE SERVICES INC**  
**ATTN S CENTRAL ACCTS PAYABLE**  
**118 FLANDERS RD**  
**WESTBOROUGH, MA 01581-0000**

Land Value:	0
Improvement Value:	7,707,180
Market Value:	<u>7,707,180</u>

**Account: 99000000215181600**

Property Description:

2617 WILLOWBROOK RD, DA

PERSONAL PROPERTY  
 UNITED SITE SERVICES

Statement Date: December 31, 2025

Jurisdiction	Taxable Value	Tax Rate	Tax Due
DALLAS COUNTY	7,707,180	.215500	\$16,608.97
PARKLAND HOSP	7,707,180	.212000	\$16,339.22
DALLAS COLL	7,707,180	.106575	\$8,213.93
DALLAS ISD	7,707,180	.993835	\$76,596.65
DALLAS CITY	7,707,180	.698800	\$53,857.77

Previous payment on account: \$0.00

Pay taxes online at:  
[www.dallascounty.org/tax](http://www.dallascounty.org/tax)



**Total Due If Paid By January 31, 2026**  
**\$171,616.54**

*Your check may be converted to electronic funds transfer*  
**Return This Portion With Your Payment**

Account: 99000000215181600

2

090900000000000000002010501080106000012500171616546

<u>IF PAID IN</u>	<u>P&amp;I</u>	<u>TOTAL DUE</u>
FEB	7%	\$183,629.71
MAR	9%	\$187,062.03

**Total Due If Paid By January 31, 2026**  
**\$171,616.54**

Amount Paid: \$\_\_\_\_\_.

**Remit To:**  
**John R. Ames, CTA**  
**P O Box 139066**  
**Dallas, Texas 75313-9066**

UNITED SITE SERVICES INC  
 ATTN S CENTRAL ACCTS PAYABLE  
 118 FLANDERS RD  
 WESTBOROUGH, MA 01581-0000



**DALLAS COUNTY TAX OFFICE**  
**JOHN R. AMES, CTA**  
**TAX ASSESSOR/COLLECTOR**

500 Elm Street, Suite 3300  
Dallas, Texas 75202  
[www.dallascounty.org/tax](http://www.dallascounty.org/tax) | 214-653-7811  
email: [propertytax@dallascounty.org](mailto:propertytax@dallascounty.org)

**2025 TAX STATEMENT**



**UNITED SITE SERVICES**  
**118 FLANDERS RD**  
**WESTBOROUGH, MA 01581-0000**

Land Value:	0
Improvement Value:	272,030
Market Value:	272,030

**Account: 99060104540000000**

Property Description:

973 METRO MEDIA PL, DA

PERSONAL PROPERTY  
UNITED SITE SERVICES

Statement Date: December 31, 2025

<b>Jurisdiction</b>	<b>Taxable Value</b>	<b>Tax Rate</b>	<b>Tax Due</b>
DALLAS COUNTY	272,030	.215500	\$586.22
PARKLAND HOSP	272,030	.212000	\$576.70
DALLAS COLL	272,030	.106575	\$289.92
DALLAS ISD	272,030	.993835	\$2,703.53
DALLAS CITY	272,030	.698800	\$1,900.95

Previous payment on account: \$0.00

Pay taxes online at:  
[www.dallascounty.org/tax](http://www.dallascounty.org/tax)



**Total Due If Paid By January 31, 2026**  
**\$6,057.32**

*Your check may be converted to electronic funds transfer*  
**Return This Portion With Your Payment**

Account: 99060104540000000

2 09090006000100040504000000000000012500006057324

<b>IF PAID IN</b>	<b>P&amp;I</b>	<b>TOTAL DUE</b>
FEB	7%	\$6,481.34
MAR	9%	\$6,602.48

<b>Total Due If Paid By January 31, 2026</b>
<b>\$6,057.32</b>

Amount Paid: \$\_\_\_\_\_.

**Remit To:**  
**John R. Ames, CTA**  
**P O Box 139066**  
**Dallas, Texas 75313-9066**

UNITED SITE SERVICES  
118 FLANDERS RD  
WESTBOROUGH, MA 01581-0000



**DALLAS COUNTY TAX OFFICE**  
**JOHN R. AMES, CTA**  
**TAX ASSESSOR/COLLECTOR**

500 Elm Street, Suite 3300  
 Dallas, Texas 75202  
[www.dallascounty.org/tax](http://www.dallascounty.org/tax) | 214-653-7811  
 email: [propertytax@dallascounty.org](mailto:propertytax@dallascounty.org)

**2025 TAX STATEMENT**



**UNITED SITE SERVICES**  
**118 FLANDERS RD**  
**WESTBOROUGH, MA 01581-0000**

Land Value:	0
Improvement Value:	1,480,700
Market Value:	<u>1,480,700</u>

**Account: 99190517500000000**

Property Description:

3324 ROY ORR BLVD, CP

PERSONAL PROPERTY  
 UNITED SITE SERVICES

Statement Date: December 31, 2025

Jurisdiction	Taxable Value	Tax Rate	Tax Due
DALLAS COUNTY	1,480,700	.215500	\$3,190.91
PARKLAND HOSP	1,480,700	.212000	\$3,139.08
DALLAS COLL	1,480,700	.106575	\$1,578.06
GRND PRIE ISD	1,480,700	1.062687	\$15,735.21
GRND PRE CITY	1,480,700	.660000	\$9,772.62

Previous payment on account: \$0.00

Pay taxes online at:  
[www.dallascounty.org/tax](http://www.dallascounty.org/tax)



**Total Due If Paid By January 31, 2026**  
**\$33,415.88**

*Your check may be converted to electronic funds transfer*  
**Return This Portion With Your Payment**

Account: 99190517500000000

2

09090109000501070500000000000000012500033415885

IF PAID IN	P&I	TOTAL DUE
FEB	7%	\$35,754.98
MAR	9%	\$36,423.32

**Total Due If Paid By January 31, 2026**  
**\$33,415.88**

Amount Paid: \$\_\_\_\_\_.

**Remit To:**  
**John R. Ames, CTA**  
**P O Box 139066**  
**Dallas, Texas 75313-9066**

UNITED SITE SERVICES  
 118 FLANDERS RD  
 WESTBOROUGH, MA 01581-0000