

Office of Tax Assessor - Collector
COUNTY of HIDALGO

Pablo "Paul" Villarreal, Jr. RTA



P.O. Box 178
Edinburg, Texas 78540-0178
Ph. (956) 318-2157
Fax (956) 318-2733
www.hidalgocountytax.org

September 15, 2014

The Honorable Ramon Garcia
Hidalgo County Commissioners
Edinburg, Texas 78539

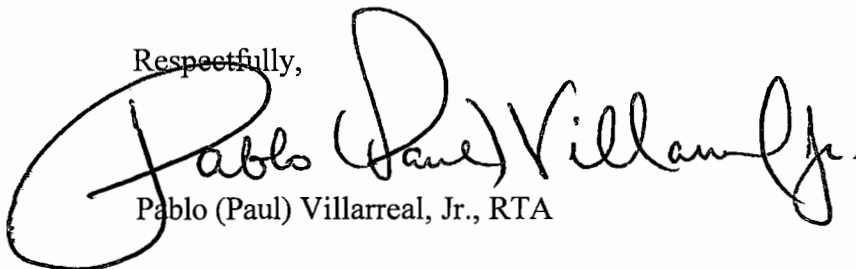
Re: See attached list

Gentlemen:

Our office has determined that the attached application(s) for a tax refund over \$2,500.00 dollars is(are) erroneous and/or excessive. The County Auditor has also agreed with our determination. As a result, I respectfully request that the Commissioner's Court approve the enclosed application(s) for a tax refund as required by Property Tax Code Section 31.11, Refunds of Overpayments or Erroneous Payments.

When completed, please return the attached to our office. Thank you for your assistance in this matter.

Respectfully,



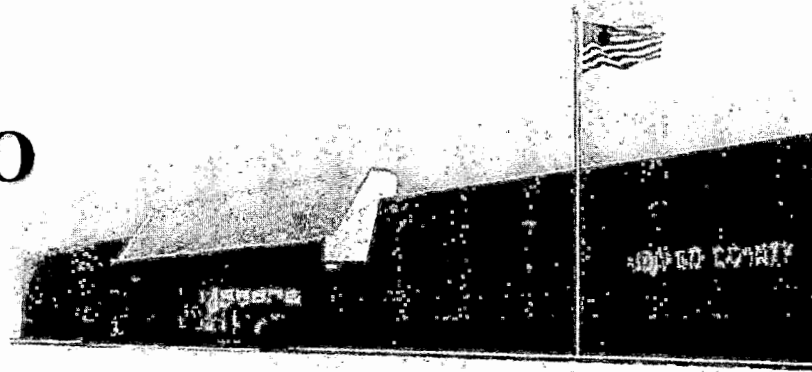
Pablo (Paul) Villarreal, Jr., RTA

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ACCOUNT NUMBER	PAYER	AMOUNT
L6269.02.000.0034.00	Corelogic Commercial Real Estate	\$2,930.01
M2350.05.000.002A.00	Loop Fresh Produce Lp.	\$6,042.00
M2550.99.000.0006.14	Insight Enterprises Inc.	\$3,398.12
R2950.00.004.0008.01	Loop Cold Storage Co.	\$2,771.45



2804 S. Bus. Hwy 281 • Edinburg, Texas 78539



PABLO (PAUL) VILLARREAL JR., RTA
 Hidalgo County Tax Assessor - Collector
 PO BOX 178 EDINBURG, TX 78540-0178

Phone No.: (956) 318-2157
 Fax No.: 956-318-2733

Print Date: 01/29/2014

#1728

AUDITED BY: THE HIDALGO
 COUNTY AUDITOR'S OFFICE
 DATE: 9-5-14

9-11-14

SECOND NOTICE

CORELOGIC COMMERCIAL REAL ESTATE
 SERVICES, INC.
 MIDLAND LOAN SERVICES
 PO BOX 961009
 FT WORTH, TX 76161

JUL 16 2014

Account Number L6269-02-000-0034-00 1 HCAD No. 685450
Legal Description of the Property LOS MOLINOS PH 2 LOT 34 2501 TOLEDO OWNER: GRANA ROMEO & ESPERANZA

2013 OVERAGE AMOUNT \$2,930.01

1: HIDALGO COUNTY, 2: DRAINAGE DIST #1, 22: CITY OF EDINBURG, 41: EDINBURG CISD, 54: SOUTH TEXAS ISD, 55: SOUTH TEXAS COLLEGE

Ln # 030265379

APPLICATION FOR PROPERTY TAX REFUND

If you paid the taxes on this account and believe you are entitled to a refund, please complete this application, sign it, and return it with proof of payment. Applications must be submitted within three years of the date of payment or you waive the right to the refund per Section 31.14 of Texas Property Tax Code. Governing body approval is required for refunds in excess of \$500. Please allow 60 days for processing.

CORELOGIC COMMERCIAL TAX SERVICE
 ATTN: EVELYN CHAPA (817) 699-8019
 P. O. BOX 961009
 FT. WORTH, TEXAS 76161-009
 echapa@corelogic.com

Step 1: Identify the Payer requesting the refund if different than shown above	Name	CORELOGIC COMMERCIAL TAX SERVICE ATTN: EVELYN CHAPA (817) 699-8019 P. O. BOX 961009 FT. WORTH, TEXAS 76161-009 echapa@corelogic.com	
	Mailing Address		
	City, State, Zip Code		
Step 2: Refunds are only issued to party that paid taxes. Affirm that you are the payer.	I paid the taxes for year <u>2013</u> and am the party entitled to the refund.		
Step 3: Mark the reason for the refund and provide a brief explanation	<input checked="" type="checkbox"/> Overpaid the account	<u>2,930.01</u>	
	<input type="checkbox"/> Duplicate payment		
	<input type="checkbox"/> Paid in error (explain)		
Step 4: Provide payment information Attach copies of cancelled checks or tax office receipts	Total amount paid by this taxpayer	<u>\$34,992.09</u>	
	Total tax, penalty, and interest amount owed for the year		
	Amount of refund claimed	<u>\$2,930.01</u>	
Step 5: How should the refund be processed?	<input type="checkbox"/> Mail to Property Owner	CORELOGIC COMMERCIAL TAX SERVICE ATTN: EVELYN CHAPA (817) 699-8019 P. O. BOX 961009 FT. WORTH, TEXAS 76161-009 echapa@corelogic.com	
	<input type="checkbox"/> Mail to Payer at address		
	<input type="checkbox"/> Transfer this amount to		
	<input type="checkbox"/> Escrow for next year's tax		
Step 6: Sign the application form. Unsigned applications will not be processed. Please allow 60 days from the time this application is returned to the tax office for the refund to be processed	By completing and signing this form I hereby apply for the refund of the above described taxes and certify that the information I have given on this form is true and correct		Date of application
	SIGN HERE	<u>Evelyn Chapa</u>	<u>7-22-2014</u>
If you make a false statement on this application you could be found guilty of a Class A Misdemeanor or a state jail felony under Texas Penal Code Section 37.10			
AUDITORS USE ONLY:	<input checked="" type="checkbox"/> Approved	<input type="checkbox"/> Denied	By: <u>[Signature]</u> Date: <u>9/11/14</u>
TAX OFFICE USE ONLY:	<input checked="" type="checkbox"/> Approved	<input type="checkbox"/> Denied	By: <u>[Signature]</u> Date: <u>8/7/14</u> SE

This application must be completed, signed, and submitted with supporting documentation to be valid.

8/18 ck# 6076718 Date 1/17/2013



PABLO (PAUL) VILLARREAL JR., RTA
Hidalgo County Tax Assessor - Collector
 PO BOX 178 EDINBURG, TX 78540-0178

Phone No.: (956) 318-2157
 Fax No.: 956-318-2733

Print Date: 12/19/2013

AUDITED BY: THE HIDALGO
 COUNTY AUDITOR'S OFFICE
 DATE: 9-5-14
J.C. 9-11-14

LOOP FRESH PRODUCE LP.
OPERATING ACCOUNT
8700 CROWN HILL BLVD., SUITE 406
SAN ANTONIO, TX 78209

Account Number M2350-05-000-002A-00 HCAD No. 816064
Legal Description of the Property MCALLEN SW IND DIST #5 LOT 2A 4001 URSULA AVE OWNER: LOOP FRESH PRODUCE LP

2013 OVERAGE AMOUNT \$6,042.00

1: HIDALGO COUNTY, 2: DRAINAGE DIST #1, 47: MCALLEN ISD, 54: SOUTH TEXAS ISD, 55: SOUTH TEXAS COLLEGE

APPLICATION FOR PROPERTY TAX REFUND

If you paid the taxes on this account and believe you are entitled to a refund, please complete this application, sign it, and return it with proof of payment. Applications must be submitted within three years of the date of payment or you waive the right to the refund per Section 31.11c of Texas Property Tax Code. Governing body approval is required for refunds in excess of \$500. Please allow 60 days for processing.

Step 1: Identify the Payer requesting the refund if different than shown above	Name	Relationship to Property Owner
	Mailing Address	Daytime Telephone Number <u>(210) 821-6758</u>
	City, State, Zip Code	
Step 2: Refunds are only issued to party that paid taxes. Affirm that you are the payer.	I paid the taxes for year <u>2013</u> and am the party entitled to the refund.	
Step 3: Mark the reason for the refund and provide a brief explanation	<input checked="" type="checkbox"/> Overpaid the account	
	<input type="checkbox"/> Duplicate payment	
	<input type="checkbox"/> Paid in error (explain)	
Step 4: Provide payment information Attach copies of cancelled checks or tax office receipts	Total amount paid by this taxpayer	<u>104,870.02</u>
	Total tax, penalty, and interest amount owed for the year	
	Amount of refund claimed	<u>6,042.00</u>
Step 5: How should the refund be processed?	<input checked="" type="checkbox"/> Mail to Property Owner	
	<input type="checkbox"/> Mail to Payer at address in Step 1	
	<input type="checkbox"/> Transfer this amount to account	For tax year
	<input type="checkbox"/> Escrow for next year 's taxes	
Step 6: Sign the application form. Unsigned applications will not be processed. Please allow 60 days from the time this application is returned to the tax office for the refund to be processed	By completing and signing this form I hereby apply for the refund of the above described taxes and certify that the information I have given on this form is true and correct	
	SIGN HERE <i>Jessie Wood - administrator</i>	Date of application <u>7-24-14</u>
If you make a false statement on this application you could be found guilty of a Class A Misdemeanor or a state jail felony under Texas Penal Code Section 37.10		
AUDITORS USE ONLY:	<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	By: <i>[Signature]</i> Date: <u>9/11/14</u>
TAX OFFICE USE ONLY:	<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	By: <i>[Signature]</i> Date: <u>7/31/14</u>

This application must be completed, signed, and submitted with supporting documentation to be valid.



PABLO (PAUL) VILLARREAL JR., RTA
Hidalgo County Tax Assessor - Collector
 PO BOX 178 EDINBURG, TX 78540-0178

Phone No.: (956) 318-2157

Fax No.: 956-318-2733

Print Date: 01/22/2014

SECOND NOTICE

JUL 15 2014

INSIGHT ENTERPRISES INC
ATTN:TAX DEPT
6820 S HARL AVE
TEMPE , AZ 85283-4318

AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE
DATE: 9-5-14
J.C. 9-11-14

Account Number M2550-99-000-0006-14 <i>d</i> HCAD No. 793236 <i>d</i>
Legal Description of the Property INVENTORY SUPPLIES FURNITURE FIXTURES EQUIPMENT AT 2712 NORTH MCCOLL RD / NEW ACCT 2011 2712 N MCCOLL 78501 OWNER: INSIGHT ENTERPRISES INC
2013 OVERAGE AMOUNT \$3,398.12⁰

1: HIDALGO COUNTY, 2: DRAINAGE DIST #1, 47: MCALLEN ISD, 54: SOUTH TEXAS ISD, 55: SOUTH TEXAS COLLEGE

APPLICATION FOR PROPERTY TAX REFUND

If you paid the taxes on this account and believe you are entitled to a refund, please complete this application, sign it, and return it with proof of payment. Applications must be submitted within three years of the date of payment or you waive the right to the refund per Section 31.11c of Texas Property Tax Code. Governing body approval is required for refunds in excess of \$500. Please allow 60 days for processing.

Step 1: Identify the Payer requesting the refund if different than shown above	Name		Relationship to Property Owner	
	Mailing Address		Daytime Telephone Number (480) 333-3048	
	City, State, Zip Code			
Step 2: Refunds are only issued to party that paid taxes. Affirm that you are the payer.	I paid the taxes for year 2013 and am the party entitled to the refund.			
Step 3: Mark the reason for the refund and provide a brief explanation	<input checked="" type="checkbox"/>	Overpaid the account		
	<input type="checkbox"/>	Duplicate payment		
	<input type="checkbox"/>	Paid in error (explain)		
Step 4: Provide payment information Attach copies of cancelled checks or tax office receipts	Total amount paid by this taxpayer			
	Total tax, penalty, and interest amount owed for the year			
	Amount of refund claimed			
Step 5: How should the refund be processed?	<input checked="" type="checkbox"/>	Mail to Property Owner	ATTE: TAX Department	
	<input type="checkbox"/>	Mail to Payer at address in Step 1		
	<input type="checkbox"/>	Transfer this amount to account	For tax year	
	<input type="checkbox"/>	Escrow for next year 's taxes		
Step 6: Sign the application form. Unsigned applications will not be processed. Please allow 60 days from the time this application is returned to the tax office for the refund to be processed	By completing and signing this form I hereby apply for the refund of the above described taxes and certify that the information I have given on this form is true and correct			
	SIGN HERE	<i>Paul Villarreal</i>	Date of application 7/22/2014	
	If you make a false statement on this application you could be found guilty of a Class A Misdemeanor or a state jail felony under Texas Penal Code Section 37.10			
AUDITORS USE ONLY:	<input checked="" type="checkbox"/>	Approved	<input type="checkbox"/>	Denied
TAX OFFICE USE ONLY:	<input checked="" type="checkbox"/>	Approved	<input type="checkbox"/>	Denied
		By: <i>Paul Villarreal</i>	Date: 9/11/14	
			Date: 7/31/14	

This application must be completed, signed, and submitted with supporting documentation to be valid.



PABLO (PAUL) VILLARREAL JR., RTA
 Hidalgo County Tax Assessor - Collector
 PO BOX 178 EDINBURG, TX 78540-0178

AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE
 DATE: *9-5-14*

Phone No.: (956) 318-2157
 Fax No.: 956-318-2733

Print Date: 12/19/2013

Change address
SECOND NOTICE
JUL 17 2014

~~LOOP COLD STORAGE CO. - MCALLEN
 4000 W. MILITARY HIGHWAY
 MCALLEN, TX 78503~~

Account Number R2950-00-004-0008-01 <i>d</i> HCAD No. 509812 <i>d</i>
Legal Description of the Property RIO BRAVO TRACT W66-LOT 8 BLK 4 2.00AC GR 1.91AC NET MILITARY HWY OWNER: LOOP COLD STORAGE MCALLEN LP

2013 OVERAGE AMOUNT \$2,771.45 *d*

1: HIDALGO COUNTY, 2: DRAINAGE DIST #1, 47: MCALLEN ISD, 54: SOUTH TEXAS ISD, 55: SOUTH TEXAS COLLEGE

APPLICATION FOR PROPERTY TAX REFUND

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** Change from Physical Address to Mailing Address for payment.*

Step 1: Identify the Payer requesting the refund if different than shown above	Name <i>Loop Cold Storage Co - McAllen</i>	Relationship to Property Owner <i>Property Owner</i>
	Mailing Address <i>8700 Crownhill Blvd Ste 406</i>	Daytime Telephone Number <i>(210) 821-6785</i>
	City, State, Zip Code <i>San Antonio, TX 78209</i>	
Step 2: Refunds are only issued to party that paid taxes. Affirm that you are the payer.	I paid the taxes for year <u>2013</u> and am the party entitled to the refund.	
Step 3: Mark the reason for the refund and provide a brief explanation	<input checked="" type="checkbox"/> Overpaid the account <input type="checkbox"/> Duplicate payment <input type="checkbox"/> Paid in error (explain)	
Step 4: Provide payment information Attach copies of cancelled checks or tax office receipts	Total amount paid by this taxpayer	<i>149,993.66</i>
	Total tax, penalty, and interest amount owed for the year	
	Amount of refund claimed	<i>\$ 2,771.45</i>
Step 5: How should the refund be processed?	<input checked="" type="checkbox"/> Mail to Property Owner <input type="checkbox"/> Mail to Payer at address in Step 1 <input type="checkbox"/> Transfer this amount to account For tax year <input type="checkbox"/> Escrow for next year's taxes	
Step 6: Sign the application form. Unsigned applications will not be processed. Please allow 60 days from the time this application is returned to the tax office for the refund to be processed	By completing and signing this form I hereby apply for the refund of the above described taxes and certify that the information I have given on this form is true and correct SIGN HERE <i>Jessie Wong - Administrator</i> Date of application <i>7-24-14</i> <i>d</i> If you make a false statement on this application you could be found guilty of a Class A Misdemeanor or a state jail felony under Texas Penal Code Section 37.10	
AUDITORS USE ONLY:	<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	By: <i>[Signature]</i> Date: <i>9/11/14</i>
TAX OFFICE USE ONLY:	<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	By: <i>[Signature]</i> Date: <i>7/31/14</i> <i>d</i>

This application must be completed, signed, and submitted with supporting documentation to be valid.