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

February 13, 2015

The Honorable Ramon Garcia
Hidalgo County Commissioners
Edinburg, Texas 78539

Re: See attached list

Gentlemen:

The Hidalgo County Appraisal District has made a correction to the tax roll as allowed by Property Tax Code Section 26.15. This correction decreased the tax liability of the property owner(s). Since taxes had been previously paid, our office determined that the tax roll correction resulted in a tax refund over $2,500.00 dollars due to the taxpayer(s). 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 recommended by the County Auditor.

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

Respectfully,

Pablo (Paul) Villarreal, Jr., PCC

nlr

Enclosure

Office of Tax Assessor - Collector

COUNTY of HIDALGO

Pablo "Paul" Villarreal, Jr. RTA

P.O. Box 178
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ACCOUNT NUMBER	PAYER	AMOUNT
E0154.00.000.0106.00	CORELOGIC	$3,714.91
H0422.00.000.0026.00	BBVA COMPASS	$4,569.58
H0660.00.000.0001.00	CORELOGIC	$2,601.74
N2700.00.000.0002.00	ULTIMATE INVESTMENTS INC	$7,131.01
P9257.00.000.000B.00	INTER NATIONAL BANK	$5,878.72
Q1000.02.000.0115.00	LERETA LLC	$2,718.71
S3011.02.000.0013.00	LONE STAR NATIONAL BANK	$5,199.39
T6880.00.000.0004.00	CORELOGIC	$2,617.89
W3800.00.823.0000.02	LERETA LLC	$2,597.87

APPLICATION FOR TAX REFUND

Collection office name	Collecting tax for: (Tax Units)
HIDALGO COUNTY TAX OFFICE	GHD-SST-DR1-FD1-FD2-FD3-FD4-CAN-CLV-CMS-CPN-CPO-CWL-SEB-SLV-SML-SMS-SSL-SWL-JCC
Present mailing address *(number and street)* P O BOX 178	
City, town or post office, state, ZIP code EDINBURG TX 78540-0178	Phone *(area code and number)* (956) 318-2157

To apply for a tax refund, the taxpayer must complete the following

Step 1: Owner's name and address

Owner's name
SANCHEZ JASON W & LORETTA LYNN (PAID BY: CORELOGIC)

Present mailing address *(number and street)*
10310 N 26TH LN

City, town or post office, state, ZIP code
MCALLEN, TX 78504

Phone *(area code and number)*

Legal description (or attach copy of the tax bill or tax receipt): EAGLE'S CROSSING LOT 106

Step 2: Describe the property

Address or location of property:

AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE
DATE: 2-10-15 R.N.

718009

Account number of property:

E0154.00.000.0106.00

Tax receipt number:

OR 27520839

Step 3: Give the tax payment information

Name Of Taxing Unit from Which Refund is Requested	Year for Which Refund is Requested	Date of the Tax Payment	Amount of Taxes Paid	Amount of Tax Refund Requested
1. ALL ENTITIES	2014	12/29 / 2014	$ 3,714.91	$ 3,714.91
2.		/	$	$
3.		/	$	$
4.		/	$	$
5. TOTAL		/	$	$ 3,714.91

Taxpayer's reason for refund *(attach supporting documentation)*: SUPP# 5

GRANT DVHS Q/YR 2013 FILED LATE

NR

Step 4: sign the 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 ➡ Signature

Date of application for tax refund

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.

Step 5: Tax refund Determination

This tax refund is ☐ Approved ☐ Disapproved

sign here ➡ Authorized officer

Date 2/10/15

sign here ➡ Collector(s) of taxing unit(s) for refund applications over *(insert amount for which governing body approval is required under Section 31.11, tax code)*

Date 2/3/15 JF

2/4

APPLICATION FOR TAX REFUND

Collection office name	Collecting tax for: (Tax Units)
HIDALGO COUNTY TAX OFFICE	GHD-SST-DR1-FD1-FD2-FD3-FD4-CAN-CLV-CMS-CPN-CPO-CWL-SEB-SLV-SML-SMS-SSL-SWL-JCC
Present mailing address *(number and street)* P O BOX 178	
City, town or post office, state, ZIP code EDINBURG TX 78540-0178	Phone *(area code and number)* (956) 318-2157

To apply for a tax refund, the taxpayer must complete the following

Step 1: Owner's name and address

Owner's name
GONZALEZ RODOLFO'S (PAID BY: BBVA COMPASS)

Present mailing address *(number and street)*
3602 N 29TH LN

City, town or post office, state, ZIP code
MCALLEN, TX 78501

Phone *(area code and number)*

Legal description (or attach copy of the tax bill or tax receipt): HACIENDA SAN MIGUEL LOT 26

Step 2: Describe the property

Address or location of property:

AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE
DATE: 2-10-15 R.N.

704728

Account number of property:

H0422.00.000.0026.00

Tax receipt number:

OR 25559806

Step 3: Give the tax payment information

Name Of Taxing Unit from Which Refund is Requested	Year for Which Refund is Requested	Date of the Tax Payment	Amount of Taxes Paid	Amount of Tax Refund Requested
1. ALL ENTITIES	2013	01/31 / 2014	$ 5,380.30	$ 4,569.58
2.		/	$	$
3.		/	$	$
4.		/	$	$
5. TOTAL		/	$	$ 4,569.58

Taxpayer's reason for refund *(attach supporting documentation)*: SUPP# 13

INCLUSION OF PROPERTY NON-EXISTENT.ALL IMPROVEMENTS REMOVED

NR

Step 4: sign the 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 — Signature

Date of application for tax refund

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.

Step 5: Tax refund Determination

This tax refund is ☒ Approved ☐ Disapproved

sign here — Authorized officer

Date 2/10/15

sign here — Collector(s) of taxing unit(s) for refund applications over *(insert amount for which governing body approval is required under Section 31.11, tax code)*

Date 2/3/15 JE

2/4

APPLICATION FOR TAX REFUND

Collection office name	Collecting tax for: (Tax Units)
HIDALGO COUNTY TAX OFFICE	GHD-SST-DR1-FD1-FD2-FD3-FD4-CAN-CLV-CMS-CPN-CPO-CWL-SEB-SLV-SML-SMS-SSL-SWL-JCC
Present mailing address *(number and street)* P O BOX 178	
City, town or post office, state, ZIP code EDINBURG TX 78540-0178	Phone *(area code and number)* (956) 318-2157

To apply for a tax refund, the taxpayer must complete the following

Step 1: Owner's name and address

Owner's name
ESPINO HECTOR & NORMA LINDA (PAID BY: CORELOGIC)

Present mailing address *(number and street)*
603 W US HIGHWAY 83

City, town or post office, state, ZIP code
PHARR, TX 78577

Phone *(area code and number)*

Legal description (or attach copy of the tax bill or tax receipt): HALL ACRES ESTATES LOT 1

Step 2: Describe the property

Address or location of property:

AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE
DATE: 2-9-15
2/10/15

695851 d

Account number of property:

H0660.00.000.0001.00 d

Tax receipt number:

OR 27520872

Step 3: Give the tax payment information

Name Of Taxing Unit from Which Refund is Requested	Year for Which Refund is Requested	Date of the Tax Payment	Amount of Taxes Paid	Amount of Tax Refund Requested
1. ALL ENTITIES	2014	12/29 / 2014	$ 9,239.68	$ 2,601.74
2.		/	$	$
3.		/	$	$
4.		/	$	$
5. TOTAL		/	$	$ 2,601.74 d

Taxpayer's reason for refund *(attach supporting documentation)*: SUPP# 5 d

CORRECTIONS DUE TO FAILURE TO SEND REQUIRED NOTICE. SEC 41.4111

NR

Step 4: sign the 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 ➡ Signature

Date of application for tax refund

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.

Step 5: Tax refund Determination

This tax refund is ☑ Approved ☐ Disapproved

sign here ➡ Authorized officer

Date 2/10/15

sign here ➡ Collector(s) of taxing unit(s) for refund applications over *(insert amount for which governing body approval is required under Section 31.11, tax code)*

Paul Dillard d

Date 2/3/15 JE

2/4

APPLICATION FOR TAX REFUND

Collection office name	Collecting tax for: (Tax Units)
HIDALGO COUNTY TAX OFFICE	GHD-SST-DR1-FD1-FD2-FD3-FD4-CAN-CLV-CMS-CPN-CPO-CWL-SEB-SLV-SML-SMS-SSL-SWL-JCC
Present mailing address *(number and street)* P O BOX 178	
City, town or post office, state, ZIP code EDINBURG TX 78540-0178	Phone *(area code and number)* (956) 318-2157

To apply for a tax refund, the taxpayer must complete the following

Step 1: Owner's name and address

Owner's name
ULTIMATE INVESTMENTS INC

Present mailing address *(number and street)*
1112 YUCCA AVE

City, town or post office, state, ZIP code
MCALLEN, TX 78504

Phone *(area code and number)*

Legal description (or attach copy of the tax bill or tax receipt): NOLANA COMMERCIAL LOT 2 & 3

Step 2: Describe the property

Address or location of property:

AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE
DATE: 2-10-15 E.N.

550550

Account number of property:

Tax receipt number:

N2700.00.000.0002.00 OR 27761863

Step 3: Give the tax payment information

Name Of Taxing Unit from Which Refund is Requested	Year for Which Refund is Requested	Date of the Tax Payment	Amount of Taxes Paid	Amount of Tax Refund Requested
1. ALL ENTITIES	2014	01/07 / 2015	$ 47,539.98	$ 7,131.01
2.		/	$	$
3.		/	$	$
4.		/	$	$
5. TOTAL		/	$	$ 7,131.01

Taxpayer's reason for refund *(attach supporting documentation)*: SUPP# 5

THIS IS A CORRECTION DUE TO FAILURE TO SEND REQUIRED NOTICE SECTION 41.411

NR

Step 4: sign the 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 ➡ Signature

Date of application for tax refund

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.

Step 5: Tax refund Determination

This tax refund is ☑ Approved ☐ Disapproved

sign here ➡ Authorized officer

Date 2/10/15

sign here ➡ Collector(s) of taxing unit(s) for refund applications over *(insert amount for which governing body approval is required under Section 31.11, tax code)*

Date 2/3/15 JE

2/4

APPLICATION FOR TAX REFUND

Collection office name	Collecting tax for: (Tax Units)
HIDALGO COUNTY TAX OFFICE	GHD-SST-DR1-FD1-FD2-FD3-FD4-CAN-CLV-CMS-CPN-CPO-CWL-SEB-SLV-SML-SMS-SSL-SWL-JCC
Present mailing address *(number and street)* P O BOX 178	
City, town or post office, state, ZIP code EDINBURG TX 78540-0178	Phone *(area code and number)* (956) 318-2157

To apply for a tax refund, the taxpayer must complete the following

Step 1: Owner's name and address

Owner's name
LA PIEDAD LLC (PAID BY: INTER NATIONAL BANK)

Present mailing address *(number and street)*
6605 INVIERNO ST

City, town or post office, state, ZIP code
PHARR, TX 78577

Phone *(area code and number)*

Legal description (or attach copy of the tax bill or tax receipt): PROVIDENCE LOT B

Step 2: Describe the property

Address or location of property:

AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE
DATE: 2-10-15 R.N.
L.C 2/10/15

719346

Account number of property:

Tax receipt number:

P9257.00.000.000B.00 OR 27000892

Step 3: Give the tax payment information

Name Of Taxing Unit from Which Refund is Requested	Year for Which Refund is Requested	Date of the Tax Payment	Amount of Taxes Paid	Amount of Tax Refund Requested
1. ALL ENTITIES	2014	11/21 / 2014	$ 29,426.86	$ 5,878.72
2.		/	$	$
3.		/	$	$
4.		/	$	$
5. TOTAL		/	$	$ 5,878.72

Taxpayer's reason for refund *(attach supporting documentation)*: SUPP# 5

CORRECTIONS DUE TO FAILURE TO SEND REQUIRED NOTICE. SEC 41.411

NR

Step 4: sign the 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 ➡ Signature

Date of application for tax refund

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.

Step 5: Tax refund Determination

This tax refund is ☑ Approved ☐ Disapproved

sign here ➡ Authorized officer

Date 2/10/15

sign here ➡ Collector(s) of taxing unit(s) for refund applications over *(insert amount for which governing body approval is required under Section 31.11 Tax code)*

Date 2/3/15 JF

2/4

APPLICATION FOR TAX REFUND

Collection office name	Collecting tax for: (Tax Units)
HIDALGO COUNTY TAX OFFICE	GHD-SST-DR1-FD1-FD2-FD3-FD4-CAN-CLV-CMS-CPN-CPO-CWL-SEB-SLV-SML-SMS-SSL-SWL-JCC
Present mailing address *(number and street)* P O BOX 178	
City, town or post office, state, ZIP code EDINBURG TX 78540-0178	Phone *(area code and number)* (956) 318-2157

To apply for a tax refund, the taxpayer must complete the following

Step 1: Owner's name and address

Owner's name
MILIAN JUAN C & SILVIA (PAID BY: LERETA LLC)

Present mailing address *(number and street)*
1613 HAWK AVE

City, town or post office, state, ZIP code
MCALLEN, TX 78504

Phone *(area code and number)*

Legal description (or attach copy of the tax bill or tax receipt): QUAIL RUN PHASE 2 LOT 115-PHASE 11

Step 2: Describe the property

AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE
DATE: 2-10-15 E.N.
L.C. 2/10/15

Address or location of property:

264071

Account number of property:

Q1000.02.000.0115.00

Tax receipt number:

OR 27257222

Step 3: Give the tax payment information

Name Of Taxing Unit from Which Refund is Requested	Year for Which Refund is Requested	Date of the Tax Payment	Amount of Taxes Paid	Amount of Tax Refund Requested
1. ALL ENTITIES	2014	12/12 / 2014	$ 2,718.71	$ 2,718.71
2.		/	$	$
3.		/	$	$
4.		/	$	$
5. TOTAL		/	$	$ 2,718.71

Taxpayer's reason for refund *(attach supporting documentation)*: SUPP# 4

GRANT DVHS Q/YR 2014 FILED LATE

NR

Step 4: sign the 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 ➡ Signature

Date of application for tax refund

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.

Step 5: Tax refund Determination

This tax refund is ☑ Approved ☐ Disapproved

sign here ➡ Authorized officer

Date 2/10/15

sign here ➡ Collector(s) of taxing unit(s) for refund applications over *(insert amount for which governing body approval is required under Section 31.11, tax code)*

Date 2/3/15 JE

2/4

APPLICATION FOR TAX REFUND

Collection office name	Collecting tax for: (Tax Units)
HIDALGO COUNTY TAX OFFICE	GHD-SST-DR1-FD1-FD2-FD3-FD4-CAN-CLV-CMS-CPN-CPO-CWL-SEB-SLV-SML-SMS-SSL-SWL-JCC
Present mailing address *(number and street)* P O BOX 178	
City, town or post office, state, ZIP code EDINBURG TX 78540-0178	Phone *(area code and number)* (956) 318-2157

To apply for a tax refund, the taxpayer must complete the following

Step 1: Owner's name and address

Owner's name
MONTES MICAELA L & ARMANDO J(PAID BY: LONE STAR NATIONAL BANK)

Present mailing address *(number and street)*
3402 EL JARDIN

City, town or post office, state, ZIP code
MISSION, TX 78572

Phone *(area code and number)*

Legal description (or attach copy of the tax bill or tax receipt): SHARY VILLAS PH 2 LOT 13

Step 2: Describe the property

Address or location of property:

AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE
DATE: 2-10-15 R.N.

20829909

Account number of property:

S3011.02.000.0013.00

Tax receipt number:

OR 27280947

Step 3: Give the tax payment information

Name Of Taxing Unit from Which Refund is Requested	Year for Which Refund is Requested	Date of the Tax Payment	Amount of Taxes Paid	Amount of Tax Refund Requested
1. ALL ENTITIES	2014	12/15 / 2014	$ 6,749.05	$ 5,199.39
2.		/	$	$
3.		/	$	$
4.		/	$	$
5. TOTAL		/	$	$ 5,199.39

Taxpayer's reason for refund *(attach supporting documentation)*: SUPP# 5

INCLUSION OF PROPERTY NON-EXISTENT.ALL IMPROVEMENTS TRANSFERRED TO S3011-02-000-0012-00

NR

Step 4: sign the 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 — Signature

Date of application for tax refund

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.

Step 5: Tax refund Determination

This tax refund is ☑ Approved ☐ Disapproved

sign here — Authorized officer

Date 2/10/15

sign here — Collector(s) of taxing unit(s) for refund applications over *(insert amount for which governing body approval is required under Section 31.11, tax code)*

Date 2/3/15 JE

2/4

APPLICATION FOR TAX REFUND

Collection office name	Collecting tax for: (Tax Units)
HIDALGO COUNTY TAX OFFICE	GHD-SST-DR1-FD1-FD2-FD3-FD4-CAN-CLV-CMS-CPN-CPO-CWL-SEB-SLV-SML-SMS-SSL-SWL-JCC
Present mailing address *(number and street)* P O BOX 178	
City, town or post office, state, ZIP code EDINBURG TX 78540-0178	Phone *(area code and number)* (956) 318-2157

To apply for a tax refund, the taxpayer must complete the following

Step 1: Owner's name and address

Owner's name
SEPULVEDA JOE JR & SYLVIA (PAID BY: CORELOGIC)

Present mailing address *(number and street)*
7308 N 4TH ST

City, town or post office, state, ZIP code
MCALLEN, TX 78504

Phone *(area code and number)*

Legal description (or attach copy of the tax bill or tax receipt): TRENTON VILLAGE LOT 4 & S 1/2 LOT 5

Step 2: Describe the property

AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE
DATE: 2-9-15 RN.
L.C 2/10/15

Address or location of property:

613049

Account number of property:

T6880.00.000.0004.00

Tax receipt number:

OR 27521910

Step 3: Give the tax payment information

Name Of Taxing Unit from Which Refund is Requested	Year for Which Refund is Requested	Date of the Tax Payment	Amount of Taxes Paid	Amount of Tax Refund Requested
1. ALL ENTITIES	2014	12/29 / 2014	$ 12,427.48	$ 2,617.89
2.		/	$	$
3.		/	$	$
4.		/	$	$
5. TOTAL		/	$	$ 2,617.89

Taxpayer's reason for refund *(attach supporting documentation)*: SUPP# 5

FAILURE TO SEND REQUIRED NOTICE SECTION 41.411

NR

Step 4: sign the 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 ➡ Signature

Date of application for tax refund

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.

Step 5: Tax refund Determination

This tax refund is ☑ Approved ☐ Disapproved

sign here ➡ Authorized officer

Date 2/10/15

sign here ➡ Collector(s) of taxing unit(s) for refund applications over *(insert amount for which governing body approval is required under Section 31.11, tax code)*

Date 2/3/15 JE

2/4

APPLICATION FOR TAX REFUND

Collection office name	Collecting tax for: (Tax Units)
HIDALGO COUNTY TAX OFFICE	GHD-SST-DR1-FD1-FD2-FD3-FD4-CAN-CLV-CMS-CPN-CPO-CWL-SEB-SLV-SML-SMS-SSL-SWL-JCC
Present mailing address *(number and street)* P O BOX 178	
City, town or post office, state, ZIP code EDINBURG TX 78540-0178	Phone *(area code and number)* (956) 318-2157

To apply for a tax refund, the taxpayer must complete the following

Step 1: Owner's name and address

Owner's name
SEGURA JUAN & JACQUELINE (PAID BY: LERETA LLC)

Present mailing address *(number and street)*
2020 E LEVEE RD

City, town or post office, state, ZIP code
WESLACO, TX 78596

Phone *(area code and number)*

Legal description (or attach copy of the tax bill or tax receipt): WEST TRACT 2.76AC FT 823

Step 2: Describe the property

AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE
DATE: 2-9-15 RN.
D.C. P.C.

Address or location of property:

327213

Account number of property:

W3800.00.823.0000.02

Tax receipt number:

OR 27257224

Step 3: Give the tax payment information

Name Of Taxing Unit from Which Refund is Requested	Year for Which Refund is Requested	Date of the Tax Payment	Amount of Taxes Paid	Amount of Tax Refund Requested
1. ALL ENTITIES	2014	12/12 / 2014	$ 2,597.87	$ 2,597.87
2.		/	$	$
3.		/	$	$
4.		/	$	$
5. TOTAL		/	$	$ 2,597.87

Taxpayer's reason for refund *(attach supporting documentation)*: SUPP# 5

GRANT DVHS FILED LATE Q/Y 2013

NR

Step 4: sign the 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 ➡ Signature

Date of application for tax refund

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.

Step 5: Tax refund Determination

This tax refund is ☑ Approved ☐ Disapproved

sign here ➡ Authorized officer

Date 2/10/15

sign here ➡ Collector(s) of taxing unit(s) for refund applications over *(insert amount for which governing body approval is required under Section 31.11, tax code)*

Date 2/3/15 JE

2/4