

Office of Tax Assessor - Collector  
**COUNTY of HIDALGO**

*Pablo "Paul" Villarreal, Jr. R7A*



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

November 18, 2015

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.* <sup>PCC</sup>  
Pablo (Paul) Villarreal, Jr., PCC

jn

Enclosure



Office of Tax Assessor - Collector  
**COUNTY of HIDALGO**

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ACCOUNT NUMBER	PAYER	AMOUNT
C4443.99.000.0003.02	SOUTH OF THE BORDER WINGS II INC	\$13,363.92
S6442.00.000.0038.00	SELECT PORTFOLIO SERVICING, INC.	\$2,654.24
V4340.02.000.0013.00	CARLOS JAIME GARZA, P.C.	\$3,951.24



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



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

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

Email Address: REFUNDS.TAX@HIDALGOCOUNTYTAX.ORG

Print Date: 09/15/2015

AUDITED BY: THE HIDALGO  
 COUNTY AUDITOR'S OFFICE  
 DATE: 11/9/15

*P.C. 11/10/15*

Account Number  
 C4443-99-000-0003-02  
 HCAD No. 765364

Legal Description of the Property  
 INVENTORY FURNITURE FIXTURES &  
 EQUIPMENT AT 2310 EAST EXPRESSWAY 83  
 SUITE 4 / NEW ACCT 2006

2310 E EXPWY 83 STE-4&5 78572  
 OWNER: WING STOP #251

2014 OVERAGE AMOUNT \$13,363.92

WING STOP #251  
 SOUTH OF THE BORDER WING II INC  
 2310 E EXPRESSWAY 83 STE 4  
 MISSION, TX 78572-2104

1: HIDALGO COUNTY, 2: DRAINAGE DIST #1, 32: CITY OF MISSION, 51: SHARYLAND ISD, 54: SOUTH TEXAS ISD, 55: SOUTH TEXAS COLLEGE

Loan #: \_\_\_\_\_

**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	Esthela Vallejo		Relationship to Property Owner	
	Mailing Address	2310 E. Exp. 83, Ste. 4		Daytime Telephone Number	(956) 683-0085
	City, State, Zip Code	MISSION, TX 78572			
Step 2: Refunds are only issued to party that paid taxes. Affirm that you are the payer.	I paid the taxes for year <u>2014</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				
	Total tax, penalty, and interest amount owed for the year				
	Amount of refund claimed				
Step 5: How should the refund be processed?	<input type="checkbox"/>	Mail to Property Owner			
	<input checked="" 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>Esthela Vallejo</i>		Date of application	9/15/2015
	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: 11/10/15	
TAX OFFICE USE ONLY:	<input type="checkbox"/> Approved	<input type="checkbox"/> Denied	By: <i>[Signature]</i>	Date: 9/18/15	JE

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



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

**MAIL**  
 SEP 21 2015  
 Hidalgo County Tax Office  
 Received

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

Print Date: 05/11/2015

AUDITED BY: THE HIDALGO  
 COUNTY AUDITOR'S OFFICE

DATE: 11/19/15  
 P.C. 11/10/15

SELECT PORTFOLIO SERVICING INC  
 3815 SOUTH WEST TEMPLE  
 SALT LAKE CITY, UT 84115

Account Number  
 S6442-00-000-0038-00  
 HCAD No. 686132  
 Legal Description of the Property  
 STONE RIDGE ESTATES LOT 38  
 1300 MARBLE RD  
 OWNER: ACOSTA REYNALDO  
 2014 OVERAGE AMOUNT \$2,654.24

1: HIDALGO COUNTY, 2: DRAINAGE DIST #1, 33: CITY OF PHARR, 43: PHARR, SAN JUAN, ALAMO ISD, 54: SOUTH TEXAS ISD, 55: SOUTH TEXAS COLLEGE

Loan # 0015831282

APPLICATION FOR PROPERTY TAX REFUND

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Contract # 50139182

Step 1: Identify the Payer requesting the refund if different than shown above	Name <i>Select Portfolio Servicing of Leneta, LLC</i>	Relationship to Property Owner <i>Owner</i>
	Mailing Address <i>1123 Park View Drive</i>	Daytime Telephone Number <i>800-537-3821</i>
City, State, Zip Code <i>Corina, CA 91724</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>2014</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 Total tax, penalty, and interest amount owed for the year Amount of refund claimed	
Step 5: How should the refund be processed?	<input 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>[Signature]</i> Date of application <u>9/15/15</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>11/10/15</u>	
TAX OFFICE USE ONLY:	<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied By: <i>[Signature]</i> Date: <u>9/22/15</u> JE	

9-24-15





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

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

Print Date: 01/30/2015

**AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE**  
**DATE: 11/9/15**

9-28-15

J. C. 11/10/15

**CARLOS JAIME GARZA P C**  
**ATTORNEY AT LAW**  
**IOLTA ACCOUNT**  
**161 S TEXAS BLVD**  
**WESLACO, TX 78596**

<b>Account Number</b> V4340-02-000-0013-00
<b>HCAD No.</b> 531300
<b>Legal Description of the Property</b> VISTA BONITA #2 LOT 13 BRUSHLINE RD
<b>OWNER:</b> ALCALA ALBERTO & CRYSTAL
<b>2014 OVERAGE AMOUNT</b> \$3,951.24

1: HIDALGO COUNTY, 2: DRAINAGE DIST #1, 5: EMS DIST #3, 41: EDINBURG CISD, 54: SOUTH TEXAS ISD, 55: SOUTH TEXAS COLLEGE

**APPLICATION FOR PROPERTY TAX REFUND**

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<b>Step 1: Identify the Payer requesting the refund if different than shown above</b>	Name <i>Same as above</i>	Relationship to Property Owner
	Mailing Address	Daytime Telephone Number <i>(956) 973-9430</i>
	City, State, Zip Code	
<b>Step 2: Refunds are only issued to party that paid taxes. Affirm that you are the payer.</b>	I paid the taxes for year <u>2014</u> and am the party entitled to the refund.	
<b>Step 3: Mark the reason for the refund and provide a brief explanation</b>	<input checked="" type="checkbox"/> Overpaid the account	
	<input type="checkbox"/> Duplicate payment	
	<input type="checkbox"/> Paid in error (explain)	
<b>Step 4: Provide payment information</b> 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	
<b>Step 5: How should the refund be processed?</b>	<input type="checkbox"/> Mail to Property Owner	
	<input checked="" 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	
<b>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</b>	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	
	<b>SIGN HERE</b> <i>[Signature]</i>	Date of application <u>09-01-2015</u>
<b>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</b>		
<b>AUDITORS USE ONLY:</b>	<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	By: <i>[Signature]</i> Date: <u>11/10/15</u>
<b>TAX OFFICE USE ONLY:</b>	<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	By: <i>[Signature]</i> Date: <u>9/18/15</u> <b>JE</b>

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