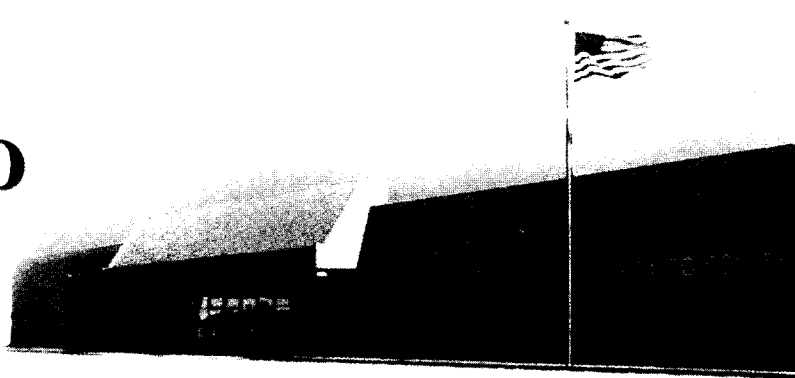


Office of Tax Assessor - Collector
COUNTY of HIDALGO

Pablo "Paul" Villarreal, Jr. RTA



April 27, 2018

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

The Honorable Ramon Garcia
Hidalgo County Commissioners
Edinburg, Texas 78539

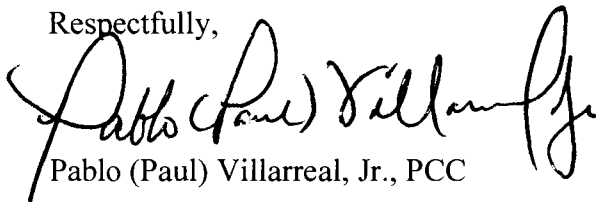
Re: See attached list

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., PCC

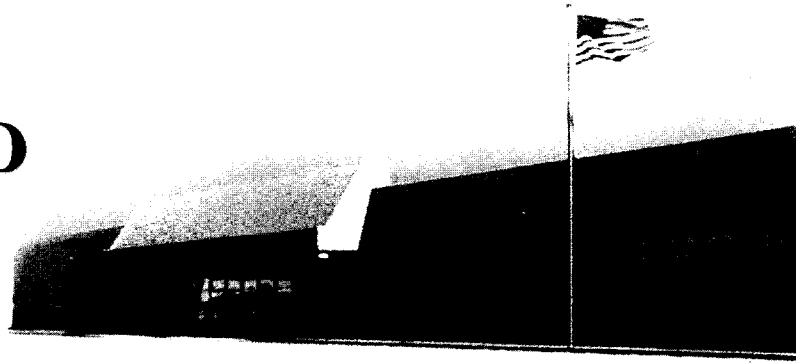
jcc

Enclosure



Office of Tax Assessor - Collector
COUNTY of HIDALGO

Pablo "Paul" Villarreal, Jr. RTA



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Edinburg, Texas 78540-0178
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ACCOUNT NUMBER	PAYER	AMOUNT
J5700.00.005.0012.00	495 & SAN JUAN CROSSING LLC	\$8,203.35
M5050.81.448.4800.00	JOHNSON HAL W	\$3,193.63
S3280.00.000.0001.00	SHOPS AT 29 LTD	\$15,695.07





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: 01/25/2018

AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE
 DATE: 04/13/18

Pl 4-19-18

495 & SAN JUAN CROSSING LLC
4000 S BURNS DR
MCALLEN, TX 78503-1382

Account Number
 J5700-00-005-0012-00
 HCAD No. 199834
 Legal Description of the Property
 JOHN CLOSNER W335'-N440' LOT 12 BLK 5
 3.42AC GR 2.49AC NET
 1618 N VETERANS BLVD
 OWNER: 495 & SAN JUAN CROSSING LLC
 2017 OVERAGE AMOUNT **\$8,203.35**

1: HIDALGO COUNTY, 2: DRAINAGE DIST #1, 37: CITY OF SAN JUAN, 43: PHARR, SAN JUAN, ALAMO 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. Notarized Affidavit required on refunds over \$500.00

Step 1: Identify the Payer requesting the refund if different than shown above	Name	<u>TAWITH SITUAIS</u>	Relationship to Property Owner	<u>PRESIDENT/OWNER</u>
	Mailing Address	<u>4000 BURNS DR. SW</u>	Daytime Telephone Number	<u>874 7975</u>
	City, State, Zip Code	<u>MCALLEN TX 78503</u>	Email Address:	
Step 2: Refunds are only issued to party that paid taxes. Affirm that you are the payer.	I paid the taxes for year <u>2017</u> and am the party entitled to the refund.			
Step 3: Mark the reason for the refund and provide a brief explanation	Overpaid the account	<u>8230.85</u>		
	Duplicate payment			
	Paid in error (explain)	<u>PAID IN ERROR BY ME, MY MISTAKE</u>		
Step 4: Provide payment information Attach copies of cancelled checks only if refund is over \$500.00	Total amount paid by this taxpayer			
	Total tax, penalty, and interest amount owed for the year			
	Amount of refund claimed	<u>8230.85</u>		
Step 5: How should the refund be processed?	Mail to Property Owner	<u>TAWITH SITUAIS</u>		
	Mail to Payer at address in Step 1	<u>YES</u>		
	Transfer this amount to account	<u>N/A</u>	For tax year	
	Escrow for next year's taxes	<u>N/A</u>		
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	<u>[Signature]</u>	Date of application	<u>02/12/18</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>4-23-18</u>
TAX OFFICE USE ONLY:	<input checked="" type="checkbox"/> Approved	<input type="checkbox"/> Denied	By: <u>[Signature]</u>	Date: <u>3/1/18</u>

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

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

Email Address: REFUNDS.TAX@HIDALGOCOUNTYTAX.ORG

Print Date: 01/02/2018

AUDITED BY: THE HIDALGO
 COUNTY AUDITOR'S OFFICE
 DATE: 20 4/13/18

*Ref 4-19-18
 J.C. 4/20/18*

JOHNSON HAL W *
 COMMUNITY PROPERTY ACCOUNT
 10445 STRAIT LN
 DALLAS, TX 75229

Account Number M5050-81-448-4800-00 * HCAD No. 20301835 *
Legal Description of the Property M5050, JOHNSON C G, MERIT ENERGY COMPANY, RI, 050000
OWNER: JOHNSON HAL WARREN *

2017 OVERAGE AMOUNT \$3,193.63 *

1: HIDALGO COUNTY, 41: EDINBURG CISD, 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. Notarized Affidavit required on refunds over \$500.00

Step 1: Identify the Payer requesting the refund if different than shown above	Name	<u>HAL W JOHNSON</u>	Relationship to Property Owner	<u>OWNER</u>
	Mailing Address	<u>10445 STRAIT LN</u>	Daytime Telephone Number	<u>214 9874461</u>
	City, State, Zip Code	<u>DALLAS TEX 75229</u>	Email Address:	<u>_____</u>
Step 2: Refunds are only issued to party that paid taxes. Affirm that you are the payer.	I paid the taxes for year <u>2017</u> and am the party entitled to the refund.			
Step 3: Mark the reason for the refund and provide a brief explanation	Overpaid the account	<u>3,193.63</u>		
	Duplicate payment			
	Paid in error (explain)	<u>see above</u>		
Step 4: Provide payment information Attach copies of cancelled checks only if refund is over \$500.00	Total amount paid by this taxpayer		<u>\$3,193.63</u>	
	Total tax, penalty, and interest amount owed for the year		<u>None</u>	
	Amount of refund claimed		<u>\$3,193.63</u>	
Step 5: How should the refund be processed?	Mail to Property Owner	<u>yes</u>		
	Mail to Payer at address in Step 1	<u>yes</u>		
	Transfer this amount to account		For tax year	
	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	<u>Hal W Johnson *</u>	Date of application	<u>1/29/18 *</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>Maria A. Deane *</u>	<u>4-23-18</u>
TAX OFFICE USE ONLY:	<input checked="" type="checkbox"/> Approved	<input type="checkbox"/> Denied	By: <u>Paul Villarreal</u>	Date: <u>3/1/18</u>

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

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

Email Address: REFUNDS.TAX@HIDALGOCOUNTYTAX.ORG

Print Date: 01/29/2018

AUDITED BY: THE HIDALGO
 COUNTY AUDITOR'S OFFICE
 DATE: RO 4/13/18

*llg 4-19-18
 J.C. 4/20/18*

X
 SHOPS AT 29 LTD
 10101 REUNION PLACE SUITE 500
 SAN ANTONIO, TX 78216

Account Number S3280-00-000-0001-00 † HCAD No. 1069298 †
Legal Description of the Property SHOPS AT 29 LOTS 1, 2, 3, 5 & 6 2700 US EXPWY 83
OWNER: SHOPS AT 29 LTD †

2017 OVERAGE AMOUNT \$15,695.07 †

1: HIDALGO COUNTY, 2: DRAINAGE DIST #1, 47: MCALLEN 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. Notarized Affidavit required on refunds over \$500.00

Step 1: Identify the Payer requesting the refund if different than shown above	Name		Relationship to Property Owner
	Mailing Address		Daytime Telephone Number
	City, State, Zip Code		Email Address:
Step 2: Refunds are only issued to party that paid taxes. Affirm that you are the payer.	I paid the taxes for year <u>2017</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>Used April amount instead of January due date amount</u>
	<input type="checkbox"/>	Duplicate payment	
	<input type="checkbox"/>	Paid in error (explain)	
Step 4: Provide payment information Attach copies of cancelled checks only if refund is over \$500.00	Total amount paid by this taxpayer		<u>\$190,084.88</u>
	Total tax, penalty, and interest amount owed for the year		
	Amount of refund claimed		<u>\$15,695.07</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	<u>[Signature]</u> †	Date of application <u>2/13/18</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>Maria A. Deaton</u> † Date: <u>4-23-18</u>
TAX OFFICE USE ONLY:	<input checked="" type="checkbox"/> Approved	<input type="checkbox"/> Denied	By: <u>Paul Villarreal</u> † Date: <u>3/1/18</u> †

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