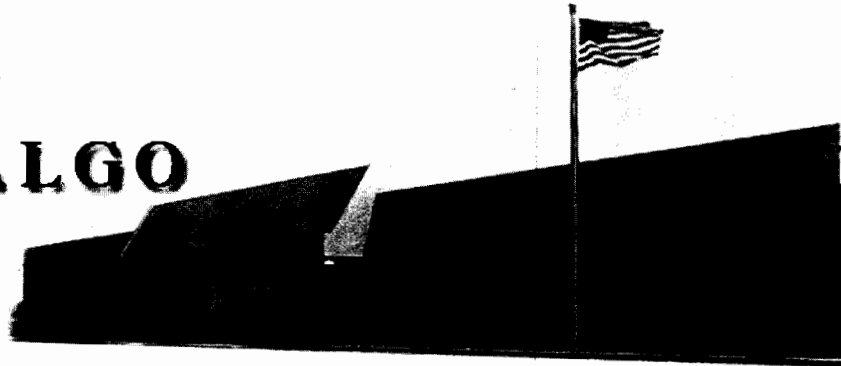


Office of Tax Assessor-Collector

COUNTY of HIDALGO



Pablo "Paul" Villarreal, Jr. PCC.

Hidalgo County Tax Assessor-Collector

JULY 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. ^{JEJ}

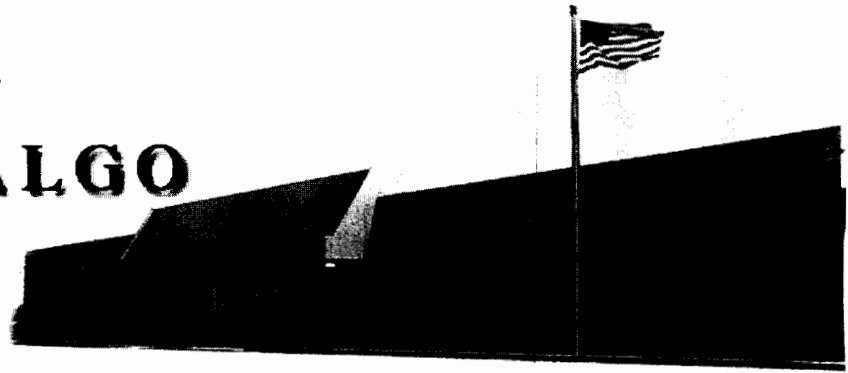
Pablo (Paul) Villarreal, Jr., PCC

br

Enclosure

Office of Tax Assessor-Collector

COUNTY of HIDALGO



Pablo "Paul" Villarreal, Jr. PCC.

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ACCOUNT NUMBER	PAYER	AMOUNT
P2344.99.000.0003.04	PANDA RESTAURANT GROUP INC	\$6,365.81
R1155.00.000.0002.00	CORELOGIC	\$2,553.43
S2544.01.000.0016.00	OCWEN LOAN SERVICING LLC	\$3,272.00

Patty, Esmeralda



PABLO (PAUL) VILLARREAL JR., PCC
Hidalgo County Tax Assessor - Collector

Phone No.: (956) 318-2157

Fax No.: 956-318-2733

SECOND

NOTICE

JUN 15 2018

AUDITED BY: THE HIDALGO
COUNTY AUDITOR'S OFFICE
DATE: 7/23/18

ll 7-24-18

Account Number P2344-99-000-0003-04 + HCAD No. 1019216 +
Legal Description of the Property INVENTORY SUPPLIES FURNITURE FIXTURES & EQUIPMENT AT 220 E MILE 3 RD / NEW ACCT 2016 220 E MILE 3 RD 78573 OWNER: PANDA EXPRESS #2609 +

2017 OVERAGE AMOUNT \$6,365.81 +

1: HIDALGO COUNTY, 2: DRAINAGE DIST #1, 48: MISSION 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		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	
	<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		26,484.26
	Total tax, penalty, and interest amount owed for the year		
	Amount of refund claimed		6,365.81
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>6/22/18</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: _____
TAX OFFICE USE ONLY:	<input checked="" type="checkbox"/> Approved	<input type="checkbox"/> Denied	By: <u>[Signature]</u> Date: <u>7/3/18</u> +

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

7/5 +

7/3/18 +

APPLICATION FOR TAX REFUND

Collection office name HIDALGO COUNTY TAX OFFICE	Collecting tax for: (Tax Units) 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 SAENZ BROTHERS CONSTRUCTION LLC (PD BY: CORELOGIC)
	Present mailing address (number and street) 3226 N VICTORIA RD
	City, town or post office, state, ZIP code DONNA, TX 78537
	Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **RANCHO VICTORIA LOT 2**

Step 2: Describe the property	Address or location of property: 2909 CYPRESS DR
	575961
	Account number of property: R1155-00-000-0002-00 OR Tax receipt number: 36310384

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	2017 ✓	12/15 / 2017 ✓	\$	\$ 2,553.43
	2.		/	\$	\$
	3.		/	\$	\$
	4.		/	\$	\$
	5. TOTAL		/	\$ TOTAL	\$ 2,553.43

Taxpayer's reason for refund (attach supporting documentation): **PAID IN ERROR ON ACCT. #575961. CORRECT BR APPLY TO ACCT #R1155-00-000-0043-00 ALREADY PD. REFUND TO CORELOGIC**

BR

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 <i>Cynthia Paland</i>	Date of application for tax refund 5/18/18

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 <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved		AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE
	DATE: 7/20/18		7-20-18
	Authorized officer sign here <i>Marisa A. Duran</i>	Date 7-20-18	
Collector(s) of taxing unit(s) for refund application over which amount for which governing body approval is required under Section 31.11, tax code	sign here <i>Paul Hill</i>	Date 6/8/18	7/17



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: 05/31/2018

**AUDITED BY: THE HIDALGO
 COUNTY AUDITOR'S OFFICE**
DATE: 7/17/18 M.R.
ll 7-18-18 J.C. 7/14/18

OCWEN LOAN SERVICING LLC
1661 WORTHINGTON ROAD-SUITE 100
WEST PALM BEACH, FL 33409

Account Number S2544-01-000-0016-00 d HCAD No. 689551 a
Legal Description of the Property SEVILLA PH 1, SHARYLAND PLTN VLG LOT 16 3403 SANTA MONICA OWNER: MENDEZ JOSE A & MARISA e

2017 OVERAGE AMOUNT \$3,272.00 d

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

Loan #: 7092640270

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>Ocwen Loan Servicing</u>	Relationship to Property Owner
	Mailing Address <u>1661 Worthington Rd</u>	Daytime Telephone Number <u>561 682 7125</u>
	City, State, Zip Code <u>WPB FL 33409</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	<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 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	
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 <u>[Signature]</u>	Date of application <u>6/20/18</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>Marisa A. DeLeon</u> Date: <u>7-18-18</u>
TAX OFFICE USE ONLY:	<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	By: <u>Paul Villarreal</u> Date: <u>6/27/18</u>

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

6/27/18