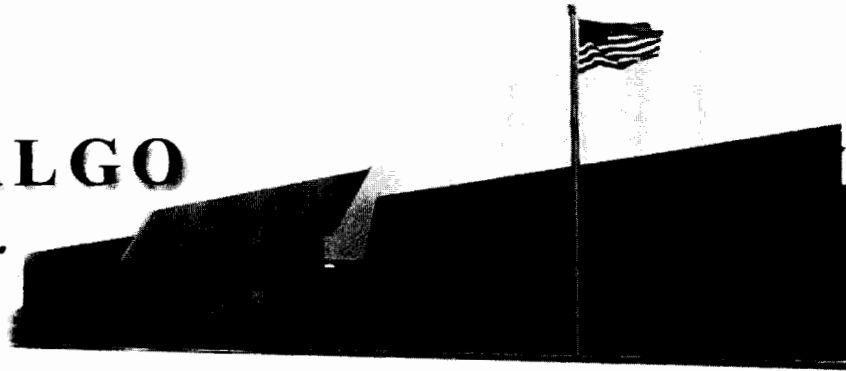


Office of Tax Assessor-Collector

# COUNTY of HIDALGO

Pablo "Paul" Villarreal, Jr. PCC.



June 19, 2019

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

The Honorable Richard F. Cortez  
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,

A handwritten signature in black ink that reads "Pablo (Paul) Villarreal, Jr." with a stylized flourish at the end.

Pablo (Paul) Villarreal, Jr., PCC

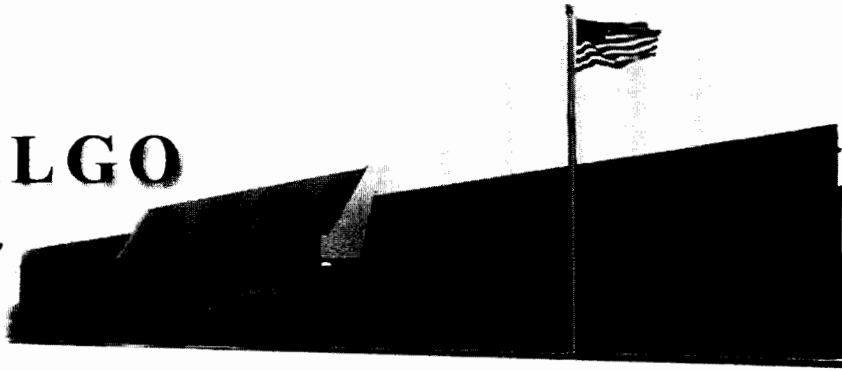
BG

Enclosure

*Office of Tax Assessor-Collector*

# COUNTY of HIDALGO

*Pablo "Paul" Villarreal, Jr. PCC.*



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ACCOUNT NUMBER	PAYER	AMOUNT
C2275.00.000.0033.00	CORELOGIC	\$7,043.53
E5350.99.000.0001.01	FRENCH ELLISON TRUCK CENTER	\$24,175.08

MAY 09 2019 6

**APPLICATION FOR TAX REFUND**

Collection office name <b>HIDALGO COUNTY TAX OFFICE</b>	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) <b>P O BOX 178</b>	
City, town or post office, state, ZIP code <b>EDINBURG TX 78540-0178</b>	Phone (area code and number) <b>(956) 318-2157</b>

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

<b>Step 1:</b> Owner's name and address	Owner's name <b>RAMIREZ OLEGARIO &amp; SANDRA (PD BY: CORELOGIC)</b>
	Present mailing address (number and street) <b>1806 VICTORY DR</b>
	City, town or post office, state, ZIP code <b>SAN JUAN, TX 78589-0139</b>
	Phone (area code and number) <b></b>

Legal description (or attach copy of the tax bill or tax receipt): **CASTLE HEIGHTS LOT 33**

**Step 2:**  
Describe the property

Address or location of property:  
**1012674 4**

Account number of property: **C2275.00.000.0033.00 4** OR **39277613** Tax receipt number:

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		2018	12/14 / 2018	\$ 5,543.53
2. OVERPAYMENT		2018	12/14 / 2018	\$ 1,500.00	\$ 1,500.00
3.			/	\$	\$
4.			/	\$	\$
5. TOTAL			/	\$ TOTAL	\$ 7,043.53 4

Taxpayer's reason for refund (attach supporting documentation): **PAID IN ERROR TAXPAYER NOT RESPONSIBLE TO PAY ON THIS ACCT. CORRECT ACCT #H4650.00.00B.0000.00 (ALREADY PD) REFUND BACK 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  Signature **Cherie Duran 4** Date of application for tax refund **5/10/19 4**

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

AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE  
DATE: **6/14/19**  
**RE 6-17-19** **5/23/19**

sign here  Authorized officer **Maria A. Duran 4** Date **6-18-19**

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 Dill 4** Date **5/15/19 4**

5/23  
5/23/19



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

**MAY 16 2019 FINAL NOTICE**  
 Phone No.: (956) 318-2157  
 Fax No.: 956-318-2733  
 Email Address: REFUNDS.TAX@HIDALGOCOUNTYTAX.ORG

Print Date: 02/16/2018

**SECOND**  
 MAY 15 2018  
**NOTICE**

FRENCH ELLISON TRUCK CENTER  
 PO BOX 200187  
 SAN ANTONIO, TX 78220

AUDITED BY: THE HIDALGO  
 COUNTY AUDITOR'S OFFICE  
 DATE: 6/14/19  
 6-17-19

Account Number E5350-99-000-0001-01 HCAD No. 541142
Legal Description of the Property INVENTORY FURNITURE FIXTURES EQUIPMENT & VEHICLES AT 4300 NORTH CAGE BLVD(SEE E5350-93-000-0001-01)/NEW ACCT 1995 4300 N CAGE BLVD 78577 OWNER: FRENCH-ELLISON TRUCK CENTER
2017 OVERAGE AMOUNT \$24,175.08

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

**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	31,866.69
	Total tax, penalty, and interest amount owed for the year	7,691.61
	Amount of refund claimed	24,175.08
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>Claudia V. Lopez</u>	Date of application <u>05/21/2019</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 77.10	
AUDITORS USE ONLY:	<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	By: <u>Maria A. Duran</u> Date: <u>6-18-19</u>
TAX OFFICE USE ONLY:	<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	By: <u>Paul Villarreal</u> Date: <u>5/20/19</u>

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

5/30

CAP 5/13