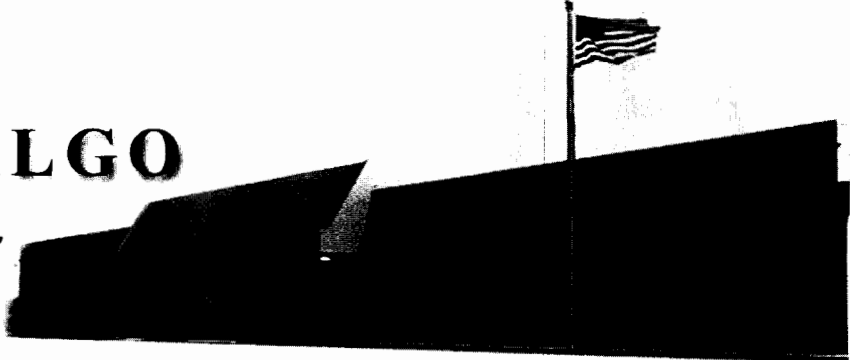


Office of Tax Assessor-Collector

COUNTY of HIDALGO

Pablo "Paul" Villarreal, Jr. PCC.



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

November 04, 2020

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,

Pablo (Paul) Villarreal, Jr., PCC

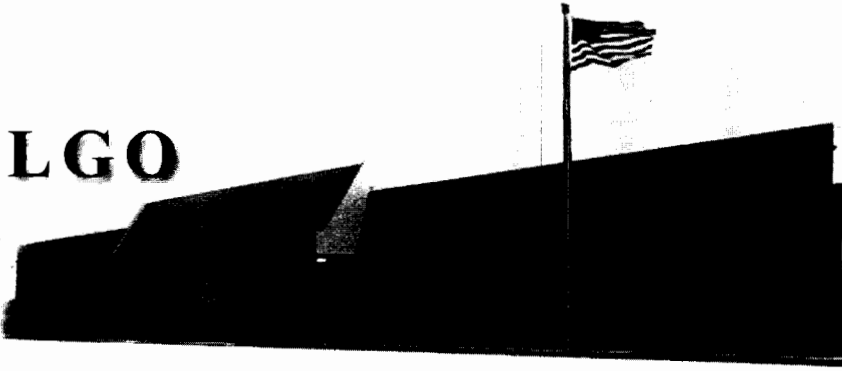
SP

Enclosure

Office of Tax Assessor-Collector

COUNTY *of* HIDALGO

Pablo "Paul" Villarreal, Jr. PCC.



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ACCOUNT NUMBER	PAYER	AMOUNT
S2950.00.000.0214.10	EMPIRE HOME DEVELOPMENTS LLC	\$2,680.76



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: 01/16/2020

AUDITED BY: THE HIDALGO COUNTY AUDITOR
 DATE: 10/21/2020 *SK*

Ray Cantu 10/28/2020
JJ 11/2/2020

EMPIRE HOME DEVELOPMENTS LLC
 808 S SHARY RD STE 5
 MISSION, TX 78572-8669

Account Number 82950-00-000-0214-10 <i>X</i>
HCAD No. 281149 <i>X</i>
Legal Description of the Property JOHN H SHARY 8397.77' - N768.77' - E367 LOT 214 2.92AC OR 2.63AC NET
SHARY RD <i>X</i>
OWNER: EMPIRE HOME DEVELOPMENTS LLC

1: HIDALGO COUNTY, 2: DRAINAGE DIST #1, 32: CITY OF MISSION, 31: SHARYLAND ISD, 54: SOUTH TEXAS ISD, 55: SOUTH TEXAS COLLEGE
 2019 OVERLAGE AMOUNT \$2,688.76 *X*
 Less #:

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 above	Name EMPIRE HOME DEVELOPMENTS LLC	Relationship to Property Owner OWNER
	Mailing Address 808 S SHARY RD SUITE 5 BOX 408	Daytime Telephone Number (956)687-1191
	City, State, Zip Code MISSION, TX 78572	Email Address: abosach@hotmail.com
Step 2: Refunds are only issued to party that paid taxes. Affirm that you are the payer.	I paid the taxes for year <u>2019</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	67,827.08
	<input type="checkbox"/> Duplicate payment	65,146.32
	<input type="checkbox"/> Paid in error (explain)	62,680.76
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	EMPIRE HOME DEVELOPMENTS LLC <input checked="" type="checkbox"/>
	<input type="checkbox"/> Mail to Payer at address in Step 1	FROST BANK
	<input checked="" type="checkbox"/> Transfer this amount to account	ABA: 114000093 For tax year
	<input type="checkbox"/> Escrow for next year's taxes	ACCT:800343498
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> <i>X</i>	Date of application 9/18/2020
	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: 11/02/2020
TAX OFFICE USE ONLY:	<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	By: <i>[Signature]</i> Date: 9/23/2020

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

JK
9-23-2020