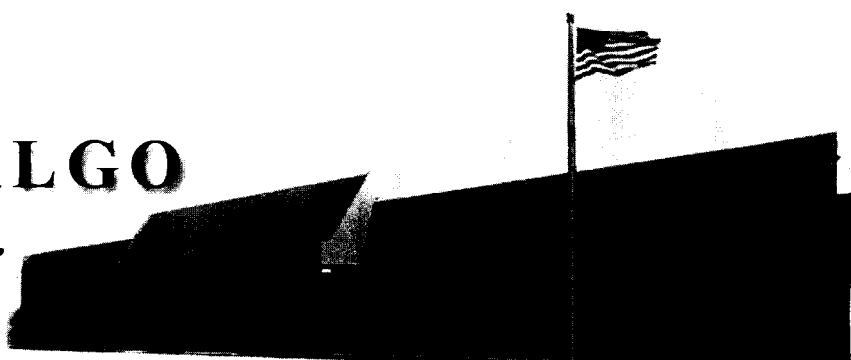


Office of Tax Assessor-Collector

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

February 19, 2021

The Honorable Richard F. Cortez
Hidalgo County Commissioners
Edinburg, Texas 78539

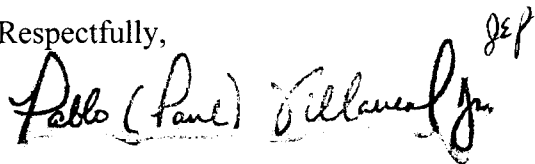
Re: See attached list

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.

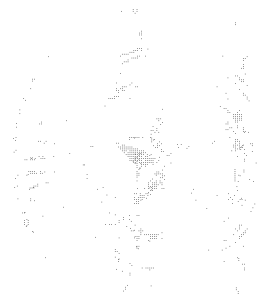
Respectfully,



Pablo (Paul) Villarreal, Jr., PCC

SP

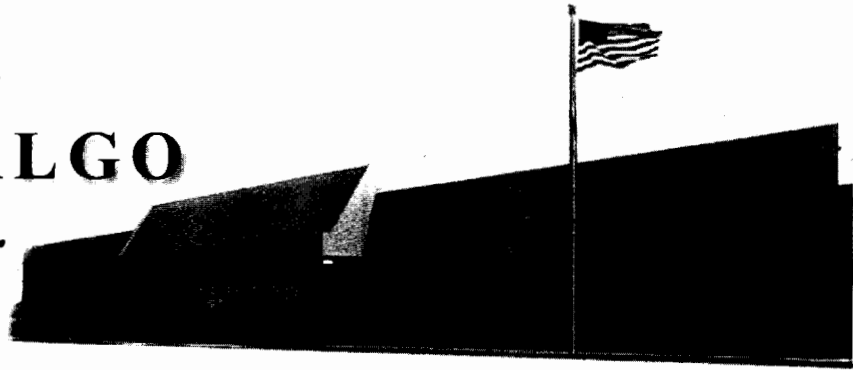
Enclosure



Office of Tax Assessor-Collector

COUNTY of HIDALGO

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ACCOUNT NUMBER	PAYER	AMOUNT
C1400.00.039.0004.01	EDNA COX AUTO SALES INC	\$3,067.67
L1700.99.000.001A.J1	SWAROVSKI NORTH AMERICA, LTD.	\$6,977.90
R3052.99.001.0001.R4	SWAROVSKI NORTH AMERICA, LTD.	\$22,515.48



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

PO BOX 178 EDINBURG, TX 78540-0178 Email Address: REFUNDS.TAX@HIDALGOCOUNTYTAX.ORG

Phone No.: (956) 318-2157

Fax No.: 956-318-2733

Print Date: 12/27/2019

4470
 ↗

EDNA COX AUTO SALES INC
DBA JERRYS AUTO SALES
 2540 W BUS 77
 SAN BENITO, TX 78586

Reynaldo Cantu AdAd 2/18/2021
 JS 2/18/2021

APPROVED BY THE HIDALGO
 COUNTY AUDITOR'S OFFICE
 DATE: 02/03/21 KARON R

Account Number C1400-00-039-0004-01
HCAD No. 131118
Legal Description of the Property CAPISALLO LOT 4 BLK 39 21.26AC GR 19.49AC NET 6170 S MILE I EAST 78570
OWNER: HEARN GARY & EDNA
2019 OVERAGE AMOUNT \$3,067.67

1: HIDALGO COUNTY, 2: DRAINAGE DIST #1, 4: EMS DIST #2, 46: MERCEDRES 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 <i>Edna + Gary Hearn</i>	Relationship to Property Owner <i>Mother Son</i>
	Mailing Address <i>6170 mile I East</i>	Daytime Telephone Number <i>956 456 9224</i>
	City, State, Zip Code <i>Mercedes, TX 78570</i>	Email Address: <i>KRWA Ranch@aol.com</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>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	
	<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	<i>25,643.88</i>
	Total tax, penalty, and interest amount owed for the year	<i>22,576.21</i>
	Amount of refund claimed	<i>3,067.67</i>
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 checked="" type="checkbox"/> Transfer this amount to account 131118	For tax year 2020 per Tax Office
	<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>Edna Hearn</i>	Date of application <i>1-7-2021</i>
	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>Junda Jorg</i> Date: <i>02/18/2021</i>
TAX OFFICE USE ONLY:	<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	By: <i>Paul Villarreal</i> Date: <i>1/22/2020</i>

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

AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE
 DATE: 12/28/20 KAREN R.

APPLICATION FOR TAX REFUND

Collector office name: **HIDALGO COUNTY TAX OFFICE Reynaldo Cantu A.A. 1/15/21**

Formal mailing address (number and street): **P O BOX 178**

City, town or jurisdiction, state, ZIP code: **EDINBURG TX 78540-0178**

Collecting tax for: (Tax Units) **GRD-SST-DRJ-FD1-FD2-FD3-FD4-CAN-CLV-CMB-CFN-CFO-CWL-SEB-SLV-SML-MS-SSL-SWL-JCC**

Phone (area code and number): **(956) 318-2157**

Date: **2/4/2021**

To qualify for a tax refund, the taxpayer must complete the following:

Step 1: Owner's name and address

Owner's name: **KWAROVSKI RETAIL VENTURES LTD / ATTN: DEB GIBROUX**

Formal mailing address (number and street): **1 KENNEDY DR**

City, town or post office, state, ZIP code: **CRANSTON, RI 02920-4403**

Phone (area code and number):

Step 2: Describe the property

Legal description (or attach copy of the tax bill or tax receipt): **INVENTORY SUPPLIES FURNITURE FIXTURES & EQUIPMENT AT 2200 S 10TH ST STE #Q13B / NEW ACCT 2004**

Address or location of property:

662407

Account number of property: **L1700.99.000.001A.J1** OR **36423778**

Tax receipt number:

Step 3: Give the tax payment information

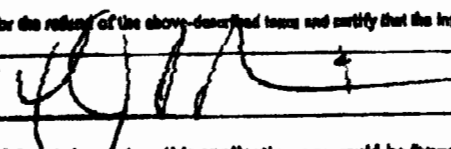
Name Of Trading Unit from Which Refund is Requested	Year for Which Refund is Requested	Date of the Tax Payment	Amount of Taxes Paid	Amount of Tax Refund Requested
1. ALL INVTIES	2017	12/21	\$ 6,977.90	\$ 6,977.90
2.			\$	\$
3.			\$	\$
4.			\$	\$
5. TOTAL			\$	\$ 6,977.90

Taxpayer's reason for refund (attach supporting documentation): **OVER PAYMENT**

NR

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."

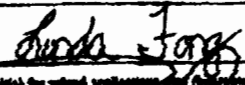
Signature: 

Date of application for tax refund: **9/2/2020**

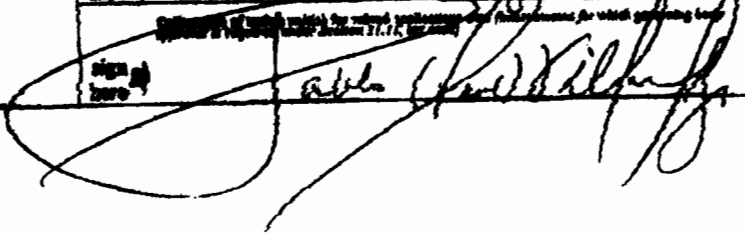
If you make a false statement on this application, you could be found guilty of a Class A misdemeanor or a state jail felony under Texas Penal Code Section 37.30.

Step 5: Tax refund Determination

This tax refund is Approved Disapproved

Authorized officer: 

Date: **2/5/2021**

Signature of Taxpayer: 

Date: **12/22/2020**

AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE
 DATE: ~~12/20/20~~ ~~KAREN~~
 2/4/2021

APPLICATION FOR TAX REFUND

Collection office name: HIDALGO COUNTY TAX OFFICE <i>Rayvaldo Castro Act</i> 1/15/21		Collecting tax line (Tax Units) GHD-SST-DRI-FD1-FD2-FD3-FD4-CAN-CLV-CMS-CPN-CPO-CWL-SEB-SLV-SML-SMS-SNL-SWL-JCC																															
P O BOX 178 City, town or post office, state, ZIP code EDINBURG TX 78740-0178		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 EMAROVSKI METAL VENTURES LTD / ATTN: DEB GIROUX																																
	Present mailing address (number and street) 1 KENNEY DR																																
	City, town or post office, state, ZIP code CRANFORD, RI 02920-4403		Phone (area code and number)																														
Step 2: Describe the property	Legal description (attach copy of the tax bill or tax receipt): INVENTORY SUPPLIES FURNITURE PICTURES & EQUIPMENT AT 5001 E EXPWY 83 STE 600H (RGV PREMIUM OUTLET) NEW ACCT 2015																																
	Address or location of property: 964320																																
	Account number of property: R3052.99.001.0001.R4	OR	Tax receipt number: 36423758																														
Step 3: Give the tax payment information	<table border="1"> <thead> <tr> <th>Name Of Taxing Unit from Which Refund is Requested</th> <th>Year for Which Refund is Requested</th> <th>Date of the Tax Payment</th> <th>Amount of Taxes Paid</th> <th>Amount of Tax Refund Requested</th> </tr> </thead> <tbody> <tr> <td>1. ALL ENTITIES</td> <td>2017</td> <td>12/21</td> <td>\$ 22,515.48</td> <td>\$ 22,515.48</td> </tr> <tr> <td>2.</td> <td></td> <td></td> <td>\$</td> <td>\$</td> </tr> <tr> <td>3.</td> <td></td> <td></td> <td>\$</td> <td>\$</td> </tr> <tr> <td>4.</td> <td></td> <td></td> <td>\$</td> <td>\$</td> </tr> <tr> <td>5. TOTAL</td> <td></td> <td></td> <td>\$</td> <td>\$ 22,515.48</td> </tr> </tbody> </table>			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	12/21	\$ 22,515.48	\$ 22,515.48	2.			\$	\$	3.			\$	\$	4.			\$	\$	5. TOTAL			\$	\$ 22,515.48
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Step 5: Tax refund Determination	This tax refund is <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved																																
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