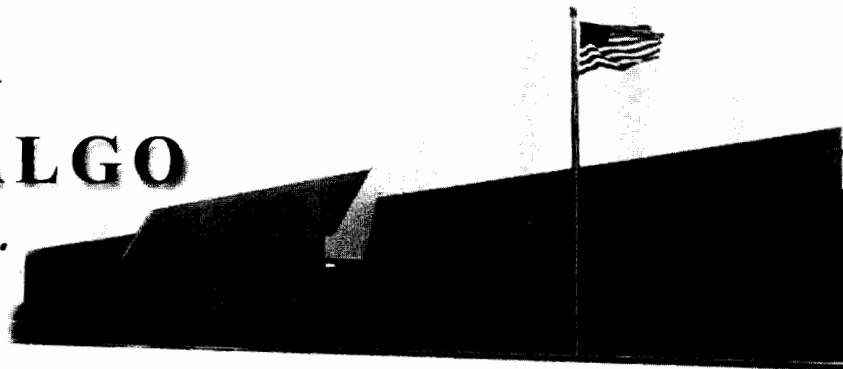


Office of Tax Assessor-Collector

# 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](http://www.hidalgocountytax.org)

April 27, 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

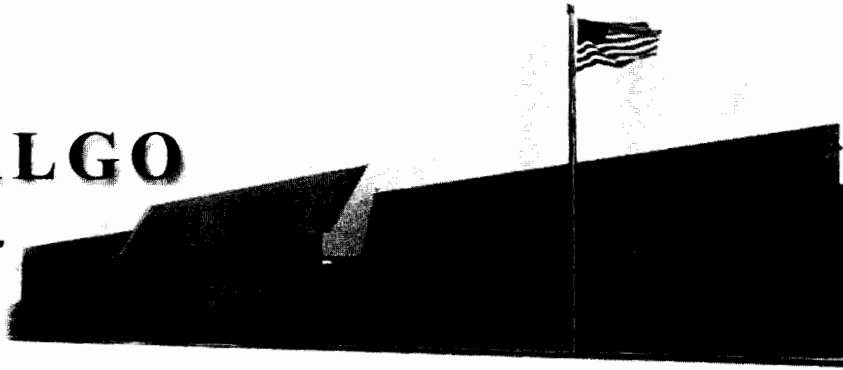
SP

Enclosure

Office of Tax Assessor-Collector

# COUNTY of HIDALGO

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ACCOUNT NUMBER	PAYER	AMOUNT
F0330.04.000.0258.00	EDWARDS ABSTRACT AND TITLE CO.	\$4,629.85
L6446.05.000.0555.00	ISRAEL GONZALEZ	\$3,800.00



**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: 03/03/2021

AUDITED BY: THE HIDALGO  
 COUNTY AUDITOR'S OFFICE  
 DATE: 4/22/21 E.L.

*Raynaldo Cantu S.A.A. 4/23/21*

*JL 4/26/2021*

**EDWARDS ABSTRACT AND TITLE CO. ✗**  
**ESCROW ACCOUNT**  
**2506 E. GRIFFIN PARKWAY**  
**MISSION, TX 78572**

Account Number F0330-04-000-0258-00 ✗ HCAD No. 790650 ✗
Legal Description of the Property FAIRHAVEN HEIGHTS PH 4 LOT 258 - AMENDED 2010 WEBSTER DR 78542
OWNER: MEANS ✗ BRADFORD & APRIL GUTIERREZ

1: HIDALGO COUNTY, 2: DRAINAGE DIST #1, 22: CITY OF EDINBURG, 41: EDINBURG CISD, 54: SOUTH TEXAS ISD, 55: SOUTH TEXAS COLLEGE  
 2020 OVERAGE AMOUNT \$4,629.85 ✗  
 Loan #: 933452

**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	Dynamic Telephone Number
Step 2: Refunds are only issued to party that paid taxes. Affirm that you are the payer.	City, State, Zip Code	Email Address:
	I paid the taxes for year _____ and am the party entitled to the refund.	
Step 3: Mark the reason for the refund and provide a brief explanation	<input 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 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 <i>R. Medina ✗</i>	Date of application <u>4-13-21</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: <i>Ronda Fajal</i> Date: <u>04/26/2021</u>
TAX OFFICE USE ONLY:	<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	By: <i>Paul Villarreal ✗</i> Date: <u>4/19/2021</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 Email Address: REFUNDS.TAX@HIDALGOCOUNTYTAX.ORG

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

Print Date: 03/22/2021

AUDITED BY: THE HIDALGO COUNTY AUDITOR'S OFFICE  
 DATE: 4/22/21 C.L.

*Raynaldo Carter* 4/23/21

*JL* 4/26/2021

ISRAEL GONZALEZ ✕  
 20002 BUCK FAWN DR  
 EDINBURG, TX 78542

Account Number L6446-05-000-0555-00 ✕ HCAD No. 702206 ✕
Legal Description of the Property LOS VENADOS PH 5 LOT 555  20002 BUCK FAWN DR 78539
OWNER: GONZALEZ ISRAEL & RENA B CARTER ✕
2020 OVERAGE AMOUNT \$3,800.00 ✕

1: HIDALGO COUNTY, 5: EMS DIST #3, 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	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 _____ and am the party entitled to the refund.	
Step 3: Mark the reason for the refund and provide a brief explanation	<input 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 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 <del>061604294</del> <u>216</u> 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 <i>Israel Gonzalez ✕</i> <i>Rena Carter ✕</i>	Date of application <u>4/9/2021</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: <i>Donda Fogg</i> Date: <u>04/26/2021</u>
TAX OFFICE USE ONLY:	<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	By: <i>Paul Villarreal ✕</i> Date: <u>4/19/2021</u>

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