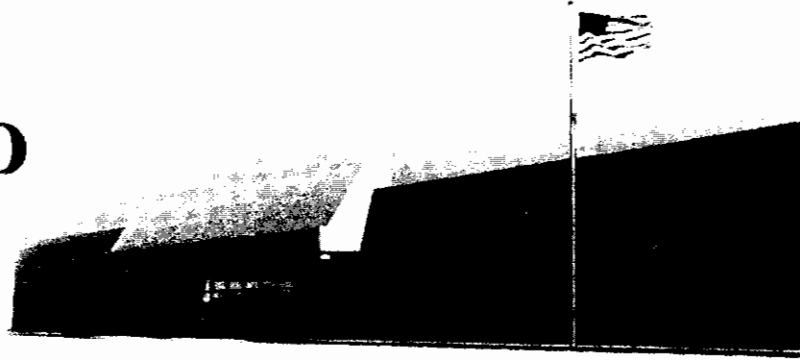


Office of Tax Assessor - Collector
COUNTY of HIDALGO
Pablo "Paul" Villarreal, Jr. R7A



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

October 12, 2022

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

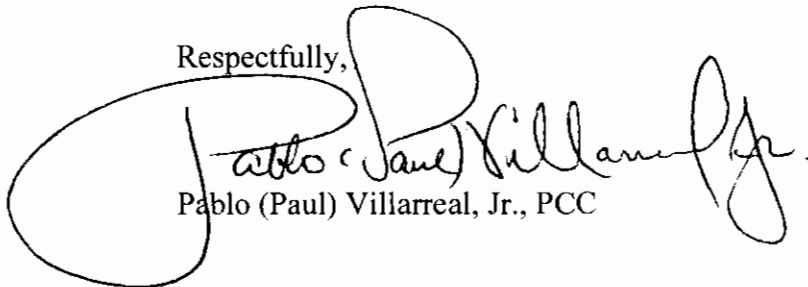
Re: See attached list

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.

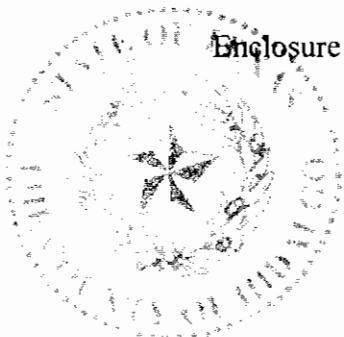
When completed, please return the attached to our office. Thank you for your assistance in this matter.

Respectfully,


Pablo (Paul) Villarreal, Jr., PCC

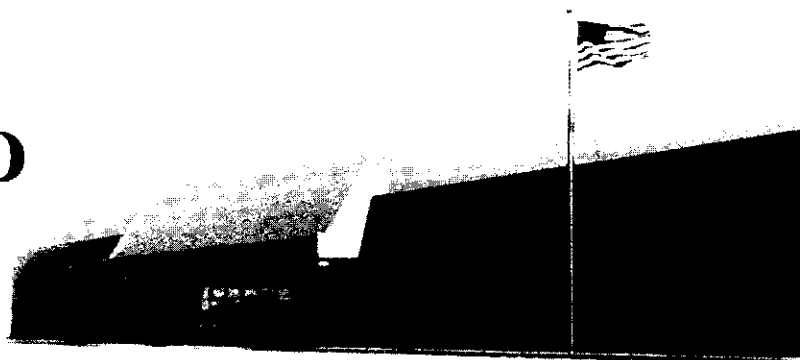
JVR

Enclosure



Office of Tax Assessor - Collector
COUNTY of HIDALGO

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ACCOUNT NUMBER	PAYER	AMOUNT
M2650.00.008.0008.03	VANTAGE BANK	\$15,640.13
O3950.00.000.0030.00	CORELOGIC	\$5,874.74
O3950.00.000.0030.00	CORELOGIC	\$3,041.26
O8200.00.000.0049.00	KANE TITLE LLC	\$2,511.73



THE HIDALGO COUNTY AUDITOR'S OFFICE

APPROVED BY: 10/6/22 LV

DATE: Reynaldo Cantu A.A. 10/6/22
[Signature] 10/11/2022

VANTAGE BANK
 PO BOX 1728
 MCALLEN, TX 78505-172

Account Number
 M2650-00-008-0008-03 ✓
 HCAD No. 231234 ✓

Legal Description of the Property
 MCCOLL TRACT SW .85AC E3.81AC NE9.36AC
 & N106.49'-S1022.98'-E161.43' BLK 8 LOT
 8

1601 W RIDGE RD

OWNER: ZUNIGA ANDRES J ✓

2021 OVERAGE AMOUNT \$15,640.13 ✓

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 shows 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 checked="" type="checkbox"/> Paid in error (explain) <i>paid wrong acct #</i>	
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 checked="" type="checkbox"/> Transfer this amount to account <i>M2650-00-008-0008-03</i> For tax year <i>2021</i>	
	<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>[Signature]</i>	Date of application <i>08/16/2022</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>[Signature]</i> Date: 10/11/2022
TAX OFFICE USE ONLY:	<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	By: <i>[Signature]</i> Date: <i>9/22/22</i>

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

APPROVED BY: *Karen Ramirez*

DATE: 09/23/2022

APPLICATION FOR TAX REFUND

Raypaldo Cantu Acct 9/26/22

Collection office name HIDALGO COUNTY TAX OFFICE	<i>JR</i> 10/11/2022	Collecting tax for: (Tax Units) GHD-SST-DR1-FD1-FD2-FD3-FD4-CAN- CLV-CMS-CPN-CPO-CWL-SEB-SLV- SML-SMS-SSL-SWT-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 ACEDO LISA ESTELA & ERIC LEE CASTANEDA (PD BY: CORELOGIC) ✓
	Present mailing address (number and street) 12014 ACOSTA CIR
	City, town or post office, state, ZIP code MISSION, TX 78573-7799
	Phone (area code and number)

Step 2: Describe the property	Legal description (or attach copy of the tax bill or tax receipt): 107 WEST LOT 30
	Address or location of property: 12032 ACOSTA CIR E
	251694 ✓
	Account number of property: 03950.00.000.0030.00 ✓ OR 42324803/45336043 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	2019	✓ 2/18	/ 2019	\$ 2,897.43
2. ALL ENTITIES	2020	✓ 12/17	/ 2020	\$ 2,977.31	\$ 2,977.31
3.			/	\$	\$
4.			/	\$	\$
5. TOTAL			/	\$	\$ 5,874.74

Taxpayer's reason for refund (attach supporting documentation): **PAYER PAID ON INCORRECT PARCEL, IS REQUESTING THEIR FUNDS BACK. CORRECT PARCEL PAID IN FULL**
JVR

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 sign here <i>Danielle Nellum</i> <i>Danielle Nellum</i> ✓	Date of application for tax refund 9.13.22

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	
	Authorized officer sign here <i>Linda Fong</i>	Date 10/11/2022
	Collector(s) of taxing unit(s) for refund applications over (insert amount for which governing body approval is required under Section 31.17) (see code) sign here <i>Paul Williams</i> ✓	Date 9/22/22

APPLICATION FOR TAX REFUND

Raypaldo Cantu Act 9/26/22

Collection office name HIDALGO COUNTY TAX OFFICE	10/11/2022	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: **ACEDO LISA ESTELA & ERIC LEE CASTANEDA (PD BY: CORELOGIC)** ✓

Present mailing address (number and street): **12014 ACOSTA CIR**

City, town or post office, state, ZIP code: **MISSION, TX 78573-7799**

Phone (area code and number):

Step 2: Describe the property

Legal description (or attach copy of the tax bill or tax receipt): **107 WEST LOT 30**

Address or location of property: **12032 ACOSTA CIR E**

251694 ✓

Account number of property: **03950.00.000.0030.00** ✓

Tax receipt number: **OR 48919571**

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	2021 ✓	12/29 / 2021	\$ 3,041.26	\$ 3,041.26
2.		/	\$	\$
3.		/	\$	\$
4.		/	\$	\$
5. TOTAL		/	\$	\$ 3,041.26 ✓

Taxpayer's reason for refund (attach supporting documentation): **PAID IN ERROR TAXPAYER NOT RESPONSIBLE TO PAY ON THIS ACCOUNT WANTS REFUND TO BE APPLIED TO ACCT #251697 (\$900.94) AND REFUND DIFF (\$2,140.32)**

ACCT PAID IN FULL 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."

Signature: *Danielle Nellum* *Danielle Nellum*

Date of application for tax refund: **9.13.22**

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

Authorized officer: *Linda Fong* Date: **10/11/2022**

Collector(s) of taxing unit(s) for refund applications over (insert amount for which governing body approval is required under Section 37.11, tax code): *Jane Hill* ✓ Date: **9/16/2022**



PABLO (PAUL) VILLARREAL JR., PCC
 Hidalgo County Tax Assessor - Collector
 PO BOX 178 EDINBURG, TX 78540-0178 Email Address: REFUNDS.TAX@HIDALGOCOUNTYTX.ORG

MAIL
 SEP 12 2022
 Hidalgo County Tax Office
 Received

Phone No.: (956) 318-2157
 Fax No.: 956-318-2733
 Print Date: 08/25/2021

THE HIDALGO COUNTY AUDITOR'S OFFICE

APPROVED BY: 10/6/22 LV

DATE: Reynaldo Cantu A.A. 10/6/22

10/11/2022

KANE TITLE LLC
 5301 VILLAGE CREEK DRIVE SUITE A
 PLANO, TX 75093

AUG 29 2022

SECOND NOTICE

Account Number 08200-00-000-0049-00 ✓ HCAD No. 586366 ✓
Legal Description of the Property OWASSA GARDENS M/H SUBD LOT 49 --LABEL# TEX0428419-- --SERIAL# HCTXSN8436D--
5616 SEPAL ST *former owners 2020 OWNER: DELGADO TORIBIO & MARIA E

2020 OVERAGE AMOUNT \$2,511.73

1: HIDALGO COUNTY, 2: DRAINAGE DIST #1, 22: CITY OF EDINBURG, 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 <u>EVAN LIPP / KANE TITLE LLC</u>	Relationship to Property Owner
	Mailing Address <u>5301 Village Creek, # A</u>	Daytime Telephone Number
	City, State, Zip Code <u>Plano, TX 75093</u>	Email Address: <u>evan@kanetitle.com</u>
Step 2: Refunds are only issued to party that paid taxes. Affirm that you are the payer.	I paid the taxes for year <u>2020</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	<u>3698.05</u>
	Total tax, penalty, and interest amount owed for the year	
	Amount of refund claimed	<u>2511.73</u>
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>9/6/22</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: <u>10/11/2022</u>
TAX OFFICE USE ONLY:	<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	By: <u>[Signature]</u> Date: <u>9/16/22</u>

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