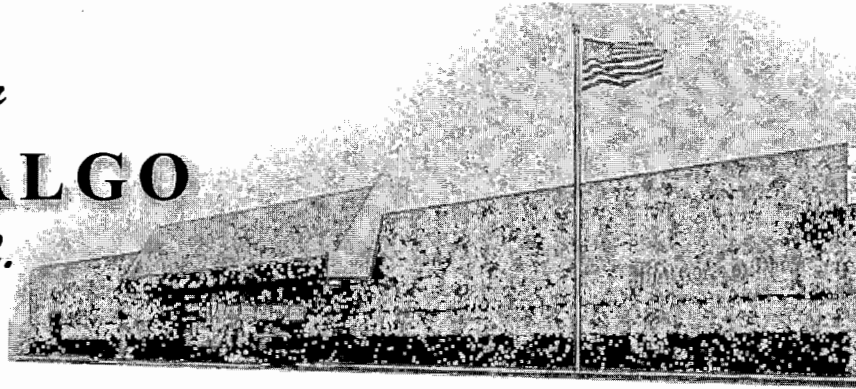


Office of Tax Assessor-Collector

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

September 28, 2023

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

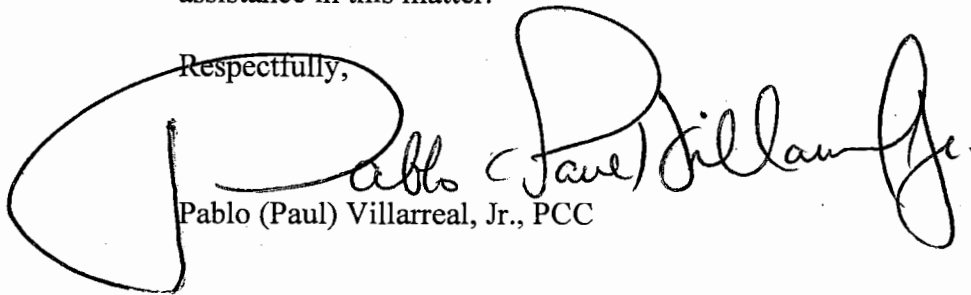
Re: See attached list

Commissioners Court:

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

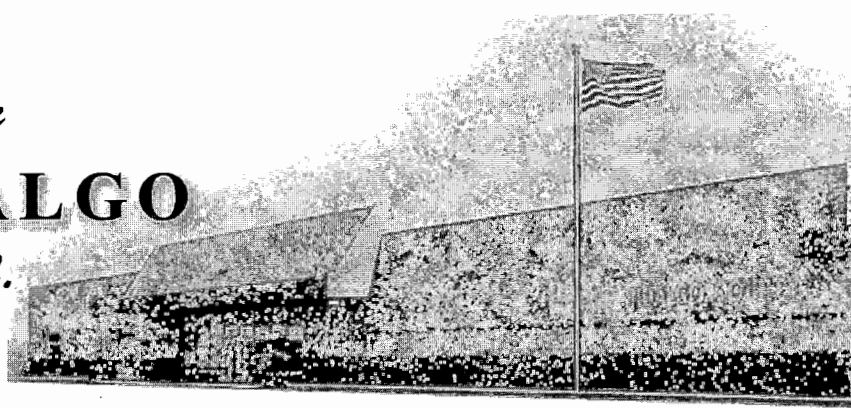
JV
Enclosure



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ACCOUNT NUMBER	PAYER	AMOUNT
L2050.00.033.0020.00	ENCORE TITLE LLC	\$3,210.55
P4355.00.000.0011.00	JOSEPHIN ASSAD	\$8,000.00



2804 S. Bus. Hwy 281 • Edinburg, TX 78539

9/20/2023

APPLICATION FOR TAX REFUND

Collection office name HIDALGO COUNTY TAX OFFICE	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 RODRIGUEZ VIVIAN & ROBERTO (PD BY: ENCORE TITLE LLC)
	Present mailing address (number and street) PO BOX 147
	City, town or post office, state, ZIP code LA VILLA TX 78562
	Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **LA VILLA ORIGINAL TOWNSITE LOT 20 & 21 BLK 33**

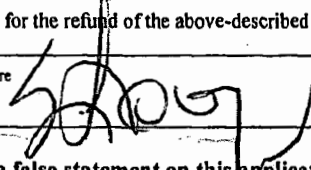
Step 2: Describe the property	Address or location of property: N MIKE CHAPA (FM 491)
	213569 ✓
	Account number of property: L2050.00.033.0020.00 ✓
	Tax receipt number: OR 52470788

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	2022 ✓	01/18	/ 2023	\$ 1,106.23
2. ALL ENTITIES	2021 ✓	01/18	/ 2023	\$ 1,454.47	\$ 1,454.47 ✓
3. ALL ENTITIES	2020 ✓	01/18	/ 2023	\$ 649.85	\$ 649.85 ✓
4.			/	\$	\$
5. TOTAL			/	\$	✓ \$ 3,210.55 ✓

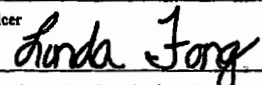
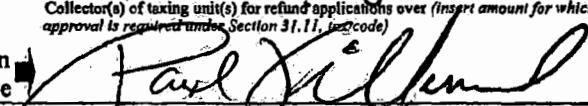
Taxpayer's reason for refund (attach supporting documentation): **TAX PAYER PAID ON INCORRECT**

PARCEL. WANT FUNDS TO BE APPLIED TO CORRECT ACCT# 213470 ✓

JV

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  ✓	Date of application for tax refund 8-22-2023

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	
	sign here 	Date 09/21/2023
	sign here  ✓	Date 9/11/23



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: 06/02/2023

HCTO 2023 ✓

JOSEPHIN ASSAD
 2916 DRIFTWOOD DR
 MISSION, TX 78574

HIDALGO COUNTY AUDITOR'S OFFICE

APPROVED BY: *Karen Ramirez*

DATE: 09/13/2023 *CM* 09/20/2023

[Signature] 9/20/2023

Account Number ✓ P4355-00-000-0011-00 HCAD No. 790090 ✓
Legal Description of the Property PARTRIDGE ESTATES LOT 11 2916 DRIFTWOOD LN 78574
OWNER: ASSAD, KATIA JOSEPHIN ✓
2022 OVERAGE AMOUNT \$8,000.00 ✓

1: HIDALGO COUNTY, 2: DRAINAGE DIST #1, 32: CITY OF MISSION, 51: SHARYLAND 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 _____ 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 checked="" 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: 9/1/23
	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: 09/21/2023
TAX OFFICE USE ONLY:	<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	By: <i>[Signature]</i> Date: 9/12/23

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