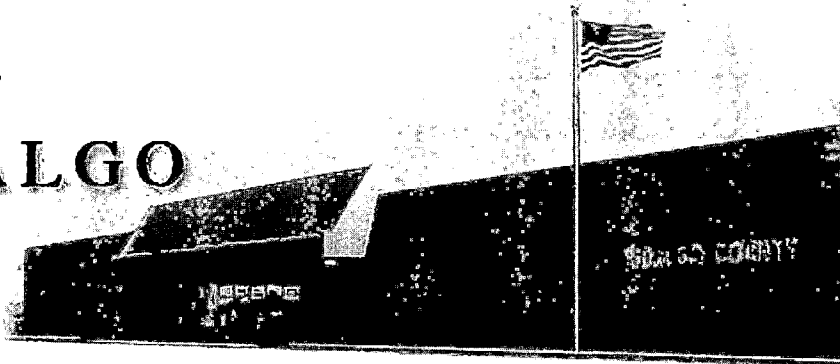


Office of Tax Assessor-Collector

# COUNTY of HIDALGO



*Pablo "Paul" Villarreal, Jr. PCC.*

Hidalgo County Tax Assessor-Collector

MARCH 13, 2024

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

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

Re: See attached list

Commissioners Court:

The Hidalgo County Appraisal District has made a correction to the tax roll as allowed by Property Tax Code Section 26.15. This correction decreased the tax liability of the property owner(s). Since taxes had been previously paid, our office determined that the tax roll correction resulted in a tax refund over \$2,500.00 dollars due to the taxpayer(s). 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 recommended by the County Auditor.

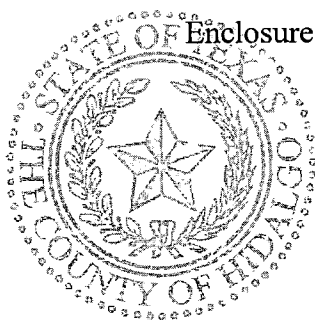
When completed, please return the attached to our office. Thank you for your assistance in this matter.

Respectfully,

Pablo (Paul) Villarreal, Jr., PCC

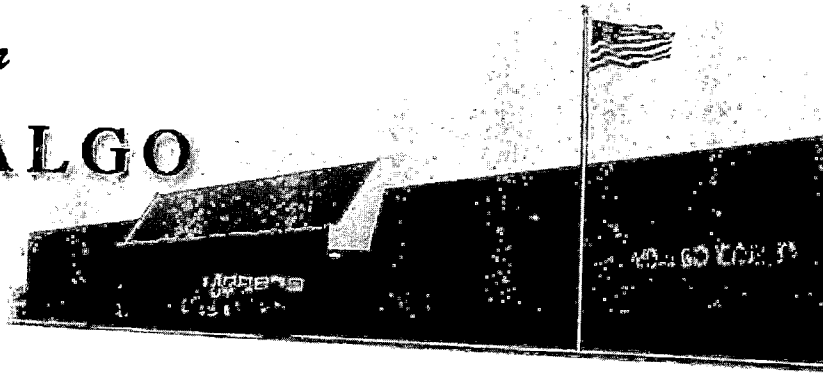
JV

Enclosure



Office of Tax Assessor-Collector

# COUNTY of HIDALGO

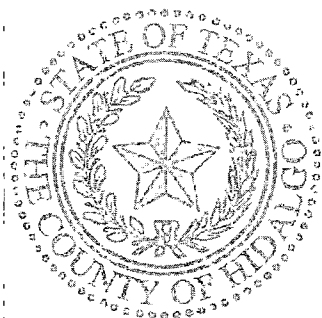


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ACCOUNT NUMBER	PAYER	AMOUNT
O7800.01.000.0019.00	RAMOS DAVID A & HILDA	\$2,574.39
W0100.99.030.0007.33	TRAMUC TRANSPORT TRAMUC LLC	\$44,987.93
W3630.02.001.0041.00	CASAREZ RENE SALINAS & NORA VASQUEZ	\$5,153.73



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

**APPLICATION FOR TAX REFUND**

*JR* 3/8/2024

Collection office name <b>HIDALGO COUNTY TAX OFFICE</b>	Collecting tax for: (Tax Units) GHD-SST-DRI-FD1-FD2-FD3-FD4-CAN-CLV-CMS-CPN-CPO-CWL-SEB-SLV-SML-SMS-SSL-SWL-JCC
Present mailing address (number and street) <b>P O BOX 178</b>	
City, town or post office, state, ZIP code <b>EDINBURG TX 78540-0178</b>	Phone (area code and number) <b>(956) 318-2157</b>

**To apply for a tax refund, the taxpayer must complete the following**

**Step 1:**  
**Owner's name and address**  
 Owner's name: **RAMOS DAVID A & HILDA** ✓  
 Present mailing address (number and street): **1110 ANN MARIE ST**  
 City, town or post office, state, ZIP code: **MISSION, TX 78572**  
 Phone (area code and number):

**Step 2:**  
**Describe the property**  
 Legal description (or attach copy of the tax bill or tax receipt): **OVERSTREET #1 LOT 19**  
 Address or location of property: **1110 ANN MARIE ST**  
**252680** ✓  
 Account number of property: **07800.01.000.0019.00** ✓ OR Tax receipt number: **52844348**

**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	1/27 / 2023	\$ 2,574.39	\$ 2,574.39
2.		/	\$	\$
3.		/	\$	\$
4.		/	\$	\$
5. TOTAL		/	\$	✓ \$ 2,574.39 ✓

Taxpayer's reason for refund (attach supporting documentation): **SUPP 3 RF23 1209**  
**GRANT DVHS AS OF PRORATED DATE 4/20/2021 FILED LATE** ✓  
**JT**

**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 Signature: \_\_\_\_\_ Date of application for tax refund: \_\_\_\_\_  
 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  
 sign here Authorized officer: *[Signature]* Date: **3/8/2024**  
 sign here Collector(s) of taxing unit(s) for refund applications over (insert amount for which governing body approval is required under Section 31.11, tax code): *[Signature]* Date: **2/27/24**

*JF*  
 2-26-24

**APPLICATION FOR TAX REFUND**

*3/8/2024*

**SUBMITTED**

Collection office name <b>HIDALGO COUNTY TAX OFFICE</b>	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) <b>P O BOX 178</b>	Phone (area code and number) <b>(956) 318-2157</b>
City, town or post office, state, ZIP code <b>EDINBURG TX 78540-0178</b>	




To apply for a tax refund, the taxpayer must complete the following *JE 2-27-24*







<b>Step 1:</b> Owner's name and address	Owner's name <b>TRAMUC TRANSPORT TRAMUC LLC ✓</b>
	Present mailing address (number and street) <b>2803 SAN RICARDO ST</b>
	City, town or post office, state, ZIP code <b>MISSION, TX 78572</b>

<b>Step 2:</b> Describe the property	Legal description (or attach copy of the tax bill or tax receipt): <b>SUPPLIES FURNITURE FIXTURES EQUIPMENT &amp; EHCLES AT 3612 N CONWAY AVE /NEW ACCT 2022</b>
	Address or location of property: <b>3612 N CONWAY AVE</b>
	<b>1379248 ✓</b>
	Account number of property: <b>W0100.99.030.0007.33 ✓</b> OR <b>53046511/53434153/53607324/53743318</b> <b>5803728/53816774/53884800/53911433</b>

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	05/09 / 2023	\$ 3,000.00 ✓	\$
	2. ALL ENTITIES	2022	05/26 / 2023	\$ 10,000.00 ✓	\$
	3. ALL ENTITIES	2022	5/31 / 2023	\$ 14,782.80 ✓	\$
	4.		/	\$	\$
	5. TOTAL		/	\$	\$ 44,987.93 ✓

Taxpayer's reason for refund (attach supporting documentation): <b>SUPP 3 RF231209</b>
<b>CORRECTION OF NON-CLERICAL ERROR [SEC 25.25(D)] 10% LATE CORRECTION PENALTY ✓</b>
<b>- JT</b>

<b>Step 4:</b> 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."		
	<table border="1"> <tr> <td>sign here </td> <td>Signature</td> <td>Date of application for tax refund</td> </tr> </table>	sign here 	Signature
sign here 	Signature	Date of application for tax refund	
<p>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.</p>			

<b>Step 5:</b> Tax refund Determination	This tax refund is <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved			
	<table border="1"> <tr> <td>sign here </td> <td>Authorized officer</td> <td>Date <b>3/8/2024</b></td> </tr> </table>	sign here 	Authorized officer	Date <b>3/8/2024</b>
	sign here 	Authorized officer	Date <b>3/8/2024</b>	
<table border="1"> <tr> <td>sign here </td> <td>Collector(s) of taxing unit(s) for refund applications over (insert amount for which governing body approval is required under Section 31.11, tax code)</td> <td>Date <b>2/15/24</b></td> </tr> </table>	sign here 	Collector(s) of taxing unit(s) for refund applications over (insert amount for which governing body approval is required under Section 31.11, tax code)	Date <b>2/15/24</b>	
sign here 	Collector(s) of taxing unit(s) for refund applications over (insert amount for which governing body approval is required under Section 31.11, tax code)	Date <b>2/15/24</b>		

**APPLICATION FOR TAX REFUND**

Collection office name <b>HIDALGO COUNTY TAX OFFICE</b> Present mailing address (number and street) <b>P O BOX 178</b> City, town or post office, state, ZIP code <b>EDINBURG TX 78540-0178</b>	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 Phone (area code and number) <b>(956) 318-2157</b>
--	---

SUBMIT

*JE 3-27-24*

**To apply for a tax refund, the taxpayer must complete the following**

<b>Step 1:</b>	Owner's name <b>CASAREZ RENE SALINAS &amp; NORA VASQUEZ ✓</b> Present mailing address (number and street) <b>3103 BRIGHTWOOD AVE</b> City, town or post office, state, ZIP code <b>EDINBURG, TX 78539</b>	Phone (area code and number) _____
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<b>Step 2:</b>	Describe the property Legal description (or attach copy of the tax bill or tax receipt): <b>WEST MEADOWS UT 2 LOT 41 BLK 1</b> Address or location of property: <b>3103 BRIGHTWOOD AVE</b> <b>696848 ✓</b> Account number of property: <b>W3630.02.001.0041.00 ✓</b>	Tax receipt number: _____ OR _____ <b>53845642/53979346/54080115/54152450</b>
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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	5/19 / 2023	\$ 500.00 ✓	\$
	2.		6/26 / 2023	\$ 485.51 ✓	\$
	3.		7/28 / 2023	\$ 500.00 ✓	\$
	4.		8/30 / 2023	\$ 500.00 ✓	\$
	5. TOTAL		/	\$ 5,971.02 ✓	\$ 5,153.75 ✓✓

Taxpayer's reason for refund (attach supporting documentation): <b>SUPP 3 RF231209</b> <b>GRANTED DVHS (PRORATED DATE: 01-29-21) Q/YR 2021 FILED LATE ✓</b> <b>JT</b>
---

<b>Step 4:</b>	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  Signature Date of application for tax refund _____
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.	

<b>Step 5:</b>	Tax refund Determination This tax refund is <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved
sign here  Authorized officer	Date <b>3/8/2024</b>
sign here  Collector(s) of taxing unit(s) for refund applications over (insert amount for which governing body approval is required under Section 31.11, tax code)	Date <b>2/15/24</b>