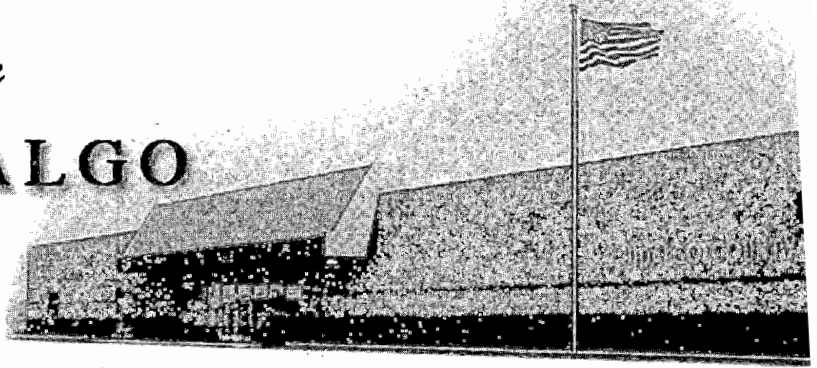


Office of Tax Assessor-Collector

COUNTY of HIDALGO



Pablo "Paul" Villarreal, Jr. PCC.

Hidalgo County Tax Assessor-Collector

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

April 1, 2024

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

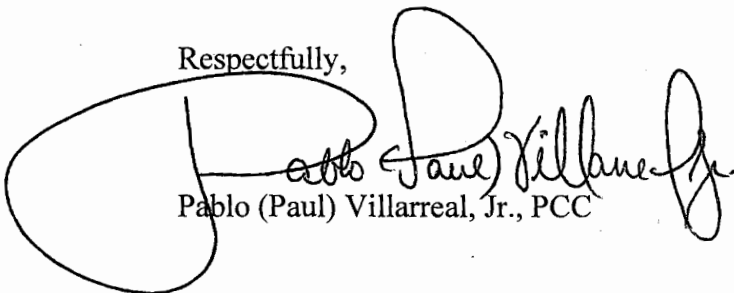
Re: See attached list

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.

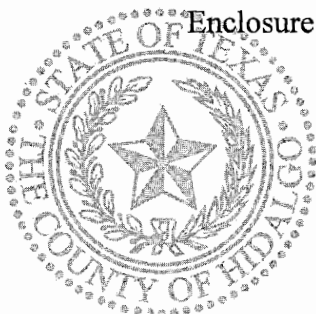
Respectfully,



Pablo (Paul) Villarreal, Jr., PCC

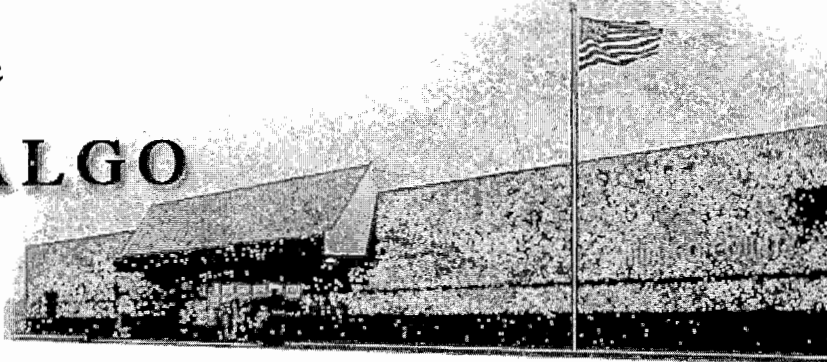
JT

Enclosure



Office of Tax Assessor-Collector

COUNTY of HIDALGO

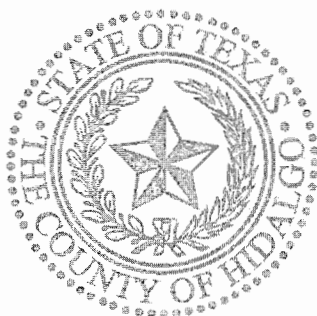


Pablo "Paul" Villarreal, Jr. PCC.

Hidalgo County Tax Assessor-Collector

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

ACCOUNT NUMBER	PAYER	AMOUNT
R2426.00.000.0007.00	VANTAGE BANK TEXAS	\$6,683.32
R3316.99.000.0001.00	RYAN TAX COMPLIANCE SERVICES, LLC	\$8,393.75



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



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: 12/13/2023

HIDALGO COUNTY AUDITOR'S OFFICE

APPROVED BY: Karen Ramirez
 DATE: 03/11/24 CM 3/21/2024

[Signature] 3/26/2024

VANTAGE BANK TEXAS ✓
 PO BOX 1700
 MCALLEN, TX 78505-1700

Account Number R2426-00-000-0007-00 ✓ HCAD No. 1371947 ✓
Legal Description of the Property REYNOLDS ESTATES LOT 7 2616 BUDDY OWENS BLVD OWNER: CR INVESTORS LLC ✓

2023 OVERAGE AMOUNT: \$6,683.32 ✓

HIDALGO COUNTY, 2; DRAINAGE DIST #1, 47. MCALLEN ISD, 54; SOUTH TEXAS ISD; 55; SOUTH TEXAS COLLEGE

Loan #: 83615

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>Vantage Bank Texas</u>	Relationship to Property Owner
	Mailing Address <u>P.O. Box 1720</u>	Daytime Telephone Number <u>19306648499</u>
	City, State, Zip Code	Email Address <u>Claudia Playle, Vantage Bank</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>2023</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>\$ 14,114.80</u>
	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 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>Claudia Playle</u> ✓	Date of application: <u>1/31/24</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>3/26/2024</u>
TAX OFFICE USE ONLY:	<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	By: <u>[Signature]</u> Date: <u>2/8/24</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: / 03/09/2023

RECEIVED
 OCT 08 2023
 Ryan LLC

SECOND NOTICE

SEP 19 2023

RYAN TAX COMPLIANCE SERVICES, LLC ✓
 PAYING FOR LKQ CORP
 16220 NORTH SCOTTSDALE ROAD, SUITE 450
 SCOTTSDALE, ARIZONA 85254

HIDALGO COUNTY AUDITOR'S OFFICE
 APPROVED BY: *Karen Ramirez*
 DATE: 03/11/24 *CM*

Account Number R3316-99-000-0001-00 ✓
HCAD No. 1378955 ✓
Legal Description of the Property INVENTORY SUPPLIES FURNITURE FIXTURES & EQUIPMENT AT 3965 S FM 493 /NEW ACCT 2022
3965 S FM 493 78537
OWNER: LKQ CENTRAL INC ✓
2022 OVERAGE AMOUNT / \$8,393.75 ✓

3/26/2024 *3/21/2024*

1: HIDALGO COUNTY, 2: DRAINAGE DIST #1, 54: SOUTH TEXAS ISD, 55: SOUTH TEXAS COLLEGE, 56: DONNA ISD

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: <i>615-248-2256</i>
	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	\$41,738.18
	Total tax, penalty, and interest amount owed for the year	\$33,344.43
	Amount of refund claimed	\$8,393.75
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 <i>Matthew Nelson</i> ✓	Date of application: <i>1/5/2024</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 37.56	

AUDITORS USE ONLY: Approved Denied By: *[Signature]* Date: *3/26/2024*

TAX OFFICE USE ONLY: Approved Denied By: *[Signature]* Date: *2/15/24*

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