

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

December 9, 2024

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

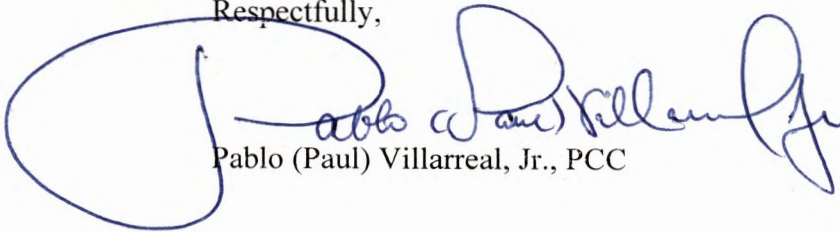
Re: See attached list

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

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ACCOUNT NUMBER	PAYER	AMOUNT
D6009.01.000.0014.00	ADRIAN ORTIZ	\$3,000.00
E8250.02.000.0278.00	CORELOGIC TAX SERVICES LLC	\$3,627.93
P7710.00.000.0025.00	HOME TAX SOLUTIONS LLC	\$3,603.98
T5200.00.000.0010.00	CORELOGIC	\$3,982.68
W6300.04.000.0001.00	CHURCH'S CHICKEN	\$6,444.29



APPROVED BY: E.L.

DATE: 11/8/2024 KR 12/03/24

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 ORTIZ MARCO & SANDRA SALGADO (PAID BY: ADRIAN ORTIZ)
	Present mailing address (number and street) 5204 ANNA DR
	City, town or post office, state, ZIP code MISSION, TX 78574
	Phone (area code and number)

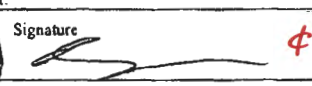
Legal description (or attach copy of the tax bill or tax receipt): **DOFFING HEIGHTS PH I LOT 14**

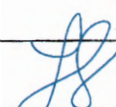
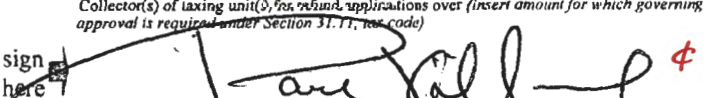
Step 2: Describe the property	Address or location of property: 5204 ANNA DR
	538010
	Account number of property: D6009.01.000.0014.00 OR 56856562
	Tax receipt number:

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. HIDALGO COUNTY	2016-2019	04/03	/ 2024	\$ 1,854.75
2. DRAINAGE DISTRICT #1	2016-2019	04/03	/ 2024	\$ 306.10	\$ 306.10
3. LA JOYA ISD	2019	04/03	/ 2024	\$ 102.90	\$ 102.90
4. SOUTH TEXAS ISD	2016-2019	04/03	/ 2024	\$ 157.30	\$ 157.30
5. TOTAL			/	\$ CONT PG 2	\$ CONT PG 2

Taxpayer's reason for refund (attach supporting documentation): **PAYER, ADRIAN ORTIZ, IS REQUESTING FUNDS TO BE TRANSFERRED TO #636944 DUE TO PAYING IN ERROR WITH THE BELIEF THAT PARCEL WAS UNDER FATHER'S NAME.**

DEED #2262446 STATES MARCO & SANDRA ORTIZ ARE NO LONGER THE OWNERS AS OF 12/05/2011. HCAD RECORDS WERE NEVER UPDATED. KGR

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 	Date of application for tax refund 10/24/24
	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 	Date 12/3/2024
	Collector(s) of taxing unit (0, for refund applications over (insert amount for which governing body approval is required under Section 31.11, tax code) 	Date 10/29/24



APPLICATION FOR TAX REFUND

Collection office name HIDALGO COUNTY TAX OFFICE	Collecting tax for: (Tax Units) GHD-SST-DRI-FDI-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

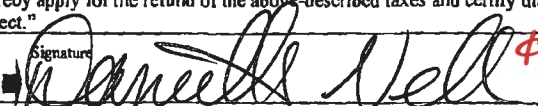
Step 1: Owner's name and address	Owner's name CARRILLO ULISES & LISA MARIE GARCIA (PAID BY: CORELOGIC TAX SERVICES LLC) ✓
	Present mailing address (number and street) 22413 URESTI RD
	City, town or post office, state, ZIP code EDINBURG, TX 78542
	Phone (area code and number)

Legal description (or attach copy of the tax bill or tax receipt): **EVERGREEN VALLEY ESTATES PH 2 LOT 278**

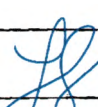

Step 2: Describe the property	Address or location of property: 22413 URESTI RD	
	697792 ✓	
	Account number of property: E8250.02.000.0278.00 ✓	Tax receipt number: OR 57106146

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 ENTITES	2023 ✓	06/11 / 2024	\$ 3,627.93 ✓	\$ 3,627.93 ✓
	2.		/	\$	\$
	3.		/	\$	\$
	4.		/	\$	\$
	5. TOTAL		/	\$	\$ 3,627.93 ✓

Taxpayer's reason for refund (attach supporting documentation): **CERTIFIED OWNER IS REQUESTING FUNDS BE RETURNED TO PAYER.(CORELOGIC TAX SERVICES LLC) OWNER IS CLAIMING THEY ARE RESPONSIBLE FOR THEIR OWN TAXES. ✓ 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  ✓	Date of application for tax refund 9-17-2024

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 	Date 12/3/2024
	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) sign here  ✓	Date 9/27/24



PABLO (PAUL) VILLARREAL JR., PCC
 Hidalgo County Tax Assessor - Collector
 PO BOX 178 EDINBURG, TX 78540-0178

RECEIVED
 10/29/2024
 HIDALGO COUNTY AUDITOR'S OFFICE

HIDALGO COUNTY AUDITOR'S OFFICE

APPROVED BY: Jake Solis
 DATE: 11/15/2024 KR 12/03/24

Phone No.: (956) 318-2157

Fax No.: 956-318-2733

Email Address: REFUNDS.TAX@HIDALGOCOUNTYTAX.ORG

Print Date: 10/07/2024

HOME TAX SOLUTIONS LLC ✓
 4849 GREENVILLE AVE STE 1620
 DALLAS, TX 75206

Account Number
 P7710-00-000-0025-00 ✓
 HCAD No. 1374627 ✓
 Legal Description of the Property
 PLEASANT VIEW HEIGHTS LOT 25
 OWNER: MID VALLEY ASSEMBLY OF GOD ✓
 2023 OVERAGE AMOUNT \$3,693.98 ✓

1: HIDALGO COUNTY, 2: DRAINAGE DIST #1, 40: CITY OF WESLACO, 53: WESLACO ISD, 54: SOUTH TEXAS ISD, 55: SOUTH TEXAS COLLEGE

Loan #: 24-18431

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>Home Tax Solutions</u>	Relationship to Property Owner <u>Tax CO</u>
	Mailing Address <u>4849 Greenville</u>	Daytime Telephone Number <u>214 613-2115</u>
	City, State, Zip Code <u>Dallas, Tx 75206</u>	Email Address: <u>Bridget@hometaxsolutions.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 _____ 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>30,561.44</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>[Signature]</u> ✓	Date of application <u>10/15/24</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>12/3/2024</u>
TAX OFFICE USE ONLY:	<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	By: <u>[Signature]</u> ✓ Date: <u>10/29/24</u> ✓

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

APPLICATION FOR TAX REFUND

Collection office name HIDALGO COUNTY TAX OFFICE	HIDALGO COUNTY AUDITOR'S 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	APPROVED BY: E.L.	
City, town or post office, state, ZIP code EDINBURG TX 78540-0178	DATE: 10/4/2024 <i>Ke 11/13/24</i>	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 ANDRADE ROBERTO & YOLANDA (PD BY: CORELOGIC) ✓
	Present mailing address (number and street) 3904 E LOPEZ DR
	City, town or post office, state, ZIP code EDINBURG, TX 78542-6409

Legal description (or attach copy of the tax bill or tax receipt): **TIERRA DEL VALLE LOT 10**

Step 2: Describe the property	Address or location of property: 3904 E LOPEZ DR EDINBURG, TX
	303325 <i>✓</i>
	Account number of property: T5200.00.000.0010.00 <i>✓</i>
	Tax receipt number: 54857075/51738100/48919571

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	2023 <i>✓</i>	12/18 / 2023	\$ 1155.54	\$ 1155.54 <i>✓</i>
	2. ALL ENTITIES	2022 <i>✓</i>	12/20 / 2022	\$ 1391.19	\$ 1391.19 <i>✓</i>
	3. ALL ENTITIES	2021 <i>✓</i>	12/29 / 2021	\$ 1435.95	\$ 1435.95 <i>✓</i>
	4.		/	\$	\$
	5. TOTAL		/	\$	\$ 3982.28

\$3,982.68

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

REQUESTING REFUND OF \$3982.28. **\$3,982.68 - Total Calc.**

JG

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 <i>Sandra Young</i> <i>✓</i>	Date of application for tax refund 09/03/2024

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>[Signature]</i>	Date 12/3/2024
	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) sign here <i>[Signature]</i> <i>✓</i>	Date 9/13/24



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

RECEIVED
 10/24/2024
 HIDALGO COUNTY AUDITORS OFFICE

HIDALGO COUNTY AUDITOR'S OFFICE
 APPROVED BY: Jake Solis
 DATE: 11/07/2024 KR 12/03/24

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

Print Date: 02/07/2024

RECEIVED
 MAY 22 2024
 BY: 108

CHURCH'S CHICKEN #2027
 980 HAMMOND DRIVE
 SUITE 1100
 ATLANTA, GA 30328-318

Account Number W6300-04-000-0001-00 ✓ HCAD No. 572099 ✓
Legal Description of the Property WILSON NO. 4 LOT 1 ✓ 3817 PECAN BLVD ✓ OWNER: ARC STX HOLDINGS LLC ✓
2023 OVERAGE AMOUNT \$6,444.29 ✓

1: HIDALGO COUNTY, 2: DRAINAGE DIST #1, 47: MCALLEN 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 <u>Church's Chicken</u> ✓	Relationship to Property Owner <u>Tenant</u>
	Mailing Address <u>980 Hammond Dr NE, Ste 1100</u> City, State, Zip Code <u>Atlanta, GA 30328</u>	Daytime Telephone Number <u>830-772-4431</u> Email Address: <u>KBrehme@churchs.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>2023</u> 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 checked="" 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>ck# 421913</u>	<u>\$283,341.90</u>
	Total tax, penalty, and interest amount owed for the year	
	Amount of refund claimed	<u>\$6,444.29</u>
Step 5: How should the refund be processed?	<input checked="" type="checkbox"/> Mail to Property Owner <u>Payer</u>	*Mail to Property Owner box was checked off, however applicant wrote in "payer" & Request for refund page reflects payers information
	<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 <u>[Signature]</u> ✓	Date of application <u>08/20/2024</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>12/3/2024</u>
TAX OFFICE USE ONLY:	<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	By: <u>[Signature]</u> ✓ Date: <u>9/3/24</u> ✓

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