

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

August 4, 2025

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

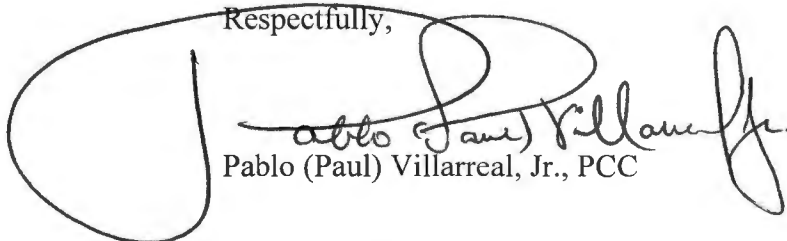
Re: See attached list

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

KGR

Enclosure



Office of Tax Assessor-Collector

COUNTY of HIDALGO



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ACCOUNT NUMBER	PAYER	AMOUNT
C7900.00.000.0004.10	AGUIRRE HUMBERTO & BEATRIZ	\$2,500.00
E3300.00.386.0004.00	D&M CLEANERS INC	\$3,642.65
F6000.00.000.0015.00	BETTY L RODRIGUEZ	\$3,000.00
M3529.00.001.0034.00	AFFORDABLE HOMES OF SOUTH TEXAS INC	\$4,270.39





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

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

Email Address: REFUNDS.TAX@HIDALGOCOUNTYTAX.ORG

Print Date: 12/16/2024

THE HIDALGO COUNTY AUDITOR'S OFFICE

APPROVED BY: J.O. *7/23/25*
 DATE: 07/16/25 *KR* 07/22/25

SECOND NOTICE

JUN 10 2025

HCTO
AGUIRRE HUMBERTO & BEATRIZ
 9030 N MINNESOTA
 MISSION, TX 78574-0448

Account Number C7900-00-000-0004-10 HCAD No. 153766
Legal Description of the Property C. A. CONNER & CO. INC. S5AC-N15AC LOT 4.5 AC NET N MINNESOTA RD
OWNER: AGUIRRE HUMBERTO & BEATRIZ

2024 OVERAGE AMOUNT \$2,500.00

1: HIDALGO COUNTY, 2: DRAINAGE DIST #1, 49: LA JOYA 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	Beatriz A. Aguirre	Relationship to Property Owner	Owner
	Mailing Address	9030 N. Minnesota	Daytime Telephone Number	(956) 510-9430
	City, State, Zip Code	Mission TX 78574	Email Address:	bettyaguirreus@gmail.com
Step 2: Refunds are only issued to party that paid taxes. Affirm that you are the payer.	I paid the taxes for year <u>2024</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 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? <u>Credit to tax yr 2025</u>	<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 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			Date of application
	SIGN HERE			<u>06/26/2025</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:	Date: <u>7/29/2025</u>
TAX OFFICE USE ONLY:	<input checked="" type="checkbox"/> Approved	<input type="checkbox"/> Denied	By: <u>Paul Villarreal Jr.</u>	Date: <u>7/2/25</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: 05/02/2024

THE HIDALGO COUNTY AUDITOR'S OFFICE

APPROVED BY: J.O. *YF* 7/23/25

DATE: 07/15/25 *KR* 07/22/25

SECOND NOTICE

D&M CLEANERS INC
 129 W PARK AVE
 PHARR, TX 78577

JUN 13 2025

Account Number E3300-00-386-0004-00
HCAD No. 165968
Legal Description of the Property EDINBURG TOWNSITE LOT 4-5 BLK 386 703 S CLOSNER BLVD
OWNER: D & M CLEANERS

2023 OVERAGE AMOUNT \$3,642.65

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

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Step 1: Identify the Payer requesting the refund if different than shown above	Name	Relationship to Property Owner
	Mailing Address	Daytime Telephone Number <i>956-787-140</i>
	City, State, Zip Code	Email Address: <i>MARTYMOORE@gmail.com</i>
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 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>Marty Moore</i>	Date of application <i>6/26/26</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: <i>7/29/2025</i>
TAX OFFICE USE ONLY:	<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	By: <i>[Signature]</i> Date: <i>7/2/25</i>

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: 09/26/2024

THE HIDALGO COUNTY AUDITOR'S OFFICE

APPROVED BY: J.O. *up* 7/24/25
 DATE: 07/14/25 *KR* 07/22/25

SECOND NOTICE

JUN 15 2025

BETTY L. RODRIGUEZ
 P.O. BOX 527
 SULLIVAN, TX 78595

Account Number F6000-00-000-0015-00	HCAD No. 175839
Legal Description of the Property FOUR SURE ALL RIGHT NO. 1 LOT 15 4313 TEXANCANA LN 78572	
OWNER: MENDIOLA AMY R	
2023 OVERAGE AMOUNT \$3,000.00	

1: HIDALGO COUNTY, 2: DRAINAGE DIST #1, 49: LA JOYA ISD, 54: SOUTH TEXAS ISD, 55: SOUTH TEXAS COLLEGE

Loan #: _____

APPLICATION FOR PROPERTY TAX REFUND

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Step 1: Identify the Payer requesting the refund if different than shown above	Name <i>Betty L. Rodriguez</i>	Relationship to Property Owner
	Mailing Address <i>P.O. Box 527</i>	Daytime Telephone Number <i>956 739 1949</i>
	City, State, Zip Code <i>Sullivan City TX 78595</i>	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 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>Betty L. Rodriguez</i>	Date of application <i>6/21/2025</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: _____ Date: <i>7/29/2025</i>
TAX OFFICE USE ONLY:	<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied	By: <i>Paul Villarreal</i> Date: <i>7/2/25</i>

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 78549-0178 Email Address: REFUNDS.TAX@HIDALGOCOUNTYTAX.ORG

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

Print Date: 01/27/2024

SECOND NOTICE

JUN 25 2025

Account Number M3529-00-001-0034-00 ϕ HCAD No. 614636 $\phi\checkmark\checkmark$
Legal Description of the Property MERCEDES ESTATES LOT 34 BLK 1 4417 J.A. GARCIA ST \checkmark
OWNER: AFFORDABLE HOMES OF SOUTH TEXAS INC \checkmark

AFFORDABLE HOMES OF SOUTH TEXA
 1420 ERIE AVE $\phi\checkmark$
 MCALLEN, TX 78501

2023 OVERAGE AMOUNT \$4,270.39 $\phi\checkmark$

1: HIDALGO COUNTY, 2: DRAINAGE DIST #1, 28: CITY OF MERCEDES, 46: MERCEDES 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 <u>956-687-6263</u>	
	City, State, Zip Code	Email Address: <u>ctomres@ahstx.org</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		
	Total tax, penalty, and interest amount owed for the year		
	Amount of refund claimed		
Step 5: How should the refund be processed?	<input checked="" 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	
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> ϕ	Date of application <u>6-30-25</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>7/29/2025</u>
TAX OFFICE USE ONLY:	<input checked="" type="checkbox"/> Approved	<input type="checkbox"/> Denied	By: <u>[Signature]</u> Date: <u>7/19/25</u>

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