

**CITY OF EL PASO, TEXAS
AGENDA ITEM
DEPARTMENT HEAD'S SUMMARY FORM**

DEPARTMENT: Tax Department

AGENDA DATE: March 17, 2020

CONTACT PERSON NAME AND PHONE NUMBER: Maria Pasillas, Tax Assessor Collector, 212-1737

DISTRICT(S) AFFECTED: All

SUBJECT:

APPROVE a resolution / ordinance / lease to do what? **OR AUTHORIZE** the City Manager to do what? Be descriptive of what we want Council to approve. Include \$ amount if applicable.

Approve property tax overpayment refunds, greater than \$2,500.00

BACKGROUND / DISCUSSION:

Discussion of the what, why, where, when, and how to enable Council to have reasonably complete description of the contemplated action. This should include attachment of bid tabulation, or ordinance or resolution if appropriate. What are the benefits to the City of this action? What are the citizen concerns?

This action would allow us to comply with state law which requires approval by the legislative body, of refunds of tax overpayments, greater than \$2,500.00.

PRIOR COUNCIL ACTION:

Has the Council previously considered this item or a closely related one?

Council has considered this previously on a routine basis.

AMOUNT AND SOURCE OF FUNDING:

How will this item be funded? Has the item been budgeted? If so, identify funding source by account numbers and description of account. Does it require a budget transfer?

N/A

BOARD / COMMISSION ACTION:

Enter appropriate comments or N/A

N/A

*****REQUIRED AUTHORIZATION*****

DEPARTMENT HEAD:

Sheryl R. Mack for Maria O. Pasillas

(If Department Head Summary Form is initiated by Purchasing, client department should sign also)

Information copy to appropriate Deputy City Manager

TAX REFUNDS
March 17, 2020

1. Ahern Rentals Inc., in the amount of \$16,741.23, made an overpayment on January 31, 2020 of 2019 taxes.
(Geo. #10SS-999-1134-1342)
2. Ryan, LLC, in the amount of \$4,194.94, made an overpayment on January 10, 2020 of 2019 taxes.
(Geo. #E379-999-0010-0143)
3. Mostafa Rifai, in the amount of \$3,312.26, made an overpayment on January 31, 2020 of 2019 taxes.
(Geo. #O185-999-0000-0700)

Laura D. Prine
City Clerk

Sheryl R. Mack for Maria O. Pasillas
Maria O. Pasillas, RTA
Tax Assessor Collector



MARIA O. PASILLAS, RTA
CITY OF EL PASO TAX ASSESSOR COLLECTOR
221 N. KANSAS, STE 300
EL PASO, TX 79901

PH: (915) 212-0106 FAX: (915) 212-0107 www.elpasotexas.gov/tax-office

**TAX OFFICE
RECEIVED**
MAR 03 2020

AHERN RENTALS INC.
PO BOX 270665
LAS VEGAS, NV 89127

*+2,500 ✓
OF ✓*

Geo No. 10SS-999-1134-1342	Prop ID 614952
Legal Description of the Property DEALER HEAVY EQUIPMENT INV P316269 1301 GAIL BORDEN PL	
OWNER: AHERN RENTALS INC	

2019 OVERAGE AMOUNT \$16,741.23

1: CITY OF EL PASO, 5: YSLETA ISD, 6: COUNTY OF EL PASO, 7: EL PASO COMMUNITY COLLEGE, 8: UNIVERSITY MEDICAL CENTER OF EL PASO

Dear Taxpayer:

Our records indicate that an overpayment exists on the property tax account listed above as of the date of this letter. If you paid the taxes on this account and believe you are entitled to a refund, please complete the application below, sign it, and return it to our office. If the taxes were paid by your mortgage/title company or any other party, you must obtain a written letter of release in order for the refund to be issued in your name. If you did not make the payment(s) on this account, please forward this letter to the person who paid these taxes. You may also request the transfer of this overpayment to other tax accounts and/or tax years in the space provided or by attaching an additional sheet if necessary. Your application for refund must be submitted within three years from the date of the overpayment, or you waive the right to the refund (Sec. 31.11c). Governing body approval is required for refunds in excess of \$2500.

APPLICATION FOR PROPERTY TAX REFUND:

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

Step 1. Identify the refund recipient. Show information for whomever will be receiving the refund.	Who should the refund be issued to:			
	Name: <i>Ahern Rentals Inc.</i>			
	Address: <i>1401 Mineral Ave</i>			
	City, State, Zip: <i>Las Vegas NV 89106-4342</i>			
Step 2. Provide payment information. Please attach copy of cancelled check, original receipt, online payment confirmation or bank/credit card statement.	Daytime Phone No.: <i>702-362-0623</i>		E-Mail Address: <i>prospect@ahern.com</i>	
	Payment made by:	Check No.	Date Paid	Amount Paid
	<i>Ahern Rentals Inc</i>	<i>063138</i>	<i>1/29/2020</i>	<i>\$16,749.14</i>
	TOTAL AMOUNT PAID (sum of the above amounts)			<i>16,749.14</i>
Step 3. Provide reason for this refund. Please list any accounts and/or years that you intended to pay with this overage.	Please check one of the following:			
	<input type="checkbox"/> I paid this account in error and I am entitled to the refund.			
	<input checked="" type="checkbox"/> I overpaid this account. Please refund the excess to the address listed in Step 1.			
	<input type="checkbox"/> I want this payment applied to next year's taxes.			
Step 4. Sign the form. Unsigned applications cannot be processed.	This payment should have been applied to other tax account(s) and/or year(s), escrow (listed below):			
	By signing below, 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. (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 the Texas Penal Code, Sec. 37.10.)			
	SIGNATURE OF REQUESTOR (REQUIRED)		PRINTED NAME & DATE	
	<i>[Signature]</i>		<i>Nayal Navales 2/26/2020</i>	
TAX OFFICE USE ONLY: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied By: <i>[Signature]</i> Date: <i>03/03/2020</i>				

Notes

Go To

ANDREA
ACT80122 v1.90

ACCOUNT NO (10SS99911341342): Bankruptcy 11-53860 has been closed

03/03/2020 14:13:56
ACTEP

DEPOSIT Remittance Detail

614952

Summary Query

Summary

Deposit No.		Account No.		Remit Seq No.		Check No.		Payment Amount		Payment Agreement No.	
B02132075		10SS99911341342									
Check/Receipt Images	Deposit No.	Receipt Date	Remit Seq No.	Check No.	Payment Type	Payment Amount	Applied Amount	Transaction Type	Account No.	Payer	
	B02132075	01/31/2020	43725505	663138	CH	\$98,851.72	\$7.91	AA	10SS99911341342	26801231-AHERN RENTA	
	B02132075	01/31/2020	43725505	663138	CH	\$98,851.73	\$16,741.23	LG	10SS99911341342	26801231-AHERN RENTA	
	P20190001	01/31/2020	43721639	1791	CH	\$5,651,502.86	\$16,749.14	PA	10SS99911341342	AHERN RENTALS INC	
	P20180001	01/31/2019	40753029	88888	CH	\$5,173,266.47	\$14,697.09	PA	10SS99911341342	88888-COUNTY TAX OFF	
	RD3128402	01/03/2019	37447162	0000215045	CH	\$10,704.29	\$10,704.29	RD	10SS99911341342	26801231-AHERN RENTA	
	P20184000001	01/31/2018	37801560	88888	CH	\$5,173,530.45	\$10,704.29	PA	10SS99911341342	88888-COUNTY TAX OFF	
	R030218398	01/31/2018	37447162	04721	CH	\$0.00	\$10,704.29	LG	10SS99911341342	AHERN RENTALS INC	
	R030218398	01/31/2018	37447162	04721	CH	\$0.00	\$10,704.29	TR	10SS99911341342	AHERN RENTALS INC	
	R030418767	01/29/2018	37447162	04721	CH	\$0.00	\$10,704.29	TR	10SS99911341342	AHERN RENTALS INC	
	R030418767	01/29/2018	37447162	04721	CH	\$0.00	\$10,704.29	TR	10SS99911341342	AHERN RENTALS INC	
	RC181227	01/29/2018	37447162	04721	CH	\$10,704.29	\$10,704.29	TR	10SS99911341342	AHERN RENTALS INC	
	RC181227	01/29/2018	37447162	04721	CH	\$10,704.29	\$10,704.29	TR	10SS99911341342	26801231-AHERN RENTA	
Applied Total							\$91,674.16				

THE CITY OF EL PASO
CONSOLIDATED TAX OFFICE
221 N. Kansas, Suite 300
El Paso, Texas 79901

Phone (915) 212-0106, Fax (915) 212-0108



FEB 21 2020

APPLICATION FOR TRANSFER OF TAX PAYMENT

The Consolidated Tax Office collects property taxes for all eligible property taxing entities within El Paso County.

APPLICANT MUST PROVIDE THE FOLLOWING INFORMATION:

Requestor's Name: RYAN LLC	Phone: HOME WORK 542-0026	Transfer FROM (Property ID#) : E379-999-0010-0140 62329
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Property Address: and/or Legal Description: PASEO DEL NORTE	Transfer TO (Property ID# & Tax Year) : 689268 TAX YEAR 2019 E379-999-0010-0143
--	---

Tax year paid:	Date payment made:	Check No. & Date, if known:	Amount of taxes paid:	Amount of transfer requested:
1. 2019	January 10, 2019	192	\$ 9,539.31	\$ 5,344.37
2.				
3.				
4.				
TOTAL AMOUNT (sum of the above amounts)				

REQUIRED: Copy of original receipt, front & back of negotiated check, OR bank statement showing item cleared (both the bank & taxpayer name must appear)

REASON FOR OVERPAYMENT:

Split account, paid on parent account.

Refund excess of \$4,194.94.

Mall Overpayment Refund to: RYAN LLC, 221 N KANSAS STE 2101, EL PASO TX 79901

"I certify that information given to obtain this transfer is true and correct."

Requestor signature:

Date:

02/21/2020

Any person knowingly submitting false entries is subject to: (1) Imprisonment of 2 to 10 years, or \$5,000 fine, or both. (2) Imprisonment up to one year, or fine not over \$2,000, or both. (Sec 37.10 Penal Code) An application for a refund must be made within 3 years after the date of the payment or the taxpayer waives the right to the refund (Sec. 31.11 (c)).

TAX OFFICE Entry:

() TRANSFER APPROVED

Tax Office Approval:

Jue 26/2/2020

Date:

02/27/2020

() DISAPPROVED

() Returned to sender.

() See below/attached.

() Required documentation (Tax Receipt, Canceled Check, Bank Statement, or Other) not submitted.

() Record of overpayment not found on this property.

() Property not found as identified, resubmit after correction.

() Other:

Go To

02/27/2020 14:14:48
ACTEP

Deposit

REMITTANCE

Detail

689268

Summary Query

Summary

Payment Agreement No.

Psyche

24273661-RYAN TAX CC

24273661-RYAN TAX CC

24273661-RYAN TAX CC

Applied Total

59.539.31

OP

+2500

[illegible]

Topic

55,344.37

\$5,344.37

\$5.00

3

CITY TAX
OFFICE

FEB 03 2020

THE CITY OF EL PASO
CONSOLIDATED TAX OFFICE
221 N. Kansas, Suite 300
El Paso, Texas 79901

Phone (915) 212-0105 Fax (915) 212-0108

APPLICATION FOR TRANSFER OF TAX PAYMENT

The Consolidated Tax Office collects property taxes for all eligible property taxing entities within El Paso County.

APPLICANT MUST PROVIDE THE FOLLOWING INFORMATION:

Requestor's Name Rifat Mostafa		Phone HOME: (915) 383-4998 WORK:		Transfer FROM (Property ID#): 361850 0185 999-0000-0700	
Property Address: Address: Legal Description:				Transfer TO (Property ID# & Tax Year): 365602 (2019)	
Tax year requested	Date payment made:	Check No. & Date, if known:		Amount of taxes paid:	Amount of transfer requested
1. 2019	01/31/2020			\$4,202.99	\$890.13
2.					
3.					
4.					
TOTAL AMOUNT (sum of the above amounts)					

REQUIRED: Copy of original receipt, front & back of negotiated check, OR
bank statement showing item cleared (both the bank & taxpayer must appear)

REASON FOR OVERPAYMENT

Please transfer payment to the above account. Please refund tax payer overpayment of \$3,312.26 to
310 E. Baltimore Dr. El Paso Tx 79902 and please mail tax payer duplicate receipt to same address.

"I certify that information given to obtain this refund is true and correct."

Requestor's signature

Date 2/1/2020

Printed name

Title

Any person knowingly submitting false entries is subject to: (1) imprisonment of 2 to 10 years, or \$5,000 fine, or both.
(2) imprisonment up to one year, or fine not over \$2,000, or both. (Sec 37.10 Penal Code) An application for a refund must be made within 3 years after
the date of the payment or the taxpayer waives the right to the refund (Sec 31.11 (c)).

TAX OFFICE Entry:

☒ TRANSFER APPROVED

Tax Office Approval:

Date

☐ DISAPPROVED☐ Returned to sender☐ See below/attached☐ Required documentation (Tax receipt, Canceled Check, Bank Statement, or Other) not submitted☐ Record of overpayment not found on this property.☐ Property not found as identified, resubmit after correction☐ Other:

Approved for Transfer of Tax Payment

Rec'd D.O.P.

CITY TAX
OFFICE

MAR 02 2020

Notes

Go To

ANDREA
ACT80122 v1.90

ACCOUNT NO (018599900000700): Lien ID H-015648630 inserted amount = 383.22, file_date
02/28/2017 on 05/11/2017

03/03/2020 15:37:39
ACTEP

DEPOSIT Remittance Detail

361850

Summary Query

Summary

Deposit No.		Account No.		Remit Seq No.		Check No.		Payment Amount		Payment Agreement No.	
IP02032098		018599900000700									
Check/Receipt Images	Deposit No	Receipt Date	Remit Seq No.	Check No.	Payment Type	Payment Amount	Applied Amount	Transaction Type	Account No.	Payer	
	EC01312098	01/31/2020	43492619	CC002896196	EC	\$2 101.20	\$2 101.20	PA	018599900000700	28131210-OLD BARRAC	
	IP02032098	01/31/2020	43511374	CC002896398	CR	\$4 202.39	\$4 202.39	LG	018599900000700	28140157-MOSTAFA RIF	
	IP02032098	01/31/2020	43511363	CC002896290	CR	\$2 101.19	\$2 101.19	PA	018599900000700	28140146-MOSTAFA RIF	
	R030320285	01/31/2020	43511374	CC002896398	CR	\$0.00	\$890.13	TR	018599900000700	28140157-MOSTAFA RIF	
	T11151800005	11/20/2018	38977850	01040	CH	\$6 425.85	\$3 515.91	PA	018599900000700	GREAT RIVER COMMERC	
	B02081878	01/31/2018	37762631	14915	CH	\$3 476.38	\$3 476.38	PA	018599900000700	22755709-LONE STAR TI	
	A01101875	01/10/2018	36884944	14851	CH	\$947.14	\$947.14	PA	018599900000700	23972437-LONE STAR TI	
	X1223162000	12/23/2016	33491360	03705	CH	\$20 076.00	\$3 308.42	PA	018599900000700	HARTS HOMESTEAD LP	
	A05021641	04/29/2016	32215765	3674	CH	\$3 613.93	\$3 613.93	PA	018599900000700	HARTS HOMESTEAD LP	
	B02041554	01/31/2015	28587285	3609	CH	\$18 715.21	\$3 213.96	AA	018599900000700	23702224-HARTS HOME	
	A02111423	02/11/2014	25782795	3537	CH	\$18 114.26	\$3 374.80	PA	018599900000700	HARTS HOMESTEAD LP	
	X0206132003	01/31/2013	23013377	03462	CH	\$17 351.67	\$3 064.12	PA	018599900000700	HARTS HOMESTEAD LP	
Applied Total							\$81 812.29				