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

DEPARTMENT: **Tax Department**

AGENDA DATE: **April 17, 2018**

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.

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: 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
April 17, 2018

1. Mills Escrow Company, in the amount of $2,600.68, made an overpayment on January 31, 2018 of 2017 taxes.
   (Geo. #M13099900607100)

2. Hunt Communities Develop Co II, LLC, in the amount of $3662.92, made an overpayment on January 31, 2018 of the 2017 taxes. (*Resubmission from March 20, 2018 Agenda due to typographical error.)*
   (Geo. #W17899900300175)

Laura D. Prine
City Clerk

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

CITY TAX OFFICE APR 02 2018

Geo No.	Prop ID
M130-999-0060-7100	69977

Legal Description of the Property
6 MARWOOD LOT 36

4564 SKYLARK WAY

OWNER: SANDOVAL VICTOR M JR

MILLS ESCROW COMPANY
6501 BOEING STE. H-4
EL PASO , TX 79925

2017 OVERAGE AMOUNT $2,600.68

1: CITY OF EL PASO, 3: EL PASO 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

Step 1. Identify the refund recipient.
Show information for whomever will be receiving the refund.

Who should the refund be issued to:
Name: MILLS ESCROW COMPANY
Address: PO BOX 371505
City, State, Zip: EL PASO TX 79937
Daytime Phone No.: 915 771-8006
E-Mail Address: asalinas@millsescrow.com

Step 2. Provide payment information.
Please attach copies of cancelled checks, bank statement or original receipts for all cash payments you made.

Payment made by:	Check No.	Date Paid	Amount Paid
Check	68760	1/31/18	2600.68

TOTAL AMOUNT PAID (sum of the above amounts)

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:
- [ ] I paid this account in error and I am entitled to the refund.
- [x] I overpaid this account. Please refund the excess to the address listed in Step 1.
- [ ] I want this payment applied to next year's taxes.
- [ ] This payment should have been applied to other tax account(s) and/or year(s), escrow (listed below):

Step 4. Sign the form.
Unsigned applications cannot be processed.

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

TAX OFFICE USE ONLY: [ ] Approved [ ] Denied By:_____ Date:_____

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

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

Geo No. M130-999-0060-7100

Prop ID 69977

Legal Description of the Property
6 MARWOOD LOT 36

4564 SKYLARK WAY

OP +2500

MILLS ESCROW COMPANY
6501 BOEING STE. H-4
EL PASO , TX 79925

OWNER: SANDOVAL VICTOR M JR

2017 OVERAGE AMOUNT $2,600.68

1: CITY OF EL PASO, 3: EL PASO ISD, 6: COUNTY OF EL PASO, 7: EL PASO COMMUNITY COLLEGE, 8: UNIVERSITY MEDICAL CENTER OF EL PASO

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APPLICATION FOR PROPERTY TAX REFUND

Step 1. Identify the refund recipient.
Show information for whomever will be receiving the refund

Who should the refund be issued to:

Name: [redacted] (20936953)

Address:

City, State, Zip:

Daytime Phone No.: E-Mail Address:

Step 2. Provide payment information.
Please attach copies of cancelled checks, bank statement or original receipts for all cash payments you made.

Payment made by:	Check No.	Date Paid	Amount Paid
[redacted]			[redacted]

TOTAL AMOUNT PAID (sum of the above amounts)

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:

I paid this account in error and I am entitled to the refund.

I overpaid this account. Please refund the excess to the address listed in Step 1

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SIGNATURE OF REQUESTOR (REQUIRED) PRINTED NAME & DATE

[signature] 4/3/18 [signature] 4-3-18

TAX OFFICE USE ONLY: ☑ Approved ☐ Denied By SBooth Date: 04/03/18

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

v52.1.4

Print Date: 02/08/2018

Signature Received SB

CITY TAX OFFICE APR 03 2018

+ 2500

Deposit Status

Notes | Go To :

SHERRYB
ACT80122 v1.89

04/03/2018 13:40:54
ACTEP

DEPOSIT | Remittance | Detail

Summary Query

Summary

Deposit No.	Account No.	Remit Seq No.	Check No.	Payment Amount	Payment Agreement No.
B02081875	M13099900607100				

Check Image	Deposit No.	Receipt Date	Remit Seq No.	Check No.	Payment Type	Payment Amount	Applied Amount	Transaction Type	Account No.	Payer
	B02081875	01/31/2018	37762955	068780	CH	$72,171.46	$2,600.68	LG	M13099900607100	20376420-MILLS ESCROW
	EC01301898H	01/31/2018	37451608	CC001913363	EC	$12,507.72	$2,886.58	PA	M13099900607100	26125247-ITZHAK AZZEI
	A12271641	12/27/2016	33507343	66261	CH	$60,566.66	$2,747.11	PA	M13099900607100	20376420-MILLS ESCROW
	A02041623	01/31/2016	31632057	063040	CH	$60,668.41	$1,664.16	AA	M13099900607100	1512117-MILLS ESCROW
	A02111641	01/31/2016	31798985	1053323	CH	$1,039.25	$1,039.25	PA	M13099900607100	24195366-CHARLES SCH
	A12231465	12/23/2014	27434914	061483	CH	$75,219.47	$2,662.95	AA	M13099900607100	428-MILLS ESCROW CO
	EC01271468D	01/25/2014	25338427	CC000745199	CH	$486,591.14	$2,613.30	PA	M13099900607100	22640227-ASLM # LTD. A
	B02051348	01/31/2013	22969730	1065	CH	$14,968.19	$2,538.81	PA	M13099900607100	LERMA JERRY M & CASIL
	A020212T8	01/31/2012	20319991	5294702	CH	$14,361.33	$2,493.74	PA	M13099900607100	21718862-AZ PROPS, LL
	X0207112012	01/31/2011	18160731	20022	CH	$40,323.43	$2,473.43	PA	M13099900607100	AZERRAD ITZHAK
	A02021041	01/31/2010	15730674	10341	CH	$150,325.51	$2,447.52	PA	M13099900607100	AZERRAD ITZHAK
	A01050948	12/31/2008	12916257	10253	CH	$178,038.14	$2,378.82	PA	M13099900607100	AZERRAD, ITZHAK

Applied Total $48,912.44

Account Status

Prey.Acc... | Next Acc... | Prev.Owner | Next Owner | Acct History | Acct Summary | Notes | Documents | Go To:

SHERRYB
ACT8006 v1.284

04/03/2018 13:40:43
ACTEP

STATUS DETAIL | Expand Fees | Summary

Account Information

Account No. M130-999-0060-7100 | Roll Code REAL PROPERT

Certified Owner SANDOVAL VICTOR M JR

Parcel Address 4564 SKYLARK WAY

Amount Due as of 04/03/2018 | CAD No. 69977

Tax Units | **Tax Unit Description** | **Tax Unit,Yr, Rec. Type**

List of Tax Units: 1 3 6 7 8 8001

Tax Unit | Year | Rec. Type | Multi Select

Remove Fees | Countywide

Amount Due/Paid Information

Year	Gross Value	H O V D	Base Levy	Paid Levy	Write-Off	Remaining Levy	Fees	Refund	Amount Due
2017	$97,529		$2,886.58	$2,886.58	$.00	$.00	$.00	$2,600.68	$.00
2016	$97,529		$2,747.11	$2,747.11	$.00	$.00	$.00	$.00	$.00
2015	$97,529		$2,703.41	$2,703.41	$.00	$.00	$.00	$.00	$.00
2014	$97,320		$2,662.95	$2,662.95	$.00	$.00	$.00	$.00	$.00
2013	$97,320		$2,613.30	$2,613.30	$.00	$.00	$.00	$.00	$.00
2012	$97,320		$2,538.81	$2,538.81	$.00	$.00	$.00	$.00	$.00
2011	$97,320		$2,493.74	$2,493.74	$.00	$.00	$.00	$.00	$.00
2010	$97,320		$2,473.43	$2,473.43	$.00	$.00	$.00	$.00	$.00
2009	$98,241		$2,447.52	$2,447.52	$.00	$.00	$.00	$.00	$.00
		Totals	$44,821.87	$44,821.87	$.00	$.00	$1,489.89	$2,600.68	$.00

Last Payment Date | Last Payer | Alert

Deposit Status

Notes

Go To :

SHERRYB
ACT80122 v1.89

04/03/2018 13:40:54
ACTEP

Deposit | Remittance | DETAIL

Remittance Detail

Account No.	Tax Unit	Year	Rec Type	Applied Amount	Levy	Discount	Penalty & Interest	Attorney Fees	Refund
M1309990067100	8001	2017	TL	$2,600.68	$0.00	$0.00	$0.00	$0.00	$2,600.68
			Applied Total	$2,600.68	$0.00	$0.00	$0.00	$0.00	$2,600.68

MARIA O. PASILLAS, RTA
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EL PASO, TX 79901
PH: (915) 212-0106 FAX: (915) 212-0107 www.elpasotexas.gov/tax-office

CITY TAX OFFICE FEB 25 2018

OP +2500 ✓

Geo No.	Prop ID
W178-999-0030-0175	131591

Legal Description of the Property

3 WESTPORT UNIT 3 NW PT OF 1 BEG 101.46 FT S OF NWC (236.86 FT ON W-238.52 FT ON S-368.96 FT ON E- IRREG ON N) (79997.94 SQ FT)

WOODROW BEAN-TRANSMOUNTAI 79911

OWNER: HUNT COMMUNITIES DEVELOP CO II LLC

HUNT COMMUNITIES DEVELOP CO II
LLC
4401 N MESA ST
EL PASO , TX 79902-1150

CK# 27211447

2017 OVERAGE AMOUNT $3,662.92 ✓

1: CITY OF EL PASO, 6: COUNTY OF EL PASO, 7: EL PASO COMMUNITY COLLEGE, 8: UNIVERSITY MEDICAL CENTER OF EL PASO, 18: CANUTILLO ISD

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

Step 1. Identify the refund recipient. Show information for whomever will be receiving the refund.	Who should the refund be issued to:			
	Name: Hunt Communities Develop Co II LLC ✓			
	Address: 4401 N. Mesa St			
	City, State, Zip: El Paso TX 79932			
	Daytime Phone No.: (915) 533-1122		E-Mail Address:	
Step 2. Provide payment information. Please attach copies of cancelled checks, bank statement or original receipts for all cash payments you made.	Payment made by:	Check No.	Date Paid	Amount Paid
	Hunt Communities Develop Co II LLC	27211447	12/12/17	
	TOTAL AMOUNT PAID (sum of the above amounts)			
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:			
	✓ I paid this account in error and I am entitled to the refund. ✓			
	I overpaid this account. Please refund the excess to the address listed in Step 1.			
	I want this payment applied to next year's taxes.			
	This payment should have been applied to other tax account(s) and/or year(s), escrow (listed below):			
Step 4. Sign the form. Unsigned applications cannot be processed.	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	
2/2/18	Claudia M. Corona		Claudia M. Corona ✓	

TAX OFFICE USE ONLY: ☑ Approved ☐ Denied By: Sbooth Date: 03/02/18 ✓

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

Deposit Status

Notes | Go To:

SHERRYB
ACT80122 v1.89

03/02/2018 10:30:10
ACTEP

DEPOSIT | Remittance | Detail

Summary Query

Summary

Deposit No.	Account No.	Remit Seq No.	Check No.	Payment Amount	Payment Agreement No.
T02071840001	W17899900300175				

Check Image	Deposit No.	Receipt Date	Remit Seq No.	Check No.	Payment Type	Payment Amount	Applied Amount	Transaction Type	Account No.	Payer
	T02071840001	01/31/2018	37774264	60028	CH	$3,662.92	$3,662.92	LG	W17899900300175	HUNT COMMUNITIES DEV
	A12111778	12/11/2017	36237150		CA	$10.00	$10.00	TC	W17899900300175	HUNT COMMUNITIES DEV
	A12111778	12/11/2017	36236906	27211447	CH	$3,662.92	$3,662.92	PA	W17899900300175	HUNT COMMUNITIES DEV
	A01191741	01/19/2017	34096358	69001324	CH	$3,584.60	$3,584.60	PA	W17899900300175	HUNT COMMUNITIES HOL
	A01221623	01/22/2016	31147221	52000166	CH	$3,532.99	$3,532.99	PA	W17899900300175	HUNT COMMUNITIES HOL
	A01261565	01/26/2015	28172014	52000138	CH	$3,491.94	$3,491.94	PA	W17899900300175	HUNT EL PASO INVESTM
	X0131141020	01/31/2014	25516028	00114	CH	$3,387.09	$3,387.09	PA	W17899900300175	HUNT EL PASO INVESTM
	X0129131005	01/29/2013	22717971	00088	CH	$3,220.71	$3,220.71	PA	W17899900300175	HUNT EL PASO INVESTM
	X0202121005	01/31/2012	20399927	00063	CH	$3,167.36	$3,167.36	PA	W17899900300175	HUNT EL PASO INVESTM
	X0131111005	01/31/2011	18100194	00035	CH	$2,866.73	$2,866.73	PA	W17899900300175	HUNT EL PASO INVESTM
	A08311040	08/31/2010	16495530		CA	$10.00	$10.00	TC	W17899900300175	HUNT COMMUNITIES HOL
	X0201101040	01/31/2010	15812770	00004	CH	$2,811.32	$2,811.32	PA	W17899900300175	HUNT COMMUNITIES HOL

Applied Total $58,424.94

OK

Account Status

Prev.Acc... | Next Acc... | Prev.Owner | Next Owner | Acct History | Acct Summary | Notes | Documents | Go To:

SHERRYB
ACT8006 v1.284

03/02/2018 10:29:33
ACTEP

STATUS DETAIL | Expand Fees | Summary

Account Information

Account No. W17-999-0030-0175 | Roll Code REAL PROPERT
Certified Owner HUNT COMMUNITES DEVELOP CO II LLC
Parcel Address WOODROW BEAN-TRANSMOUNTA
Amount Due as of 03/02/2018 | CAD No. 131591
AG INCLUDED | Remove Fees | Countywide

Tax Units

Tax Unit Description
List of Tax Units 1 6 7 8 18 8001 9500

Tax Unit, Yr, Rec. Type

Tax Unit
Year
Rec. Type
Multi Select

Amount Due/Paid Information

Year	Gross Value	H O V D	Base Levy	Paid Levy	Write-Off	Remaining Levy	Fees	Refund	Amount Due
2012	$115,197		$3,662.92	$3,662.92	$.00	$.00	$.00	$3,662.92	$.00
2016	$115,197		$3,584.60	$3,584.60	$.00	$.00	$.00	$.00	$.00
2015	$115,197		$3,532.99	$3,532.99	$.00	$.00	$.00	$.00	$.00
2014	$115,197		$3,491.94	$3,491.94	$.00	$.00	$.00	$.00	$.00
2013	$115,197		$3,387.09	$3,387.09	$.00	$.00	$.00	$.00	$.00
2012	$115,197		$3,220.71	$3,220.71	$.00	$.00	$.00	$.00	$.00
2011	$115,197		$3,167.36	$3,167.36	$.00	$.00	$.00	$.00	$.00
2010	$110,316		$2,866.73	$2,866.73	$.00	$.00	$.00	$.00	$.00
2009	$110,316		$2,811.32	$2,811.32	$.00	$.00	$.00	$.00	$.00
Totals			$64,732.02	$64,732.02	$.00	$.00	$.00	$3,662.92	$.00

Last Payment Date
Last Payer
Alert

Deposit Status

Notes

Go To :

SHERRYB
ACT80122 v1.89

03/02/2018 10:30:10
ACTEP

Deposit | Remittance | DETAIL

Remittance Detail

Account No.	Tax Unit	Year	Rec Type	Applied Amount	Levy	Discount	Penalty & Interest	Attorney Fees	Refund
W1789990300175	8001	2017	TL	$3,662.92	$0.00	$0.00	$0.00	$0.00	$3,662.92
Applied Total				$3,662.92	$0.00	$0.00	$0.00	$0.00	$3,662.92