

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

**DEPARTMENT:** Tax Department

**AGENDA DATE:** August 21, 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

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**BOARD / COMMISSION ACTION:**

Enter appropriate comments or N/A

N/A

\*\*\*\*\*REQUIRED AUTHORIZATION\*\*\*\*\*

**DEPARTMENT HEAD:**



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

*Information copy to appropriate Deputy City Manager*

TAX REFUNDS OVER \$2,500  
August 21, 2018

1. Rahail M. Sohail, in the amount of \$8,000.00, made an overpayment on December 27, 2017 of 2017 taxes.  
(Geo. #H45499900800100)

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Laura D. Prine  
City Clerk



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Maria O. Pasillas, RTA  
Tax Assessor Collector

TAX OFFICE  
RECEIVED

JUL 30 2018

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

CITY TAX  
OFFICE

JUL 30 2018

#36528712

## APPLICATION FOR TAX REFUND

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

## APPLICANT MUST PROVIDE THE FOLLOWING INFORMATION:

Refund To: <b>RAHAIL SOHAIL</b> <b>1223 FRANKLIN DORE AVE</b> <b>EL PASO, TX 79912</b>		Phone: HOME: <b>(915) 581-4559</b> WORK:	Property ID# (One application per account) <b>H45499900800100</b> <b>1106627</b>	
Address (mail refund to): <b>1223 FRANKLIN DORE AVE</b> <b>EL PASO, TX 79912</b>		Property Address: And/or Legal Description: <b>1316 TRAIL RIDGE DR</b> <b>EL PASO, TX 79912</b>		
Tax year requested:	Date payment made:	Check No. & Date, if known:	Amount of taxes paid:	Amount of refund requested:
1. <b>2018</b>	<b>12-27-17</b>	<b>Credit Card</b>	<b>\$8000.00</b>	<b>\$8,000.00</b>
2.				
3.				
TOTAL AMOUNT (sum of the above amounts)			<b>8,000.00</b>	<b>8,000.00</b>

(City Council approval required if over \$2,500)

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:

**Accidentally Paid in Advance for 2018.**  
**I am Selling this Property.**

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

Requestor signature: **D. Y. Sohail**Date: **7-30-18**Printed name: **RAHAIL M. SOHAIL**Title: **OWNER**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:

(X) REFUND APPROVED

Tax Office Approval:

**E.M 8/2/18**

Date:

**8/1/18**

Date:

(Placed on City Council Agenda over \$2,500)

- ( ) 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: \_\_\_\_\_

RECEIVED

AUG 01 2018

POP. Rec'd

LUZR ACT80122 v1.89 08/01/2018 16:06:49 ACTEP

Notes Go To:

DEPOSIT Remittance

Summary Query Summary

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

IP12281798 H45499900800100

Check Image	Deposit No.	Receipt Date	Remit Seq No.	Check No.	Payment Type	Payment Amount	Applied Amount	Transaction Type	Account No.	Payer
IP12281798	✓	12/27/2017	36528712	CC001792283	✓ CR	\$8,000.00	\$8,000.00		H45499900800100	25883931-RAHAIL M SOH
R030818198		12/27/2017	36528712	CC001792283	CR	\$0.00	\$8,000.00	TR	H45499900800100	25883931-RAHAIL M SOH
R030818198		12/27/2017	36528712	CC001792283	CR	\$0.00	\$8,000.00	TR	H45499900800100	25883931-RAHAIL M SOH
IP12271798		12/26/2017	36476883	CC001784577	CR	\$7,119.87	\$7,119.87	PA	H45499900800100	25868806-RAHAIL M SOH
IP10241668		10/23/2016	32738071	CC001375580	CR	\$6,775.90	\$6,775.90	PA	H45499900800100	24862962-RAHAIL SOHAIL
IP10191568		10/15/2015	29654539	CC001086406	CR	\$6,668.12	\$6,668.12	PA	H45499900800100	24048674-RAHAIL SOHAIL
X1104141006		11/04/2014	26813239	01146	CH	\$6,675.49	\$6,675.49	PA	H45499900800100	SOHAIL HUMA Y & RAHA
IP10221368		10/21/2013	23869281	CC000683094	CR	\$2,051.00	\$2,051.00	PA	H45499900800100	22677411-AKHTAR LODHI
IP10211368		10/17/2013	23856210	CC000682587	CR	\$4,500.00	\$4,500.00	PA	H45499900800100	22674998-AKHTAR LODHI
IP11051211		11/01/2012	21416499	CC000537937	CR	\$6,364.30	\$6,364.30	PA	H45499900800100	22056524-RAHAIL M SOH
IP12131157		12/12/2011	19325437	CC000422198	CR	\$6,279.64	\$6,279.64	PA	H45499900800100	21541781-RAHAIL M SOH
IP101110		10/06/2010	16557528	CC000310687	CR	\$6,228.54	\$6,228.54	PA	H45499900800100	21017607-SHAHID M SOH
Applied Total						\$127,913.52				

LUZR ACT8006 v1.284 08/01/2018 16:06:11 ACTEP

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

STATUS DETAIL Expand Fees Summary

Account Information Account No. H454-999-0080-0100 Roll Code REAL PROPER. Certified Owner SOHAIL HUMA Y & RAHAIL M Parcel Address 1316 TRAIL RIDGE DR Amount Due 08/01/2018 CAD No. 166627

Amount Due/Paid Information

Year	Gross Value	H O V D	Base Levy	Paid Levy	Write-Off	Remaining Levy	Fees	Refund	Amount Due
2009	\$278,151		\$6,929.67	\$6,929.67		\$0.00	\$0.00	\$0.00	\$0.00
2010	\$245,068		\$6,228.54	\$6,228.54		\$0.00	\$0.00	\$0.00	\$0.00
2011	\$245,068		\$6,279.64	\$6,279.64		\$0.00	\$0.00	\$0.00	\$0.00
2012	\$243,962		\$6,364.30	\$6,364.30		\$0.00	\$0.00	\$0.00	\$0.00
2013	\$243,962		\$6,551.00	\$6,551.00		\$0.00	\$0.00	\$0.00	\$0.00
2014	\$243,962		\$6,675.49	\$6,675.49		\$0.00	\$0.00	\$0.00	\$0.00
2015	\$240,560		\$6,668.12	\$6,668.12		\$0.00	\$0.00	\$0.00	\$0.00
2016	\$240,560		\$6,775.90	\$6,775.90		\$0.00	\$0.00	\$0.00	\$0.00
2017	\$240,560		\$7,119.87	\$7,119.87		\$0.00	\$0.00	\$0.00	\$0.00
Totals	\$117,375.85		\$117,375.85	\$117,375.85		\$0.00	\$2,537.67	\$8,000.00	\$0.00

Amount Due \$0.00

Multi Select Rec. Type Year Tax Unit Tax Unit Description Tax Unit Tax Unit

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ACT80122 v1.89

Deposit	Remittance	DETAIL
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[illegible]