

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

DEPARTMENT: Tax Department

AGENDA DATE: September 17, 2019

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:



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

Information copy to appropriate Deputy City Manager

TAX REFUNDS
September 17, 2019

1. Michael Kors (USA) Inc., in the amount of \$3,179.03, made an overpayment on March 11, 2019 of 2018 taxes.
(Geo. #113699911677934)
2. Border Recapping LLC, in the amount of \$3,697.86, made an overpayment on January 24, 2019 of 2018 taxes.
(Geo. #17PP99903076050)
3. Hunt Communities Holding, LLC , in the amount of \$11,588.82, made an overpayment on January 31, 2018 of 2017 taxes.
(Geo. #X26299900000273)

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

TAX OFFICE
RECEIVED
SEP 03 2019

MICHAEL KORS (USA) INC
11 WEST 42ND STREET
NEW YORK, NY 10036

OP
+2500

Geo No. 1136-999-1167-7934	Prop ID 621218
Legal Description of the Property INV FURN CMP MACH SIGN 8401 W GATEWAY BLVD-B05B	
OWNER: MICHAEL KORS RETAIL INC	

2018 OVERAGE AMOUNT \$3,179.03

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:

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:

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

CK 519375

3/11/19

17,779.57

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

JMC 9/3/19

[Signature]

Joseph Turpin 201-812-2521

TAX OFFICE USE ONLY:



Approved



Denied

By:

[Signature]

Date:

09/03/19

THIS DOCUMENT HAS A COLORED FACE AND AN AUTHENTIC WATERMARK VISIBLE WHEN HELD TO THE LIGHT

MICHAEL KORS (USA), INC.

11 West 42nd Street
New York, NY 10036

JP Morgan Chase Bank
Syracuse, NY 13206
50-937-213

519375

CHECK DATE	CONTROL NUMBER	AMOUNT
03/05/19	00519375	\$****17,779.57

SEVENTEEN THOUSAND SEVEN HUNDRED SEVENTY NINE AND 57/100*****

US Dollars

PAY TO THE ORDER OF
EL PASO TAX ASSESSOR-COLLECTOR
PO BOX 2992
EL PASO TX 79999-2992

AUTHORIZED SIGNATURE

AUTHORIZED SIGNATURE

⑈00519375⑈ ⑆021309379⑆ 601875636⑈

Security Features Included: ⑆ Details on back

Ⓐ The security features listed below as well as those not listed, exceed industry guidelines.

Security Features:

- Authentic Watermark
- Void Pantograph
- Security Screen

Results of document alteration:

- Authentic watermark not visible when held to light
- VOID will appear when check is copied
- Absence of "Original Document" verbiage on back of check

Ⓐ Product design is a certification mark of the Check Payment System Association
* FEDERAL RESERVE BOARD OF GOVERNORS REG. CO.

Pay to the order of
Wells Fargo Bank, El Paso, N.A.
El Paso, Texas
For Deposit Only
Maria O. Pasillas, RTA
City Tax Assessor / Collector

DO NOT WRITE, STAMP OR SIGN BELOW THIS LINE
RESERVED FOR FINANCIAL INSTITUTION USE *

ENDORSE HERE

Paid Date
Account Number
Check/Serial Number
Check/Serial Amount
Sequence Number

03/13/19
601875636
519375
17,779.57
9570266764

**TAX OFFICE
RECEIVED**

SEP 03 2019
**TAX OFFICE
RECEIVED**
SEP 03 2019

Deposit Status

Notes Go To:

ANDREA
ACT80122 v1.90

09/03/2019 15:48:00
ACTEP

DEPOSIT Remittance Detail

Summary Query

Summary

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

A03111986 113699911677934

Check/Receipt Images	Deposit No.	Receipt Date	Remit Seq No.	Check No.	Payment Type	Payment Amount	Applied Amount	Transaction Type	Account No.	Payer
	A03111986	03/11/2019	40926913	519375	CH	\$17,779.57	\$14,600.54	PA	113699911677934	27272472-MICHAEL KOR
	A03111986 ✓	03/11/2019	40926913	519375 ✓	CH	\$17,779.57 ✓	\$3,179.03	LG	113699911677934	27272472-MICHAEL KOR
	A03191865	02/28/2018	38014024	487034	CH	\$5,472.11	\$5,472.11	PA	113699911677934	MICHAEL KORS RETAIL II
	A03191865	02/28/2018	38014023	487035	CH	\$14,730.36	\$9,258.25	PA	113699911677934	MICHAEL KORS RETAIL II
	A03061778	03/06/2017	35020057	444229	CH	\$21,838.93	\$15,082.70	PA	113699911677934	MICHAEL KORS RETAIL II
	X1130152001	11/30/2015	30052261	61541	CH	\$13,776.55	\$6,855.63	PA	113699911677934	MICHAEL KORS RETAIL II
	1103141001	11/03/2014	26798660	97526	CH	\$25,601.31	\$25,601.31	PA	113699911677934	MICHAEL KORS RETAIL II
	X1118131017	11/18/2013	24129324	41317	CH	\$24,181.04	\$24,181.04	PA	113699911677934	MICHAEL KORS RETAIL II
	X1119121002	11/19/2012	21533096	89381	CH	\$12,578.61	\$12,578.61	PA	113699911677934	MICHAEL KORS RETAIL II
	EC04251257	04/24/2012	20847305	CC000507569	CH	\$13,964.71	\$13,964.71	PA	113699911677934	21887316-MICHAEL KOR
Applied Total						\$130,773.93				



**TAX OFFICE
RECEIVED**
AUG 29 2019

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

BORDER RECAPPING LLC
12277 ROJAS DR STE C
EL PASO, TX 79936-7793

OP
+2500

Geo No. 17PP-999-0307-6050	Prop ID 669051
Legal Description of the Property INV FURN CMP MACH VEH 12277 ROJAS DR-C 79936	
OWNER: BORDER RECAPPING LLC	

2018 OVERAGE AMOUNT \$3,697.86 ✓

1: CITY OF EL PASO, 6: COUNTY OF EL PASO, 7: EL PASO COMMUNITY COLLEGE, 8: UNIVERSITY MEDICAL CENTER OF EL PASO, 9: SOCORRO 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:

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

Step 1. Identify the refund recipient. Show information for whom ever will be receiving the refund.	Who should the refund be issued to: Name: <u>Border Recapping, LLC</u> Address: <u>900 Loma Verde Dr.</u> City, State, Zip: <u>El Paso, TX 79936</u> Daytime Phone No: <u>575 541-4259 ext. 5160</u> E-Mail Address: <u>nicole.foster@borderincor</u>			
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
		CK 6628	11/24/19	40,676.41
	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: <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. 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	
	<u>Elizabeth Foster</u>		<u>ELIZABETH FOSTER 08/21/19</u> ✓	
TAX OFFICE USE ONLY: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied By: <u>[Signature]</u> Date: <u>08/29/19</u> ✓				

8/22/2019

RECEIVED

AUG 29 2019

BORDER RECAPING, LLC
12277 ROJAS DRIVE SUITE B
EL PASO, TX 79936

EDVA COMPASS
COMPASS BANK
EL PASO, TEXAS

6628

35-1054/1130
17377

CHECK ARMOR

6628

1/9/2019

\$40,676.41

DATE
FORTY THOUSAND SIX HUNDRED SEVENTY SIX AND 41/100 DOLLARS

AMOUNT

PAY
TO THE
ORDER
OF

TAX ASSESSOR COLLECTOR
P.O. BOX 2992

1339

EL PASO, TX 79999-2992

AUTHORIZED SIGNATURE

⑈006628⑈ ⑆113010547⑆ 6736113919⑈

Photo Safe Deposit
Details on Back

113010547
6736113919
BORDER RECAPING

006628

Security Features exceed industry standards and include:

- ImageMatch™: Matching account and check number on back (Patent No. 9,240,088)
- MobileMark™: Mobile Deposit check mark to indicate check has been deposited via mobile device
- The Security Weave™: pattern on back designed to deter fraud
- Microprint (MP) lines printed on front and back
- The words "ORIGINAL DOCUMENT" across the back
- Photo Safe Deposit™ icon visible on front and back

Do not cash if:

- Any of the features listed above are missing or appear altered
- Fugitive Ink on back looks pink or has disappeared
- Brown stains or colored spots appear on both front and back, and in Chemical Wash Detection Box



Pay to the order of
Wells Fargo Bank, El Paso, N.A
El Paso, Texas
For Deposit Only
Maria O. Pasillas, RTA
City Tax Assessor / Collector

☐ CHECK HERE IF MOBILE DEPOSIT

DO NOT WRITE, STAMP OR SIGN BELOW THIS LINE
RESERVED FOR FINANCIAL INSTITUTION USE

ENDORSE HERE

\$3697.86

8/11/2010



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

OP +2500 ✓

HUNT COMMUNITIES HOLDING LLC
4401 N MESA ST
EL PASO, TX 79902-1150

TAX OFFICE
RECEIVED
SEP 03 2019

Geo No. X262-999-0000-0273	Prop ID 344393
Legal Description of the Property FOSTER SURV 262 ABST 10062 (3.3904 AC)	
OWNER: HUNT COMMUNITIES HOLDING LLC	

2017 OVERAGE AMOUNT \$11,588.82 ✓

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:

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: <u>Hunt Communities Holding, LLC</u> ✓			
	Address: <u>4401 N. Mesa St</u> ✓			
	City, State, Zip: <u>EL PASO, TX 79902</u>			
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
		<u># 69001429</u>	<u>1/23/18</u>	<u>12,879.18</u>
	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:			
	<input checked="" type="checkbox"/> I paid this account in error and I am entitled to the refund. ✓			
	<input 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.			
<input type="checkbox"/> 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	
	<u>Natalie Blanco</u>		<u>Natalie Blanco</u> <u>8/30/19</u>	
TAX OFFICE USE ONLY: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied By: <u>[Signature]</u> Date: <u>09/03/19</u>				



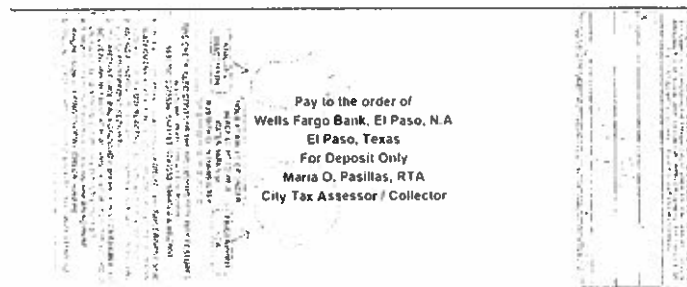
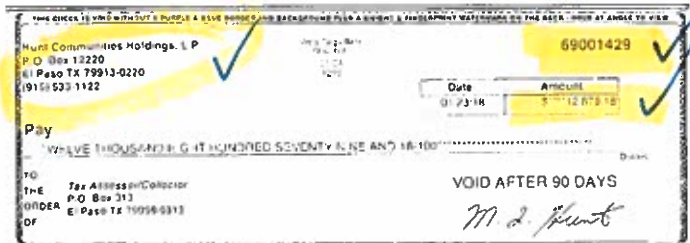
Transaction Search

TAX OFFICE
RECEIVED

SEP 03 2019

Images

Date/Time Printed: 08/30/2019, 1:56 PM PDT
 Check 69001429 - 12879.18 USD



Item Details

Account Number	4121247647	Item Sequence Number	000285021727
Account Name	INC HUNT COMMUNITIES	Bank ID	121000248
Check	69001429		
Amount	12879.18 USD Debit		
Status	Check Paid		
Posting Date	02/08/2018		
As of Date	02/08/2018		

Deposit Status

Notes

Go To:

09/03/2019 15:05:23
ACTEPANDREA
ACT80122 v1.90

DEPOSIT

Remittance

Detail

Summary

Summary Query

Summary Query				Remit Seq No.		Check No.		Payment Amount		Payment Agreement No.	
Deposit No.		Account No									
T02071840001		X26299900000273									
Check/Receipt Images	Deposit No.	Receipt Date	Remit Seq No.	Check No.	Payment Type	Payment Amount	Applied Amount	Transaction Type	Account No.	Payer	
	RF180327	01/31/2018	37774162	01429	CH	\$0.00	\$0.00	DA	X26299900000273	HUNT COMMUNITIES HOL	
	RF180327	01/31/2018	37774162	01429	CH	\$0.00	\$0.00	DA	X26299900000273	HUNT COMMUNITIES HOL	
	RF180327	01/31/2018	37774162	01429	CH	\$0.00	\$0.00	DA	X26299900000273	HUNT COMMUNITIES HOL	
	RF180327	01/31/2018	37774162	01429	CH	\$0.00	\$0.00	DA	X26299900000273	HUNT COMMUNITIES HOL	
	RF180327	01/31/2018	37774162	01429	CH	\$0.00	\$0.00	DA	X26299900000273	HUNT COMMUNITIES HOL	
	RF180327	01/31/2018	37774162	01429	CH	\$0.00	\$0.00	DA	X26299900000273	HUNT COMMUNITIES HOL	
	T02071840001	01/31/2018	37774162	01429	CH	\$12,879.18	\$1,290.36	PA	X26299900000273	HUNT COMMUNITIES HOL	
	T02071840001	01/31/2018	37774162	01429 ✓	CH	\$12,879.18	\$11,588.82	LG	X26299900000273	HUNT COMMUNITIES HOL	
	A11091778	11/09/2017	35937260	20133680	CH	\$31,669.45	\$11,588.82	AA	X26299900000273	24859229-WESTSTAR TT	
	R040318280	11/09/2017	35937260	20133680	CH	\$0.00	\$9,734.25	TR	X26299900000273	SUN 262 PARTNERS LTD	
	RF180327	11/09/2017	35937260	20133680	CH	\$0.00	\$486.74	DA	X26299900000273	SUN 262 PARTNERS LTD	
	RF180327	11/09/2017	35937260	20133680	CH	\$0.00	\$0.00	DA	X26299900000273	24859229-WESTSTAR TT	
	RF180327	11/09/2017	35937260	20133680	CH	\$0.00	\$2,760.97	DA	X26299900000273	SUN 262 PARTNERS LTD	
Applied Total							\$194,803.87				