

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



DEPARTMENT: Tax Office

AGENDA DATE: 12/16/25

PUBLIC HEARING DATE:

CONTACT PERSON NAME: Maria O. Pasillas

PHONE NUMBER: 915-212-0106

DISTRICT(S) AFFECTED: All

STRATEGIC GOAL:

Goal 6 – Set the Standard for Sound Governance and Fiscal Management

SUBGOAL:

6.11 Provide efficient and effective services to taxpayers

SUBJECT:

That the tax refunds listed on the attachment posted with this agenda be approved. This action would allow us to comply with state law which requires approval by the legislative body of refunds of tax overpayment exceeding the three (3) year limit. (See Attachment A).

BACKGROUND / DISCUSSION:

Approve property tax overpayment refunds exceeding the statutory three (3) year limit, per the Texas Property Tax Code, Sec. 31.11 – Refunds of Overpayments or Erroneous Payments.

COMMUNITY AND STAKEHOLDER OUTREACH:

N/A

PRIOR COUNCIL ACTION:

Council has considered this previously on a routine basis.

AMOUNT AND SOURCE OF FUNDING:

N/A

REPORTING OF CONTRIBUTION OR DONATION TO CITY COUNCIL:

N/A

NAME	AMOUNT (\$)

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

DEPARTMENT HEAD:

Maria O. Pasillas


Maria O. Pasillas
2025.12.01 15:59:45 -07'00'

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

TAX REFUNDS OVER THREE (3) YEARS
December 16, 2025

1. Mels Electric LP, in the amount of \$18.22, made an overpayment on November 13, 2020 of 2020 taxes.
(Geo. #X296-000-000R-0700)
2. Mels Electric LP, in the amount of \$258.03, made an overpayment on November 17, 2021 of 2021 taxes.
(Geo. #X296-000-000R-0700)

Laura D. Prine
City Clerk



Maria O. Pasillas, RTA
Tax Assessor/Collector

RESOLUTION

WHEREAS, pursuant to Section 31.11 (c) of the Texas Code an application for a refund must be made within three (3) years after the date of the payment or the taxpayer waives the right to the refund; and

WHEREAS, pursuant to Section 31.11 (c-1) the governing body of the taxing unit may extend the deadline for a single period not to exceed two years on a showing of good cause by the taxpayer; and

WHEREAS, taxpayer, MELS ELECTRIC LP (“Taxpayer”) has applied for a refund with the tax assessor for their 2020 property taxes that were overpaid on November 13, 2020, in the amount of \$18.22 (EIGHTEEN DOLLARS AND TWENTY-TWO/100) for all taxing entities; and

WHEREAS, City Council may extend the deadline for the Taxpayer’s application for the overpayment of the 2020 taxes for a period not to exceed two years on a showing of good cause by the taxpayer; and

NOW, THEREFORE, BE IT RESOLVED BY THE CITY COUNCIL OF THE CITY OF EL PASO:

THAT THE City finds that MELS ELECTRIC LP showed a good cause to extend the deadline to apply for a refund of the overpayment of the 2020 taxes and the tax refund in the amount of \$18.22 (EIGHTEEN DOLLARS AND TWENTY-TWO/100) is approved.

APPROVED this ____ day of _____ 2025.

CITY OF EL PASO:

Renard U. Johnson
Mayor

ATTEST:

Laura D. Prine
City Clerk

APPROVED AS TO FORM:

Oscar Gomez
Assistant City Attorney

APPROVED AS TO CONTENT:

Maria O. Pasillas, RTA
City Tax Assessor/Collector



TAX OFFICE
RECEIVED

NOV 07 2025

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 Email: taxforms@elpasotexas.gov

MELS ELECTRIC SERVICE INC
PO BOX 40
WILMER, TX 75172-0040

OP
+ 3 yrs

Geo No. X296-000-000R-0700	Prop ID 215311
Legal Description of the Property LEIGH CLARK SURV 296 ABST 6260 NE 1/4 OF NE 1/4 OF SW 1/4 OF SW 1/4 (2.50 AC)	
79928	
OWNER: CONTEL CELLULAR OF EL PASO INC	

2020 OVERAGE AMOUNT \$18.22

6: COUNTY OF EL PASO, 7: EL PASO COMMUNITY COLLEGE, 8: UNIVERSITY MEDICAL CENTER OF EL PASO, 9: SOCORRO ISD, 14: HORIZON REGIONAL MUD, 15: EMERG. SERVICES DIST #1

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: Mels Electric, LP															
	Address: 4304 Clarence Murphy Road															
	City, State, Zip: Springfield, TN 37172															
Step 2. Provide payment information. Please attach copy of cancelled check, original receipt, online payment confirmation or bank/credit card statement.	Daytime Phone No.: 214-354-1902		E-Mail Address: tim@4kpartners.com													
	<table><tr><td>Payment made by:</td><td>Check No.</td><td>Date Paid</td><td>Amount Paid</td></tr><tr><td>Check Payment</td><td>32776</td><td>11/13/2020</td><td>\$303.48</td></tr><tr><td colspan="4">TOTAL AMOUNT PAID (sum of the above amounts)</td></tr></table>				Payment made by:	Check No.	Date Paid	Amount Paid	Check Payment	32776	11/13/2020	\$303.48	TOTAL AMOUNT PAID (sum of the above amounts)			
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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.																
Step 4. Sign the form. Unsigned applications cannot be processed.	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):																
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) <i>Timothy Keierleber</i> <small>Timothy Keierleber (Nov 7, 2025 12:39:23 CST)</small>		PRINTED NAME & DATE Tim Keierleber, 11/7/25														
TAX OFFICE USE ONLY: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied By: <i>N.H.</i> Date: <i>11-10-25</i>																

RESOLUTION

WHEREAS, pursuant to Section 31.11 (c) of the Texas Code an application for a refund must be made within three (3) years after the date of the payment or the taxpayer waives the right to the refund; and

WHEREAS, pursuant to Section 31.11 (c-1) the governing body of the taxing unit may extend the deadline for a single period not to exceed two years on a showing of good cause by the taxpayer; and

WHEREAS, taxpayer, MELS ELECTRIC LP ("Taxpayer") has applied for a refund with the tax assessor for their 2021 property taxes that were overpaid on November 17, 2021, in the amount of \$258.03 (TWO HUNDRED FIFTY-EIGHT DOLLARS AND THREE/100) for all taxing entities; and

WHEREAS, City Council may extend the deadline for the Taxpayer's application for the overpayment of the 2021 taxes for a period not to exceed two years on a showing of good cause by the taxpayer; and

NOW, THEREFORE, BE IT RESOLVED BY THE CITY COUNCIL OF THE CITY OF EL PASO:

THAT THE City finds that MELS ELECTRIC LP showed a good cause to extend the deadline to apply for a refund of the overpayment of the 2021 taxes and the tax refund in the amount of \$258.03 (TWO HUNDRED FIFTY-EIGHT DOLLARS AND THREE/100) is approved.

APPROVED this ____ day of _____ 2025.

CITY OF EL PASO:

Renard U. Johnson
Mayor

ATTEST:

Laura D. Prine
City Clerk

APPROVED AS TO FORM:

Oscar Gomez
Assistant City Attorney

APPROVED AS TO CONTENT:

Maria O. Pasillas
Maria O. Pasillas, RTA
City Tax Assessor/Collector



**TAX OFFICE
RECEIVED**

NOV 07 2025

**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 Email: taxforms@elpasotexas.gov

**MELS ELECTRIC SERVICE INC
PO BOX 40
WILMER, TX 75172-0040**

*OP
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OWNER: CONTEL CELLULAR OF EL PASO INC	

2021 OVERAGE AMOUNT \$258.03

6: COUNTY OF EL PASO, 7: EL PASO COMMUNITY COLLEGE, 8: UNIVERSITY MEDICAL CENTER OF EL PASO, 9: SOCORRO ISD, 14: HORIZON REGIONAL MUD, 15: EMERG. SERVICES DIST #1

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	Name: Mels Electric, LP			
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	Daytime Phone No.: 214-354-1902		E-Mail Address: tim@4kpartners.com	
Step 2. Provide payment information. Please attach copy of cancelled check, original receipt, online payment confirmation or bank/credit card statement.	Payment made by:		Check No.	Date Paid
	Check Payment		33607	11/17/2021
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	
	<i>Timothy Keierleber</i> <small>Timothy Keierleber (Rev. 7, 2025 12.30.23 CST)</small>		Tim Keierleber, 11/7/25	
TAX OFFICE USE ONLY: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied By: <i>N.H.</i> Date: <i>11-10-25</i>				