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

DEPARTMENT:	
AGENDA DATE:	
PUBLIC HEARING DATE:	
CONTACT PERSON NAME:	PHONE NUMBER:
DISTRICT(S) AFFECTED:	
STRATEGIC GOAL:	
SUBGOAL:	

SUBJECT:

BACKGROUND / DISCUSSION:	
COMMUNITY AND STAKEHOLDER OUTREACH:	
PRIOR COUNCIL ACTION:	
AMOUNT AND SOURCE OF FUNDING:	
REPORTING OF CONTRIBUTION OR DONATION TO CIT	Y COUNCIL:
NAME	AMOUNT (\$)
	(*/
**************************************	UTHORIZATION************************************
DEPARTMENT HEAD:	

TAX REFUNDS OVER THREE (3) YEARS April 1, 2025

1. Corelogic Tax Services LLC, in the amount of \$110.00, made an overpayment on December 20, 2021 of 2021 taxes.

(Geo. #D444-999-0050-7100)

2. Corelogic Tax Services LLC, in the amount of \$240.51, made an overpayment on February 1, 2021 of 2020 taxes.

(Geo. #F170-999-0020-1500)

3. Corelogic Tax Services LLC, in the amount of \$215.82, made an overpayment on December 20, 2021 of 2021 taxes. (Geo. #L226-000-0060-1200)

 Corelogic Tax Services LLC, in the amount of \$14.37, made an overpayment on April 05, 2021 of 2020 taxes. (Geo. #M395-999-0280-0910)

5. Corelogic Tax Services LLC, in the amount of \$22.79, made an overpayment on November 30, 2021 of 2021 taxes. (Geo. # M793-000-0010-2000)

 Corelogic Tax Services LLC, in the amount of \$435.42, made an overpayment on December 20, 2021 of 2021 taxes. (Geo. #T287-999-3250-1000)

(Soura Valoz for Maria Pasillas

Maria O. Pasillas, RTA Tax Assessor Collector

Laura D. Prine City Clerk



JAN 28 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

Geo No. D444-999-0050-7100 Prop ID 22621

Legal Description of the Property

5 DESERT HILLS LOT 15 (6000 SQ FT)

4124 HALLMARK CT 79904

OWNER: SALAS REFUGIO & JUANA

2021 OVERAGE AMOUNT \$110.00

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:

CORELOGIC PO BOX 9205

COPPELL, TX 75019-9214

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 PROPER	TY TA	X REFUND:	This application in	nust be comple	ted, signed, and	I submitted with sup	porting docume	ntation to be valid.
Step 1. Identify the refund	Who	Who should the refund be issued to:						
recipient. Show information for	Name	Name: CORELOGIC TAX SERVICES LLC						· .
whomever will be receiving	Addre	Address: PO BOX 9202						
the refund.	City,	City, State, Zip: COPPELL,TX, 75019						
			817-699-21			E-Mail Address:	KIRAM@CO	RELOGIC.COM
Step 2. Provide payment	Paym	ent made by:			Theck No.	Date Paid	Amou	nt Paid
information. Please attach copy of cancelled	Elect	ronic Fund Tra	nsfer	RG:	2112172054	12/20/2021	\$27	4,189,766.61
check, original receipt, online				i				
payment confirmation or bank/credit card statement.		TOTAL AMOUNT DAID (
Step 3. Provide reason for	Please check one of the following:							
this refund.	I paid this account in error and I am entitled to the refund.							
Please list any accounts and/or years that you intended to pay	V	I overpaid this account. Please refund the excess to the address listed in Step 1.						
with this overage.		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.	have g guilty	given on this for of a Class A n	rm is true and co nisdemeanor or a	orrect. (If you	ou make a fals	Texas Penal Code	s application, ye., Sec. 37.10.	you could be found
The 45/25	SIGNATURE OF REQUESTOR (REQUIRED) PRINTED NAME & DATE TVICTA (M/C) 1/22/25							
ZAX OFFICE USE ONLY:	VA	Approved	Denied	By:	W.L	Date:	1- 3.	825

Print Date: 07/12/2024

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, Corelogic Tax Services LLC, ("Taxpayer") has applied for a refund with the tax assessor for their 2021 property taxes that were overpaid on December 20, 2021in the amount of \$110.00 (One Hundred and Ten and No/100 Dollars) 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 Corelogic Tax Services LLC, 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 \$110.00 (One Hundred and Ten and No/100 Dollars) is approved.

2025

ADDDOTTED 41:

APPROVED this	day of	, 2025.
		CITY OF EL PASO:
ATTEST:		Renard U. Johnson Mayor
Laura D. Prine	_	
City Clerk APPROVED AS TO FORM:		APPROVED AS TO CONTENT:
Oscar Gomez	_	Maria Pasillas Maria Pasillas
Assistant City Attorney		Tax Assessor/Collector



TAX OFFICE RECEIVED

FEB 0 7 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

Geo No. F170-999-0020-1500 Prop ID 235725

Legal Description of the Property

2 FALCON HEIGHTS LOT 15 (4973.00 SQ FT)

10037 PALOMA DR

CORELOGIC TAX SERVICES LLC 3001 HACKBERRY ROAD IRVING, TX 75063

APPLICATION FOR PROPERTY TAY REFUND.

OWNER: GROSS DAVID F & LAURA M

2020 OVERAGE AMOUNT

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.

	ALL ELCHTION FOR THOI ER	This appreciation must be	e compreted, signed, ai	ia sabilitica wiai suppor	ting documentation to be valid.		
	Step 1. Identify the refund	Who should the refund be issued to:			主义为"三人"中发生 。《		
	recipient.	Name: CORELOGIC TAX SERVIC	ES LLC		/		
	Show information for whomever will be receiving	Address: PO BOX 9202					
	the refund.	City, State, Zip: COPPELL TEXAS	75019				
		Daytime Phone No.: 817-699-2106	70010	E-Mail Address sh	enshwetha@corelogic.com		
	Step 2. Provide payment	Payment made by:	Check No.	Date Paid	Amount Paid		
-	information. Please attach copy of cancelled check, original receipt, online	Check Payment	410633453	02/01/2021	\$3,676.37		
	payment confirmation or bank/credit card statement.		NT PAID (sum of th	ne above amounts)			
	Step 3. Provide reason for this refund. Please list any accounts and/or years that you intended to pay	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.					
	with this overage.	I want this payment applied to next year's taxes.					
		This payment should have been ap	plied to other tax acc	count(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 rehave given on this form is true and correct guilty of a Class A misdemeanor or a state	. (If you make a fal	se statement on this ap	oplication, you could be found		
•	Puc 2/20/25	SIGNATURE OF REQUESTOR (REQUI	RINTED NAME & D	ATE 25			
	TAX OFFICE USE ONLY		4 1 1		21125		
	TAX DEFICE LISE ONLY	Approved Denied By	11 4	Date:	7-11:0		

Print Date: 07/19/2024

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, Corelogic Tax Services LLC ("Taxpayer") has applied for a refund with the tax assessor for their 2020 property taxes that were overpaid on February 1, 2021in the amount of \$240.51 (Two Hundred and Forty and 51/100 Dollars) 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 Corelogic Tax Services LLC, 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 \$240.51 (Two Hundred and Forty and 51/100 Dollars) is approved.

2025

A DDDOVED 4kie

APPROVED this	aay oi	, 2025.
		CITY OF EL PASO:
		Renard U. Johnson Mayor
ATTEST:		
Laura D. Prine	_	
City Clerk		
APPROVED AS TO FORM:		APPROVED AS TO CONTENT:
		Cloana Valley for Maria Pasillas
Oscar Gomez		Maria Pasillas
Assistant City Attorney		Tax Assessor/Collector





MARIA O. PASILLAS, RTA CITY OF EL PASO TAX ASSESSÓR COLLECTOR

JAN 28 2025

CITY TAX OFFICE

221 N. KANSAS, STE 300 EL PASO, TX 79901 PH: (915) 212-0106 FAX: (915) 212-0107 Email: taxforms@elpasotexes.gov

Prop ID L226-000-0060-1200 23175 Legal Description of the Property 6 LAS LUNAS LOT 12 (6000.00 SQ FT)

CORELOGIC PO BOX 9205 COPPELL, TX 75019-9214

OWNER: ROMERO LUIS C

1128 CHRIS FORBES CIR

Geo No.

2021 OVERAGE AMOUNT

4: CITY OF SOCORRO, 6: COUNTY OF EL PASO, 7: EL PASO COMMUNITY COLLEGE, 8: UNIVERSITY MEDICAL CENTER OF EL PASO, 9: SOCORRO ISD, 25: LWR VALLEY WTR DISTRICT, 27: EMERG. SERVICES DIST. #2

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 RAMK / Happine Fal is required for refunds in excess of \$2500.

APPLICATION FOR PROPER	This application must	be completed, signed, and	d submitted with supp	orting documentation to be valid.				
Step 1. Identify the refund	Who should the refund be issued to:			经 可能整合可能的				
recipient. Show information for	Name: CORELOGIC TAX SER	Name: CORELOGIC TAX SERVICES LLC						
whomever will be receiving	Address: PO BOX 9202			1				
the refund.	City, State, Zip: COPPELL, TX, 75	City, State, Zip: COPPELL, TX, 75019						
	Daytime Phone No.: 817-699-2106		E-Mail Address:	KIRAM@CORELOGIC.COM				
Step 2. Provide payment	Payment made by:	Check No.	Date Paid	Amount Paid				
information. Please attach copy of cancelled	Electronic Fund Transfer	RG2112172054	12/20/2021	\$274,189,766.61				
check, original receipt, online				-				
payment confirmation or bank/credit card statement.	TOTAL AMOI	INT PAID (sum of the	e ahove amounts)					
Step 3. Provide reason for	Please check one of the following:							
this refund. Please list any accounts and/or	I paid this account in error and I am entitled to the refund.							
years that you intended to pay	I overpaid this account. Please refund the excess to the address listed in Step 1.							
with this overage.	I want this payment applied to next year's taxes.							
	This payment should have been a	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 have given on this form is true and corre guilty of a Class A misdemeanor or a str	ct. (If you make a fals	se statement on this	application, you could be found				
D 2/5/25	SIGNATURE OF REQUESTOR (REQU	JIRED) PR	RINTED NAME &	DATE				
Tina	Harles	7	ricia (a	1/CU 1/20/25				
) 777				
TAX OFFICE USE ONLY:	Approved Denied E	By: N.H	Date:	1-28.22				

Print Date: 07/12/2024

v52.1.9

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, Corelogic Tax Services LLC, ("Taxpayer") has applied for a refund with the tax assessor for their 2021 property taxes that were overpaid on December 20, 2021in the amount of \$215.82 (Two Hundred and Fifteen and 82/100 Dollars) 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 Corelogic Tax Services LLC, 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 \$215.82 (Two Hundred and Fifteen and 82/100 Dollars) is approved.

2025

ADDDOVED 41.

APPROVED this	_ day of, 2025.
	CITY OF EL PASO:
	Renard U. Johnson Mayor
ATTEST:	
Laura D. Prine	
City Clerk	
APPROYED AS TO FORM:	APPROVED AS TO CONTENT:
	Soura Caldy for Maria Pasillas
Oscar Gomez	Maria Pasillas
Assistant City Attorney	Tax Assessor/Collector

12x year



FEB 0 7 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

Geo No. M395-999-0280-0910 Prop ID 651026

Legal Description of the Property BLK 28 MESQUITE HILLS #7 LOT 91

7212 COPPER TRAIL AVE 79934

CORELOGIC TAX SERVICE LLC 3001 HACKBERRY ROAD IRVING, TX 75063

+ 3yrs

OWNER: NAVA JAMAL

2020 OVERAGE AMOUNT

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 PROPER	TY TA	X REFUND	This application	must be comple	eted, signed, an	d submitted with sup	porting documer	itation to be v	alid.
Step 1. Identify the refund	Who should the refund be issued to:								
recipient. Show information for	Name: CORELOGIC TAX SERVICES LLC								
whomever will be receiving	Addı	ress: PO BO	X 9202						
the refund.	City,	State, Zip:	COPPELL TEXAS	75019			V		
	Dayt	ime Phone N	No.: 817-699-210	6	200	E-Mail Address	:shenshwetha(@corelogic.	com
Step 2. Provide payment	Paym	nent made by	/:	(Check No.	Date Paid	Amour	ıt Paid	基語集
information. Please attach copy of cancelled	Che	ck Payment		4	10687102	04/05/2021		\$86.06	
check, original receipt, online						1		_	
payment confirmation or bank/credit card statement.		TOTAL AMOUNT PAID (sum of the above amounts)							
Step 3. Provide reason for	Please check one of the following:								
this refund. Please list any accounts and/or	I paid this account in error and I am entitled to the refund.								
years that you intended to pay	V	I overpaid this account. Please refund the excess to the address listed in Step 1.							
with this overage.		I want this	payment applied t	o next year's	taxes.				
		This paym	ent should have be	en applied to	other tax acc	ount(s) and/or year	r(s), escrow (lis	sted below):	^
					W. 44.5.4.				
Step 4. Sign the form.			, I hereby apply for						
Unsigned applications cannot be processed.	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								
Luia	,	\mathcal{A}	11/11/01 -		T	vicio C	11/01/	1-2	7)-
2120125	(very			HOOLG	rinco		./
TAX OFFICE USE ONLY:	1	Approved	Denied	Ву:	14.61	Date:	2.11-	25	V
THE OTHER OSE ONLY.		rpproved	Demed		10.10		0.11		

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, Corelogic Tax Services LLC ("Taxpayer") has applied for a refund with the tax assessor for their 2020 property taxes that were overpaid on April 5, 2021, in the amount of \$14.37 (Fourteen and 37/100 Dollars) 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 Corelogic Tax Services LLC, 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 \$14.37 (Fourteen and 37/100 Dollars) is approved.

2025

APPROVED this a	ay 01, 2025.
	CITY OF EL PASO:
	Renard U. Johnson Mayor
ATTEST:	
Laura D. Prine	
City Clerk	
APPROVED AS TO FORM:	APPROVED AS TO CONTENT:
	Soura Valdy for Maria Pasillas
Oscar Gomez	Maria Pasillas
Assistant City Attorney	Tax Assessor/Collector





FEB 0 7 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

Geo No. Prop ID M793-000-0010-2000 680549

Legal Description of the Property BLK 1 MORNINGSIDE AT MISSION RIDGE #1

LOT 20

NATIONSTAR MORTGAGE LLC DBA MR COOPER 3001 HACKBERRY RD IRVING, TX 75063

1016 GAITAN ST 79928

OWNER: SMITH ROBERT V

2021 OVERAGE AMOUNT

\$22.79

6: COUNTY OF EL PASO, 7: EL PASO COMMUNITY COLLEGE, 8: UNIVERSITY MEDICAL CENTER OF EL PASO, 9: SOCORRO ISD, 15: EMERG. SERVICES DIST #1, 53: PASEO DEL ESTE MUD#9

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 PROPER	TY TAX REFUND:	This application	must be comple	eted, signed, an	d submitted with st	ipporting documentation to	o be valid.
Step 1. Identify the refund	Who should the re	fund be issued to:					
recipient. Show information for	Name: CORELOG						
whomever will be receiving	Address: PO BO	X 9202			-	. /	
the refund.	City, State, Zip: C	OPPELL TEXAS	75019				
	Daytime Phone No	o.: 817-699-2106			E-Mail Addres	s: shenshwetha@core	logic.com
Step 2. Provide payment	Payment made by:		建 是 异	Check No.	Date Paid	Amount Paid	
information. Please attach copy of cancelled	Check Payment		5	3108379	11/30/2021	\$2,54	7.46
check, original receipt, online	***	,					
payment confirmation or bank/credit card statement.		TOTAL AN	MOUNT PAI	D (sum of th	e above amount	<u> </u>	
Step 3. Provide reason for	Please check one o		MOUNTIAL	D (Sum of th	c above amount		The state
this refund.	I paid this account in error and I am entitled to the refund.						
Please list any accounts and/or years that you intended to pay	I overpaid this account. Please refund the excess to the address listed in Step 1.						
with this overage.	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):						
<u> </u>							
Step 4. Sign the form. Unsigned applications cannot be processed.		form is true and c	correct. (If yo	ou make a fals	se statement on th	d certify that the informatis application, you coude, Sec. 37.10.)	
	SIGNATURE OF	REOUESTOR (R	EOUIRED)	P	RINTED NAME	& DATE	
Jue 2/20/25	Ha	ly	Mis.		ricia (Carley 1.	30-25
							_ /
TAX OFFICE USE ONLY:	Approved	Denied	Ву:	NH	Date:	2-11-2	5

v52.1.9

Print Date: 07/12/2024

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, Corelogic Tax Services LLC through Nationstar Mortgage LLC DBA Mr Cooper ("Taxpayer") has applied for a refund with the tax assessor for their 2021 property taxes that were overpaid on November 30, 2021in the amount of \$22.79 (Twenty-Two and 79/100 Dollars) 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 Corelogic Tax Services LLC, 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 \$22.79 (Twenty-Two and 79/100 Dollars) is approved.

day of

2025

APPROVED this

MTROVED tills	_ uay 01, 2023.	
	CITY OF EL PASO:	
	Renard U. Johnson Mayor	
ATTEST:	Triay of	
Laura D. Prine		
City Clerk		
APPROVED AS TO FORM:	APPROVED AS TO CONTENT:	
	Soura Caloz for Maria F	² asillas
Oscar Gomez	Maria Pasillas	
Assistant City Attorney	Tax Assessor/Collector	



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

221 N. KANSAS, STE 300 EL PASO, TX 79901 PH: (915) 212-0106 FAX: (915) 212-0107 Email: taxforms@elpasotexas.gov

JAN 2 8 2025

CORELOGIC PO BOX 9205 COPPELL, TX 75019-9214 Geo No. Prop ID
T287-999-3250-1000 637356

Legal Description of the Property
BLK 325 TIERRA DEL ESTE #67 LOT 10

14609 SPANISH POINT DR 79938

OWNER: LESCARBEAU JACK P

08

2021 OVERAGE AMOUNT \$435.4

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 + 375

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 PROPER	TY TAX	REFUND:	This application	must be compl	eted, signed, and	d submitted with supp	porting 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: CORELOGIC TAX SERVICES LLC								
	Address: PO BOX 9202						, /		
	City, State, Zip: COPPELL,TX, 75019								
	Daytime Phone No.: 817-699-2106					E-Mail Address: KIRAM@CORELOGIC.COM			
Step 2. Provide payment information. Please attach copy of cancelled	Paymer	it made by	<i>/</i> :		Check No.	Date Paid	Amount Paid		
	Electronic Fund Transfer			RG	2112172054	12/20/2021	\$274,189,	766.61	
check, original receipt, online									
payment confirmation or bank/credit card statement.	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.)								
fue 2/5/25	SIGNATURE OF REQUESTOR (REQUIRED) PRINTED NAME & DATE TYCIA CANCY 122/2								
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AX OFFICE USE ONLY:	i V Ac	proved	Denied	By:	10,10	Date:	1-20-) V	

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, Corelogic Tax Services LLC, ("Taxpayer") has applied for a refund with the tax assessor for their 2021 property taxes that were overpaid on December 20, 2021in the amount of \$435.42 (Four Hundred and Thirty-Five and 42/100 Dollars) 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 Corelogic Tax Services LLC, 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 \$435.42 (Four Hundred and Thirty-Five and 42/100 Dollars) is approved.

2025

ADDDOVED 41.

APPROVED this	_ day of, 2025.
	CITY OF EL PASO:
	Renard U. Johnson Mayor
ATTEST:	
Laura D. Prine	
City Clerk	
APPROVED AS TO FORM:	APPROVED AS TO CONTENT:
	Soura Galdz for Maria Pasillas
Oscar Gomez	Maria Pasillas
Assistant City Attorney	Tax Assessor/Collector