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

AGENDA DATE: August 16, 2022 PUBLIC HEARING DATE: N/A

CONTACT PERSON(S) NAME AND PHONE NUMBER: Maria O. Pasillas, (915) 212-1737

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:

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.

Tax refund to Eduardo Luna, in the amount of \$3,615.08 for an overpayment made on July 17, 2022 of 2021 taxes. (Geo. # E014-999-0920-0100). 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.

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?

Approve property tax overpayment refunds greater than \$2,500.00, per the Texas Property Tax Code, Sec. 31.11 – Refunds of Overpayments or Erroneous Payments.

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?

HAVE ALL AFFECTED DEPARTMENTS BEEN NOTIFIED? _X_YES ___NO

PRIMARY DEPARTMENT: Tax Office SECONDARY DEPARTMENT: N/A

DEPARTMENT HEAD:

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

Revised 04/09/2021





APPLICATION FOR TAX REFUND

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, Email: taxforms@elpasotexas.gov

REC	CE	= \	/ED
JUL	2	4	2022

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:	1044-509-253/56 (523)	Phone:	Property ID	Property ID# (One application per account)				
Educada Luca		HOME: 915-309-9189	454202	Leann				
Eduardo Luna	V	WORK:	1	151323				
			1E014	-444-04	20-0100			
Address (mail refund to):) /	Property Address: And/or	Property Address: And/or					
3212 Clyde Rd, El Paso, TX 79925 Legal Description: 3301 Tularosa, El Paso, TX 79903, 92 East El Paso 1 & 2								
Tax year requested:	Date payment made:	Check No. & Date, if known:	Amount of taxes paid:	Amount of re	fund requested:			
1, 2021	7-17-2022		3.615.08	3615.08				
2.				100,000				
3.								
	TOTAL AMOU	INT (sum of the above amounts)	1	3615.08				
		((City Council approval required if over \$2,500)				
A TELEVISION OF STREET	REQUIRED	Copy of original receipt, from			J Over \$2,500)			
	bank statement:	showing item cleared (both th						
REASON FOR OV	ERPAYMENT:	I am making periodic paym	ents for my mother in la	aw. For this last p	ayment, I incorrectly			
entered the total	amount due of \$3615.	08. The amount shoud have I	been \$250.00. I am rec	questing a refund	for this overpayment.			
		by checking account and nee						
	-				-			
"I certify that in	numation given/in oh	tain this refund is true and o	orract "					
	g.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		WITEVE.					
1 OA	no 1 - 1		•		1			
1 9/11/4	W / Xm		Date:	7-25-2022				
Requestor signat	ure:							
	-							
Eduardoi Luna								
Printed name:		and the same of th	Title:					
Any person knowingly submitting false entries is subject to: (1) imprisonment of 2 to 10 years, or 95,000 fme, or both. 12) imprisonment up to one year, or fine not over \$2,000, or both. (Sec 37.10 Pena. Code) An application for a refund must be made within 3 years after								
24, 100, 100, 100, 100, 100, 100, 100, 10	the date of t	he asymetr or the texpayer waives	the rights the refund (Son 3)	rejuna mast de maae 1-11 Ioli	within a years after			
		- Anne April India Administra - Principle	3, -1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1	15.00				
TAX OFFICE Entry:	(*) REFL	JND APPROVED						
	11.00	311.0			Modes			
Tax Office Approval:	Maua-10	MMM)		Date:	1/25/22			
	This.	7/24/a2		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:								
() Other:								
				····				

