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

DEPARTMENT:

Tax Department

AGENDA DATE:

January 5, 2021

CONTACT PERSON NAME AND PHONE NUMBER: Maria O. Pasillas, (915) 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, exceeding statutory three (3) year limit.

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?

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 overpayments exceeding the three year limit.

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 | |
|-----|-------------------------------------------------------|
| | RD / COMMISSION ACTION: r appropriate comments or N/A |
| N/A | |
| | ************************************** |

DEPARTMENT HEAD:

Ilavia O. fasillac

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

Information copy to appropriate Deputy City Manager

TAX REFUNDS OVER THREE (3) YEARS January 5, 2021

| • | Benjamin Gomez and Corinna Goron, in the amount of \$28.96, made an overpayment or December 6, 2017 of 2017 taxes. (Geo. # X579-000-2260-2372) |
|---|------------------------------------------------------------------------------------------------------------------------------------------------|
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| | |
| | |
| | Maria O. Pasillas |
| | Laura D. Prine Maria O. Pasillas, RTA |
| | City Clerk 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, Benjamin Gomez and Corinna Goron ("Taxpayer") has applied for a refund with the tax assessor for their 2017 property taxes that were overpaid on December 06, 2017 in the amount of \$28.96 for all taxing entities; and

WHEREAS, City Council may extend the deadline for the Taxpayer's application for the overpayment of the 2017 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 Benjamin Gomez and Corinna Goron showed a good cause to extend the deadline to apply for a refund of the overpayment of the 2017 taxes and the tax refund in the amount of \$28.96 is approved.

| APPROVED this | day of | 202 |
|----------------|--------|------------------|
| | | CITY OF EL PASO: |
| | | Oscar Leeser |
| ATTEST: | | Mayor |
| Laura D. Prine | | |
| City Clerk | | |

APPROVED AS TO FORM:

Juan-S. Gonzalez

Senior Assistant City Attorney

APPROVED AS TO CONTENT:

Shorul R. Mack for Maka O. Pasillas Maria O. Pasillas, RTA Tax Assessor/Collector



Internal Audit Office

MAYOR

Dee Margo

District 1
Peter Svarzbein

DATE:

December 10, 2020

TO:

Maria O. Pasillas, Tax Assessor/Collector

FROM:

Edmundo S. Calderon, CIA, CGAP, CRMA, Chief Internal Auditor

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SUBJECT: Review of Tax Overpayment Refunds that Exceed Three Years

District 2 Alexsandra Annello

CITY COUNCIL

District 3 Cassandra Hernandez

District 4 Dr. Sam Morgan

District 5 Isabel Salcido

District 6 Claudia L. Rodriguez

District 7 Henry Rivera

District 8 Cissy Lizarraga

CITY MANAGER Tommy Gonzalez The Internal Audit Office conducted a review of the Tax Overpayment Refunds that exceeded a three-year period. This engagement was accepted based on the engagement's potential to improve management of risks, add value, and/or improve the organization's operations (IIA 2010.C1). The work performed does not constitute an engagement conducted in accordance with <u>Generally Accepted Government Auditing Standards</u> (GAS 1.16). The observations and conclusions that are reported in this memorandum do not require Management responses.

The following Tax Overpayment Refund that exceeded a three-year period was reviewed:

GOMEZ BENJAMIN & GORON CORINNA

X579-000-2260-2372

\$28.96

The Internal Audit Office reviewed the refund application, copies of cancelled checks or proof of payments. Attached is a list of days from the date the completed application was received by the Tax Office and sent to the Internal Audit Office for review. The Tax Office took 2 days to process an application received and send for review.

Based on our review, the Tax Overpayment Refund that exceeded a three-year period was determined to be appropriate to send to City Council for approval pursuant to Section 31.11 (c-1) of the Texas Tax Code.

cc: Tomas Gonzalez, City Manager

Robert Cortinas, Deputy City Manager of Support Services & Chief Financial Officer

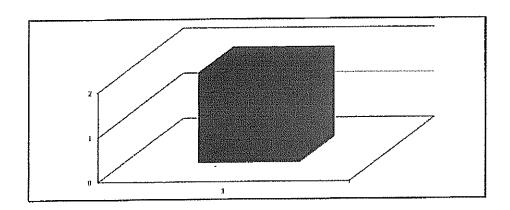
Edmundo S. Calderon, CIA, CGAP, CRMA – Chief Internal Auditor Internal Audit Office | 218 N. Campbell | El Paso, TX 79901 O: (915) 212-0069 | Email: calderones@elpasotexas.gov



City of El Paso internal Audit Office Tax Office Refund Project Week of 12/07/2020 Reviews-Over Three Years

| # Person Te | P.I.D. Number | Ameuni of Ecrived | Date Application was Received | | Date Application was approved by the Tan Office | Date Tax Office Seat to Internal Audit for Review | | Date internal Andii Reviewed Applications | Conterty |
|----------------------------------|--------------------|----------------------|----------------------------------|-----------|-------------------------------------------------------|------------------------------------------------------|---|----------------------------------------------|----------|
| I GOMEZ BENJAMIN & GORON CORINNA | X579-000-2260-2372 | \$28,96 | 11/26/2020 | 12/1/2010 | 12/8/2020 | 12/9/2020 | 2 | 12/10/2020 | |

\$28.96







AXOFFICE ECEIVED DEC 07 2020

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

GOMEZ BENJAMIN & GORON CORINNA 22 FAIRWAY DR FRISCO, TX 75034-6867



Geo No. Prop ID X579-000-2260-2372 197809

Legal Description of the Property 79 TSP 2 SEC 26 T & P ABST 7874 TR

3-A-397 (0.9144 AC)

13211 STABLE RD

OWNER: GOMEZ BENJAMIN & GORON CORINNA

2017 OVERAGE AMOUNT

6: COUNTY OF EL PASO, 7: EL PASO COMMUNITY COLLEGE, 8: UNIVERSITY MEDICAL CENTER OF EL PASO, 9: SOCORRO ISD, 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 approval is required for refunds in excess of \$2500.

| APPLICATION FOR PROPER | This application | ion must be completed, signed, a | and submitted with supp | porting documentation to be valid. | | | | | |
|------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------|----------------------------------|-------------------------|------------------------------------|--|--|--|--|--|
| Step 1. Identify the refund | Who should the refund be issued to: | | | | | | | | |
| recipient. Show information for | Name: | | | | | | | | |
| whomever will be receiving | Address: | | | | | | | | |
| the refund. | City, State, Zip: | | | The second second | | | | | |
| | Daytime Phone No.: | | E-Mail Address: | | | | | | |
| Step 2. Provide payment | Payment made by: | Check No. | Date Paid | Amount Paid | | | | | |
| information. Please attach copy of cancelled check, original receipt, online payment confirmation or | | 517 | 12-6-17 | \$ 350.77 | | | | | |
| bank/credit card statement. | Please check one of the following | AMOUNT PAID (sum of t | the above amounts) | | | | | | |
| Step 3. Provide reason for 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 applied to other tax account(s) and/or year(s), escrow (listed below): | | | | | | | | |
| | | | | *S100: | | | | | |
| Step 4. Sign the form. Unsigned applications cannot be processed. | By signing below, I hereby apply have given on this form is true an guilty of a Class A misdemeanor | nd correct. (If you make a fa | alse statement on this | application, you could be found | | | | | |
| fue (2/8/20) | SIGNATURE OF REQUESTOR (REQUIRED) PRINTED NAME & DATE BENJAHINGOMES | | | | | | | | |
| PAX OFFICE USE ONLY: | Approved Denied | By: AM | Date: | 2/08/200 | | | | | |

v52.1.7

Print Date: 04/13/2020

| | Remittance Query | Detail ount No. | | | | | | | 12/08/2 ACTEP | 2020 11:53:51 |
|-----------------------------------------------|-------------------------|--------------------|--------------|-----------------|-------------------|------------|---------------|-----------------|------------------|-------------------------|
| Summary 0 Deposit No. A12061765 Check/Receipt | Query | ount No. | | | | | | | | |
| Deposit No. A12061765 Check/Receipt | Acco | ANTENNA DE LA | | | | | | | | |
| A12061765 Check/Receipt | النارة يستسلمون | ANTENNA DE LA | | | | | | | - | 4 |
| A12061765 Check/Receipt | النارة يستسلمون | ANTENNA DE LA | | Den | nit Sea No. | Check No. | | Payment Amount | Dovement A | Summary preement No. |
| Check/Receipt | VOL | 90002260237 | 3 | Kell | III. SEQ IVO. | CHECK NO. | | Payment Amount | Fayment Ag | peement No. |
| mages Depos | Receipt sit No. Date | Remit Seq No. | Check No. | Payment Type | Payment Amount | Applied T | ransa Type | | | Payer |
| A1213196 | 35 12/13/201 | 9 42244256 | 655 | CH | 5591.86 | \$591.86 | PA | X57900022602372 | GOMEZ B | ENJAMIN & GOF |
| A1221188 | 39 12/21/201 | 8 39404566 | 640 | СН | \$578.01 | \$578.01 | PA | X57900022602372 | GOMEZ B | ENJAMIN & GOF |
| A1206176 | 12/06/201 | 7 36186860 | 577 V | СН | \$350.77 | \$28.96 | LG | X57900022602372 | GOMEZ B | ENJAMIN & GOF |
| A1206176 | 35 12/06/201 | 7 36186860 | 577 | CH | \$350.77 | \$321.81 | PA | X57900022602372 | GUMEZ B | ENJAMIN & GOF |
| A1227166 | 35 12/27/201 | 6 33510702 | 552 | СН | \$318.61 | \$318.61 | РА | X57900022602372 | GOMEZ B | ENJAMIN & GOF |
| A122215 | 73 12/22/201 | 5 30386275 | 527 | СН | \$316.51 | \$316.51 | РΑ | X57900022802372 | GOMEZ B | ENJAMIN & GOF |
| EC030215 | 541 02/28/201 | 5 28881997 | CC001010523 | СН | \$121.92 | \$121.92 | PA | X57900022602372 | 23785648 | 3-BENJAMIN GO |
| X0122141 | 01/22/201 | 4 25196213 | 07947 | CH | \$112.38 | \$112.38 | РΑ | X57900022602372 | GOMEZ C | ARLOS B & LYI |
| A020713 | 54 01/31/201 | 3 23023550 | 7490 | СН | \$109.42 | \$109.42 | PA | X57900022602372 | GOMEZ C | ARLOS B & LYI |
| A011212 | 48 01/12/201 | 2 19832734 | 7005 | СН | \$103.59 | \$103.59 | PA | X57900022602372 | GOMEZO | ARLOS B & LYI |
| X120210 | 1000 12/02/201 | 0 16959966 | 06900 | СН | \$101.17 | \$101.17 | PA | X57900022602372 | GOMEZO | ARLOS B & LYI |
| A012610 | 48 01/26/201 | 0 15476439 | 6344 | СН | \$99.63 | \$99.63 | PA | X57900022602372 | GOMEZ C | ARLOS B & LYI |
| | | | Ар | plied Total | | \$4,284.39 | | | | |

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