

REQUEST FOR TAX REFUND



Name of taxpayer(s) or business entity Mailing Address:	Verizon Virginia LLC P.O. Box 2749 Addison, TX 75001 Attn: Heather Murphy
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Account #:

Initials:

Reason for request (attach additional information): True up based on SCC info.

Declaration: I declare that the statements and figures hereon are true, full and correct to the best of my knowledge and belief:

Signature of taxpayer or authorized officer

Date

Type of Tax Tax Year Ticket #	Description of Property	Amount of Tax to be Refunded	
68-0002	2021 Public Service	Tax:	\$622.10
GL#		Penalty:	\$
GL#		Interest:	\$
GL#		TOTAL:	\$622.10
69-0002	2021 Public Service	Tax:	\$17.89
GL#		Penalty:	\$
GL#		Interest:	\$
GL#		TOTAL:	\$17.89
70-0002	2021 Public Service	Tax:	\$190.24
GL#		Penalty:	\$
GL#		Interest:	\$
GL#		TOTAL:	\$190.24
71-0002	2021 Public Service	Tax:	\$211.20
GL#		Penalty:	\$
GL#		Interest:	\$
GL#		TOTAL:	\$211.20
72-0002	2021 Public Service	Tax:	\$6,916.78
GL#		Penalty:	\$
GL#		Interest:	\$
GL#		TOTAL:	\$6,916.78
		Tax:	\$
GL#		Penalty:	\$
GL#		Interest:	\$
GL#		TOTAL:	\$
		Tax:	\$
GL#		Penalty:	\$
GL#		Interest:	\$
GL#		TOTAL:	\$
		Tax:	\$
GL#		Penalty:	\$
GL#		Interest:	\$
GL#		TOTAL:	\$
Amount of Refund for Taxes Paid			\$7,958.21
GL#	Interest Paid by the County		\$79.58
TOTAL REFUND DUE (Tax Refund + Interest paid by the County)			\$ 8,037.79

REFUND AUTHORIZATION

Commissioner of the Revenue

I have reviewed the above request for a tax refund, and concur that the taxpayer is entitled to the refund indicated for the following reason(s): _____

Ann H. Thomas
Commissioner of the Revenue

12/13/21
Date

Treasurer

I hereby verify that the aforementioned taxpayer(s) have made payment of tax for which a refund has been requested. Such payment; and any amount owed the County by the taxpayer(s) which should be deducted from any refund made to the taxpayer, are in the following amounts:

Andie DIF
Treasurer

12-13-2021
Date

County Attorney

Pursuant to the provisions of Section 21-7.3, York County Code, I hereby consent to a tax refund to the taxpayer in the amount authorized by the Commissioner of the Revenue, less any amount owed the County by the taxpayer(s).

County Attorney

Date

Financial and Management Service

In accordance with the above authorizations, the refund above has been issued accordingly.

Financial and Management Service

Date

Procedures for Requesting a Refund:

COMMISSIONER OF THE REVENUE

- ▶ Have the taxpayer complete section: **Reason for request**
- ▶ Complete the Name of Taxpayer(s) or business entity as appears on the assessment record, and verify the mailing address
- ▶ Complete the section pertaining to the actual refund
- ▶ Complete the Refund Authorization Section, keep a copy and forward the original to the Office of the Treasurer

Treasurer

- ▶ Complete the GL# Section. GL#'s are based on Fiscal Year: July - June

REAL ESTATE:

1010 Current Fiscal Year
1030 1st Year Delinquent
1040 2nd Year Delinquent
1050 3rd Year Delinquent
1060 4th + Year Delinquent

PERSONAL PEROPERTY:

3010 Current Fiscal Year
3020 1st Year Delinquent
3030 2nd Year Delinquent
3040 3rd Year Delinquent
3050 4th Year Delinquent

MOBILE HOMES:

3060 Current Fiscal Year
3070 Delinquent Years

MACHINERY AND TOOLS:

4010 All Years

BOATS OVER 5 TONS:

5010 Current Fiscal Year
5020 Delinquent Years

BUSINESS LICENSE:

3-010-30312-3010 All Years

MEALS TAX:

3-010-30312-1200 All Years

LODGING TAX:

3-010-30312-1100 All Years

SHORT-TERM RENTAL TAX:

3-010-30312-3050 All Years

- ▶ Complete the Refund Authorization Section, keep a copy and forward the original to the Office of the County Attorney

COUNTY ATTORNEY

- ▶ Complete the Refund Authorization Section, keep a copy and forward the original to the Office of Financial and Management Service

FINANCIAL AND MANAGEMENT SERVICE

- ▶ Complete the Refund Authorization Section, keep a copy and forward the original to the Office of the Commissioner of the Revenue