

THE CITY OF EL PASO
 CONSOLIDATED TAX OFFICE
 Two Civic Center Plaza #123
 El Paso, Texas 79901
 Phone (915) 541-4054, Fax (915) 541-4603

APPLICATION FOR TRANSFER OF TAX PAYMENT

The Consolidated Tax Office collects property taxes for all eligible property taxing entities within El Paso County.

APPLICANT MUST PROVIDE THE FOLLOWING INFORMATION:

Requestor's Name:	Phone: HOME WORK	Transfer FROM (Property ID#) :
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Property Address:	Transfer TO (Property ID# & Tax Year) :
Legal Description:	

Tax year paid:	Date payment made:	Check No. & Date, if known:	Amount of taxes paid:	Amount of transfer requested:
1.				
2.				
3.				
4.				

(Entity approval required over \$2500)

REASON FOR TRANSFER: REQUIRED copy of original receipt or front & back of negotiated check.

"I certify that information given to obtain this transfer is true and correct."

Requestor signature: _____ **Date:** _____

*Any person knowingly submitting false entries is subject to: (1) Imprisonment of 2 to 10 years, or \$5,000 fine, or both.
 (2) Imprisonment up to one year, or fine not over \$2,000, or both. (Sec 37.10 Penal Code) An application for a refund must be made within 3 years after the date of the payment or the taxpayer waives the right to the refund (Sec. 31.11 (c)).*

TAX OFFICE Entry:	<input type="checkbox"/> TRANSFER APPROVED
Tax Office Approval: _____	Date: _____

- DISAPPROVED Returned to sender. See below/attached.
- Required documentation (Tax Receipt, Canceled Check or other) not submitted.
 - Record of overpayment not found on this property.
 - Property not found as identified, resubmit after correction.
 - Other: _____