

<b>BOARD OF ASSESSMENT APPEALS, STATE OF COLORADO</b> 1313 Sherman Street, Room 315 Denver, Colorado 80203	<b>Docket Number: 65970</b>
Petitioner: <b>ASSOCIATION OF OPERATING ROOM NURSES INC.</b>  v.  Respondent: <b>ARAPAHOE COUNTY BOARD OF EQUALIZATION</b>	
<b>ORDER ON WITHDRAWAL</b>	

The Board received Petitioner's request to withdraw the above-captioned appeal on November 6, 2015. The Board has approved Petitioner's request.

**FINDINGS OF FACT AND CONCLUSIONS:**

1. Subject property is described as follows:  

**County Schedule No.: 1973-27-1-14-001**

**Category: Valuation      Property Type: Commercial**
2. Petitioner is protesting the 2015 actual value of the subject property.

**ORDER:**

Petitioner's request for withdrawal is granted; therefore, the Board will take no further action on this matter.

DATED AND MAILED this 9th day of November 2015.

BOARD OF ASSESSMENT APPEALS

*Diane M. DeVries*

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Diane M. DeVries

*Debra A. Baumbach*

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Debra A. Baumbach

I hereby certify that this is a true and correct copy of the decision of the Board of Assessment Appeals.

*Tisha Luna*

\_\_\_\_\_  
Tisha Luna



*If at any time you decide you DO NOT wish to pursue your appeal and choose to withdraw, please sign this letter and return it to the Board of Assessment Appeals.*

STATE OF COLORADO  
BOARD OF ASSESSMENT APPEALS  
2015 NOV -6 PM 3:53

Please do not fill out and file this form if you are entering into a stipulation with the county.

1ST NET REAL ESTATE SERVICES INC.  
DAN GEORGE  
3333 S WADSWORTH BLVD, SUITE 200  
LAKEWOOD, CO 80227

Date: 11-6-2015

Docket No.: 65970

Petitioner: ASSOCIATION OF OPERATING ROOM NL

Hearing Date: January 4, 2016

To: Board of Assessment Appeals  
1313 Sherman Street, Room 315  
Denver, Colorado 80203

Via Facsimile: 303.864.7719

I no longer wish to pursue this matter and request that my property tax appeal be withdrawn. I understand that, by withdrawing this appeal, I relinquish all rights to obtaining a reduction in value for the subject property for tax year(s) 2015. I understand that this withdrawal letter should not be mailed or faxed if I have reached an agreement (stipulation) with the Arapahoe County Board Of Equalization resulting in a reduction in value.

#### CERTIFICATE OF SERVICE

I hereby certify that a true and correct copy of this document was mailed, faxed, or hand delivered to the Arapahoe County Board Of Equalization.

  
Signature: DAN GEORGE