

BOARD OF ASSESSMENT APPEALS, STATE OF COLORADO 1313 Sherman Street, Room 315 Denver, Colorado 80203	Docket Number: 69314
Petitioner: NORTH FOREST OFFICE PROVIDERS LLC - v. Respondent: ADAMS COUNTY BOARD OF EQUALIZATION	
ORDER ON WITHDRAWAL	

The Board received Petitioner's request to withdraw the above-captioned appeal on February 21, 2017. The Board has approved Petitioner's request.

FINDINGS OF FACT AND CONCLUSIONS:

1. Subject property is described as follows:
County Schedule No.: R0185629
Category: Valuation/Protest Appeal Property Type: Commercial
2. Petitioner is protesting the 2016 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 23rd day of February 2017.

BOARD OF ASSESSMENT APPEALS

Diane M. DeVries

Diane M. DeVries

Debra A. Baumbach

Debra A. Baumbach

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

G. Katardzic

Gordana Katardzic



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.

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

JOSEPH C. SANSONE COMPANY
DAVID JOHNSON
18040 EDISON AVE.
CHESTERFIELD, MO 63005

STATE OF COLORADO
BOARD OF ASSESSMENT APPEALS
2017 FEB 21 PM 1:29

Date: 2/21/17

Docket No.: 69314
Petitioner: NORTH FOREST OFFICE PROVIDERS LLC
Hearing Date: 06/26/2017

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I no longer wish to pursue this matter and request that my property tax appeal be withdrawn.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) 2016. I understand that this withdrawal letter should not be mailed or faxed if I have reached an agreement (stipulation) with the Adams 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 Adams County Board Of Equalization.


Signature: DAVID JOHNSON