

BOARD OF ASSESSMENT APPEALS, STATE OF COLORADO 1313 Sherman Street, Room 315 Denver, Colorado 80203	Docket Number: 77450
Petitioner: HCA HEALTHONE LLC v. Respondent: DOUGLAS COUNTY BOARD OF EQUALIZATION	
ORDER ON WITHDRAWAL	

The Board received Petitioner's request to withdraw the above-captioned appeal on January 6, 2020. The Board has accepted Petitioner's request.

FINDINGS OF FACT AND CONCLUSIONS:

1. Subject property is described as follows:

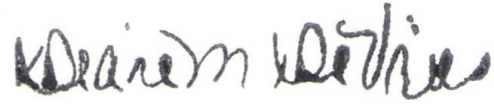
County Schedule No.: R0483987
Category: Valuation/Protest Appeal Property Type: Commercial
2. Petitioner is protesting the 2019 actual value of the subject property.

ORDER:

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

DATED this 24th day of June 2020.

BOARD OF ASSESSMENT APPEALS



Diane M. DeVries

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



Debra A. Baumbach



Yesenia Araujo



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.

**HCA HEALTHONE LLC
MICHAEL ROGERS
10500 WILLOWWISP WAY
HIGHLANDS RANCH, CO 80126**

2020 JAN -6 AM 10:27

STATE OF COLORADO
BOARD OF ASSESSMENT APPEALS

Date: 1/6/2020

Docket No.: 77450

Petitioner: HCA HEALTHONE LLC

Hearing Date: NOT SCHEDULED

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

Via Email: baa@state.co.us

I no longer wish to pursue this matter and request that my property tax appeal be withdrawn.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) 2019. I understand that this withdrawal letter should not be mailed or faxed if I have reached an agreement (stipulation) with the Douglas 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 Douglas County Board Of Equalization.



Signature: MICHAEL ROGERS