BOARD OF ASSESSMENT APPEALS, STATE OF COLORADO 1313 Sherman Street, Room 315 Denver, Colorado 80203	Docket Number: 65914
Petitioner:	
KORTZ FAMILY LLLP	
V.	
Respondent:	
EL PASO COUNTY BOARD OF EQUALIZATION	
ORDER ON WITHDRAWAL	

The Board received Petitioner's request to withdraw the above-captioned appeal on December 3, 2015. The Board has approved Petitioner's request.

## FINDINGS OF FACT AND CONCLUSIONS:

1. Subject property is described as follows:

County Schedule No.: 64184-02-026+1

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 4th day of December 2015.

### **BOARD OF ASSESSMENT APPEALS**

KDearin Divine

Diane M. DeVries

ulra 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.

Tisha L**i**na



# STATE OF COLORADO BD OF ASSESSMENT APPEALS

2015 DEC -3 PM 2: 50 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.

#### PROPERTY TAX ADVISORS, INC. DARIUSH BOZORGPOUR 3090 S. JAMAICA CT., SUITE 204 AURORA, CO 80014

12/3/15 Date:

To: Board of Assessment Appeals 1313 Sherman Street, Room 315 Denver, Colorado 80203 Docket No.: 65914 Petitioner: KORTZ FAMILY LLLP -Hearing Date: January 8, 2016

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I no longer wish to pursue this matter and request that my property tax appeal be withdrawn.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 malled or faxed if I have reached an agreement (stipulation) with the El Paso 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 malled, faxed, or hand delivered to the El Paso County Board Of Equalization.

Signature: DARIUSH BOZORGPOUR