BOARD OF ASSESSMENT APPEALS, STATE OF COLORADO 1313 Sherman Street, Room 315 Denver, Colorado 80203	Docket Number: 66065
Petitioner:	
- DAVID O & KAREN M BLODGETT	
v.	
Respondent:	
ARAPAHOE COUNTY BOARD OF EQUALIZATION	
ORDER ON WITHDRAWAL	

The Board received Petitioner's request to withdraw the above-captioned appeal on November 12, 2015. The Board has approved Petitioner's request.

# FINDINGS OF FACT AND CONCLUSIONS:

1. Subject property is described as follows:

County Schedule No.: 031876311

Category: Valuation Property Type: Residential

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 13th day of November 2015.

## **BOARD OF ASSESSMENT APPEALS**

Diane M. DeVries Diane M. DeVries

Debra A. Baumbach



I hereby certify that this is a true and correct copy of the decision of the



# STATE OF COLORADO BD OF ASSESSMENT APPEALS

2015 NOV 12 PM 4:41 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.

**DAVID O & KAREN M BLODGETT** 7118 S POPLAR LN CENTENNIAL, CO 80112

Date: 11/11/15

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

Docket No.: 66065 DAVID O & KAREN M BLODGETT Petitioner: Hearing Date: December 3, 2015

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I no longer wish to pursue this matter and request that my property tax appeal be withdrawn.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. DAVID O & KAREN M BLODGETT