| BOARD OF ASSESSMENT APPEALS, STATE OF COLORADO | Docket Number: | 68989 |
|---|----------------|-------|
| 1313 Sherman Street, Room 315 | | |
| Denver, Colorado 80203 | | |
| Petitioner: | | |
| JOHN & DINAH COLVIN | | |
| v. | | |
| Respondent: | | |
| SUMMIT COUNTY BOARD OF EQUALIZATION | | |
| ORDER ON WITHDRAWAL | | |

The Board received Petitioner's request to withdraw the above-captioned appeal on June 25, 2020. The Board has accepted Petitioner's request.

FINDINGS OF FACT AND CONCLUSIONS:

| 1. | Subject property is described as follows: | | | |
|----|---|----------------------------|---|--|
| | County Schedule No.: 305094 | | | |
| | Category: Valuation/Protest Appeal | Property Type: Vacant Land | ł | |
| | | | | |

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 this 9th day of September 2020.

BOARD OF ASSESSMENT APPEALS

Diane M. DeVries Diane M. DeVries

Diane M. DeVries

Debra A. Baumbach

Gesenia Araujo Yesenia Araujo

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

of Assessment Appeals.



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.

JOHN & DINAH COLVIN TRAVIS STUARD 1200 17TH ST, SUITE 990 **DENVER, CO 80202**

6/25/20 Date:

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

Docket No.: 68989 JOHN & DINAH COLVIN Petitioner: Hearing Date: 06/26/2017

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I no longer wish to pursue this matter and request that my property tax appeal be withdrawn.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

Signature: TRAVIS-STUARD

BRAD BAUGH