BOARD OF ASSESSMENT APPEALS, STATE OF COLORADO

1313 Sherman Street, Room 315 Denver, Colorado 80203

Petitioner:

CAFFA ENTERPRISES PHASE I LLLP

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Respondent:

ARAPAHOE COUNTY BOARD OF EQUALIZATION

ORDER ON WITHDRAWAL

Docket Number: 71352

The Board received Petitioner's request to withdraw the above-captioned appeal on January 10, 2019. The Board has accepted Petitioner's request.

FINDINGS OF FACT AND CONCLUSIONS:

1. Subject property is described as follows:

County Schedule No.: 1971-28-3-06-037

Category: Valuation/Protest Appeal Property Type: Commercial

2. Petitioner is protesting the 2017 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 10th day of January 2019.

BOARD OF ASSESSMENT APPEALS

Dearem Willia

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

Debra A. Baumbach

Diane M. DeVries

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.

PARADIGM TAX GROUP BETH DIEHL 7200 S ALTON WAY, SUITE A-250 CENTENNIAL, CO 80112 BD OF ASSESSMENT 2: 52

Date: 01/10/2019

Docket No.: 71352

Petitioner:

CAFFA ENTERPRISES PHASE ILLLP

Hearing Date: 08/10/2018

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I no longer wish to pursue this matter and request that my property tax appeal be withdrawn.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) 2017. 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: BETH DIEHL