BOARD OF ASSESSMENT APPEALS, STATE OF COLORADO

1313 Sherman Street, Room 315 Denver, Colorado 80203

Petitioner:

SUMMIT REAL ESTATE IV LLC

V.

Respondent:

SUMMIT COUNTY BOARD OF EQUALIZATION

Revised

ORDER ON WITHDRAWAL

The Board received Petitioner's request to withdraw the above-captioned appeal on December 21, 2017. The Board has approved Petitioner's request.

FINDINGS OF FACT AND CONCLUSIONS:

1. Subject property is described as follows:

County Schedule No.:

6512710

Category: Valuation/Protest Appeal

Property Type: Commercial

Docket Number: 71476

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 AND MAILED this 28th day of December 2017.

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.

Christine Fontenot

Debra A. Baumbach



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.

SUMMIT REAL ESTATE IV LLC TODD STEVENS 9635 MAROON CIRCLE, SUITE 450 ENGLEWOOD, CO 80112 NIT DEC 21 PM 3: 48

DEC 2 1 2017

Date:

Docket No.: 71476

Petitioner: SUMMIT REAL ESTATE IV LLC

Hearing Date:

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I no longer wish to pursue this matter and request that my property tax appeal be withdrawn.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 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: TODD STEVENS