| BOARD OF ASSESSMENT APPEALS, STATE OF COLORADO 1313 Sherman Street, Room 315 Denver, Colorado 80203 | Docket Number: | 72123 | |
|--|----------------|-------|--|
| Petitioner: GAINES FAMILY PARTNERSHIP | | | |
| v. | | | |
| Respondent: | | | |
| DENVER COUNTY BOARD OF EQUALIZATION | | | |
| ORDER ON WITHDRAWAL | | | |

The Board received Petitioner's request to withdraw the above-captioned appeal on September 25, 2018. The Board has accepted Petitioner's request.

FINDINGS OF FACT AND CONCLUSIONS:

| 1. | Subject property is described as follows: | | |
|----|---|----------------|------------|
| | County Schedule No.: 02153-00-073-00 | 0 | |
| | Category: Valuation/Protest Appeal | Property Type: | Commercial |

Petitioner is protesting the 2017 actual value of the subject property. 2.

ORDER:

Petitioner's request for withdrawal is granted; therefore, the Board will take no further action on this matter.

DATED AND MAILED this 1st day of November 2018.

BOARD OF ASSESSMENT APPEALS

Dearin Divine

Diane M. DeVries

Julia 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.

Yesenia Araujo



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.

CONSULTUS ASSET VALUATION JASON LETMAN 68 INVERNESS LANE EAST #103 ENGLEWOOD, CO 80112

9-25-18 Date:

To: Board of Assessment Appeals 1313 Sherman Street, Room 315 Denver, Colorado 80203 Docket No.: 72123 Petitioner: GAINES FAMILY PARTNERSHIP Hearing Date: 11/30/2018

SEP 25

AM 8:

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I no longer wish to pursue this matter and request that my property tax appeal be withdrawn.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 Denver 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 Denver County Board Of Equalization.

Signature: JASON LETMAN