# BOARD OF ASSESSMENT APPEALS, STATE OF COLORADO

1313 Sherman Street, Room 315 Denver, Colorado 80203

Petitioner:

# AIRGAS INTERMOUNTAIN INC

v.

Respondent:

## ADAMS COUNTY BOARD OF EQUALIZATION

### ORDER ON WITHDRAWAL

The Board received Petitioner's request to withdraw the above-captioned appeal on June 14, 2018. The Board has accepted Petitioner's request.

# FINDINGS OF FACT AND CONCLUSIONS:

1.	Subject property	Subject property is described as follows:				
	County Schedule No.:		R0177795			
	Category: V	aluation/P	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.

Docket Number: 73302

DATED AND MAILED this 20th day of June 2018.

#### **BOARD OF ASSESSMENT APPEALS**

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Diane M. DeVries

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Debra A. Baumbach

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

Christine Fontenot



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.

#### JOSEPH C. SANSONE CO. ADAM CHASE 18040 EDISON AVE CHESTERFIELD, MO 63005

18 141 Date:

To: Board of Assessment Appeals 1313 Sherman Street, Room 315 Denver, Colorado 80203 Docket No.: 73302 Petitioner: AIRGAS INTERMOUNTAIN INC Hearing Date: 07/09/2018

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I no longer wish to pursue this matter and request that my property tax appeal be withdrawn.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

Signature: ABAM GHASE

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