BOARD OF ASSESSMENT APPEALS, STATE OF COLORADO 1313 Sherman Street, Room 315 Denver, Colorado 80203	Docket Number:	75070
Petitioner: FITZ 46 LLLP / IH HOLDINGS FOURTEEN LLC		
Respondent: ADAMS COUNTY BOARD OF EQUALIZATION		•
ORDER ON WITHDRAWAL	1	

The Board received Petitioner's request to withdraw the above-captioned appeal on April 3, 2019. The Board has accepted Petitioner's request.

FINDINGS OF FACT AND CONCLUSIONS:

1.	Subject property is described as follows:		
	County Schedule No.: R0097552+1		
	Category: Valuation/Protest Appeal	Property Type:	Residential
2.	Petitioner is protesting the 2018 actual value	of the subject proper	ty.

ORDER:

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

DATED this 3rd day of April 2019.

BOARD OF ASSESSMENT APPEALS

KDearin Didia

Diane M. DeVries

Dilna C Baumbach

Debra A. Baumbach

of Assessment Appeals.

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

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.

1ST NET REAL ESTATE SERVICES, INC MIKE WALTER 3333 SOUTH WADSWORTH BLVD, SUITE D-105 LAKEWOOD, CO 80227

4/3/2019 Date:

To: Board of Assessment Appeals 1313 Sherman Street, Room 315 Denver, Colorado 80203
 Docket No.:
 75070

 Petitioner:
 FITZ 46 LLLP / IH HOLDINGS FOURTEEN LL

 Hearing Date:
 04/18/2019

89

90

AS

2019

APR-3

PH

2:00

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I no longer wish to pursue this matter and request that my property tax appeal be withdrawn.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) 2018. 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: MIKE WALTER