BOARD OF ASSESSMENT APPEALS, STATE OF COLORADO	Docket Number:	77454	
1313 Sherman Street, Room 315			
Denver, Colorado 80203			
Petitioner:			
HCPI/UTAH II LLC			
v.			
Respondent:			
ADAMS COUNTY BOARD OF EQUALIZATION			
ORDER ON WITHDRAWAL			

The Board received Petitioner's request to withdraw the above-captioned appeal on May 15, 2020. The Board has accepted Petitioner's request.

FINDINGS OF FACT AND CONCLUSIONS:

1.	Subject property is described as follows:			
	County Schedule No.: R0129031			
	Category: Valuation/Protest Appeal	Property Type:	Commercial	
2.	Petitioner is protesting the 2019 actual value	of the subject propert	у.	

ORDER:

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

DATED this 26th day of May 2020.

BOARD OF ASSESSMENT APPEALS

Diane M. DeVries Diane M. DeVries

Diane M. DeVries

Debra A. Baumbach

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

Clononia Ananjo Vesenia 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.

HCPI/UTAH II LLC MICHAEL ROGERS 10500 WILLOWWISP WAY HIGHLANDS RANCH, CO 80126

5/15/2020 Date:

To: Board of Assessment Appeals 1313 Sherman Street, Room 315 Denver, Colorado 80203 Docket No.: 77454 Petitioner: HCPI/UTAH II LLC Hearing Date: 07/08/2020 AVM N707

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SESS

Via Email: baa@state.co.us

I no longer wish to pursue this matter and request that my property tax appeal be withdrawn.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) 2019. 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: MICHAEL ROGERS