



PROPERTY ASSESSMENT APPEAL BOARD

FORM 4

WITHDRAWAL

SEND TO: Property Assessment Appeal Board
10 – 10551 Shellbridge Way
Richmond, BC, V6X 2W9
Fax: 604-775-1742
Toll-free Fax: 1-888-775-1742
Email: office@paab.bc.ca

Date: _____

Appeal Number(s): _____

I request the Property Assessment Appeal Board allow the withdrawal of the above appeal(s) for the following roll number(s):

_____	_____
_____	_____
_____	_____

If this request is allowed, I understand that the Board will issue an Order which will close the appeal file and confirm the decision of the Property Assessment Review Panel. If, however, there are other appeals still open for same assessment year, those appeals must be decided before it is determined whether or not there will be any changes to the assessment.

Name of party requesting withdrawal

Signature of the Appellant or authorized agent