

NOTICE OF WITHDRAWAL FORM



This form may be used by Appellant to withdraw an appeal.

1. Appellant's name (appeal name):

2. List each appeal number applicable to this notice of withdrawal:

3. Was a representative of the opposing party notified about the filing of this withdrawal?

No

Yes Person Contacted: _____

By signing below, Appellant declares the notice(s) of appeal associated with the above listed appeal number(s) is/are hereby withdrawn.

Appellant Signature (or Representative)

Date Signed

Print Name

Title

This notice of withdrawal form may be filed by fax to 208-334-4060

- OR -

Mailed (or hand-delivered) to:
Idaho Board of Tax Appeals
1673 W. Shoreline Drive, Suite 120
Boise, Idaho 83702

For questions regarding this form, contact the BTA at 208-334-3354