

PETITION FOR ABATEMENT OR REFUND OF TAXES

Summit County, Colorado

Public Hearing
Consent
Treasurer
#

Section I: Petitioners complete Section I only.

Month, Day, Year

Petitioner's Name: _____

Mailing Address: _____

SCHEDULE NUMBER	DESCRIPTION OF PROPERTY AS LISTED ON TAX ROLL
<p>Petitioner states that the taxes assessed against the above property for property tax year(s) _____ are incorrect for the following reasons: (Briefly describe the circumstances surrounding the incorrect value or tax. The petitioner's estimate of actual value must be included.) Attach additional sheets if necessary.</p>	
<p>Petitioner's estimate of actual value: \$ _____ (_____) and \$ _____ (_____) value year value year</p>	
<p>Petitioner requests an abatement or refund of the appropriate taxes associated with a reduction in value.</p>	
<p>I declare, under penalty of perjury in the second degree that this petition, together with any accompanying exhibits or statements, has been examined by me and to the best of my knowledge, information and belief is true, correct and complete.</p>	
<p>_____ Petitioner Date</p>	<p>By _____ Agent* Date</p>
<p>Petitioner's/Agent's daytime phone _____</p>	<p>Address _____</p>
<p>E-Mail _____</p>	<p>_____</p>
<p>*Letter of agency must be attached when petition is submitted.</p>	
<p>If the Board of County Commissioners, pursuant to section 39-10-114(1), or the Property Tax Administrator, pursuant to section 39-2-116, denies the petition for refund or abatement of taxes in whole or in part, the petitioner may appeal to the Board of Assessment Appeals pursuant to the provisions of section 39-2-125 within thirty days of the entry of any such decision. 39-10-114.5(1) C.R.S.</p>	

Section II:

Assessor's Recommendation
(For Assessor's Use Only)

	Tax Year _____			Tax Year _____		
	Actual	Assessed	Tax	Actual	Assessed	Tax
Original						
Correction						
Abate/Refund						
<p><input type="checkbox"/> Assessor recommends approval as outlined above. No protest filed for the year(s): _____ or _____. (If a protest was filed please attach copy of NOD.)</p> <p><input type="checkbox"/> Assessor recommends denial for the following reason(s):</p>						
						<p>_____ Assessor's or Deputy Assessor's Signature</p>

FOR ASSESSORS AND COUNTY COMMISSIONERS USE ONLY
(Section III or Section IV must be completed)

Section III:

Written Mutual Agreement of Assessor and Petitioner

The commissioners of Summit County authorize the assessor by Resolution #2015-04 to review petitions for abatement or refund and to settle by written mutual agreement any such petition for abatement or refund in an amount of ten thousand dollars or less per tract, parcel, or lot of land or per schedule of personal property. 39-1-113 (1.5) C.R.S.

The assessor and petitioner mutually agree the values and tax abatement/refund of:

	Tax Year _____			Tax Year _____		
	Actual	Assessed	Tax	Actual	Assessed	Tax
Original						
Correction						
Abate/Refund						

PLEASE NOTE: The total tax amount does not include accrued interest, penalties, and fees associated with late and/or delinquent tax payments, if applicable. Please contact the County Treasurer for full payment information.

Petitioner's Signature

Date

Assessor's Signature

Date

Section IV:

Decision of the County Commissioners
(Must be completed if Section III does not apply)

WHEREAS, The County Commissioners of Summit County, State of Colorado, at a duly and lawfully called regular meeting held on ___ / ___ / ___ at which meeting there were present the following members: _____

_____ with notice of such meeting and an opportunity to be present having been given to the taxpayer and the Assessor of said County and said Assessor _____ (being present/not present) and taxpayer _____ (being present/not present); and WHEREAS, The said County Commissioners have carefully considered the within application, and are fully advised in relation thereto, NOW BE IT RESOLVED, That the Board (agrees/does not agree) with the recommendation of the assessor and the petition be (approved/approved in part/denied) with an abatement/refund as follows:

	Tax Year _____			Tax Year _____		
	Actual	Assessed	Tax	Actual	Assessed	Tax
Original						
Correction						
Abate/Refund						

Chairperson of Board of County Commissioners

I _____, County Clerk and Ex-officio Clerk of the Board of County Commissioners in and for the aforementioned county, do hereby certify that the above and foregoing order is truly copied from the record of the proceedings of the Board of County Commissioners.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the seal of said County this _____ day of _____, _____.

By: _____
County Clerk's or Deputy County Clerk's Signature

Note: Abatements greater than \$1,000 per schedule, per year, must be submitted in duplicate to the Property Tax Administrator for review.

Section V:

Action of the Property Tax Administrator
(For all abatements greater than \$10,000)

The action of the Board of County Commissioners, relative to the within petition, is hereby:

Approved Approved in part \$ _____ Denied for the following reason(s) _____

Secretary's Signature

Property Tax Administrator's Signature

Date