



**REAL PROPERTY TAX APPEALS COMMISSION**

441 4<sup>th</sup> Street, NW

Suite 360 North

Washington, DC 20001

202-727-6860 (Office)

202-727-0392 (fax)

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**REAL PROPERTY ASSESSMENT APPEAL WITHDRAWAL FORM**

Petitioner/Property Owner's Name:

Date of Request:

Square:

Suffix:

Lot:

Property Address:

Hearing Date: (if applicable):

Contact Telephone Number:

**Check one box below:**

As property owner, I am requesting that the real property assessment appeal listed above, be withdrawn.

As the duly authorized Agent/Representative for the real property owner, I am requesting that the real property assessment appeal listed above, be withdrawn. Please attach signed letter of authorization.)

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_