

PETITION FOR ABATEMENT OR REFUND OF TAXES

County: _____

Date Received _____
(Use Assessor's or Commissioners' Date Stamp)

Section I: Petitioner, please complete Section I only.

Date: _____
Month Day Year

Petitioner's Name: _____

Petitioner's Mailing Address: _____

City or Town State Zip Code

SCHEDULE OR PARCEL NUMBER(S)	PROPERTY ADDRESS OR LEGAL DESCRIPTION OF PROPERTY
_____	_____
_____	_____
_____	_____

Petitioner requests an abatement or refund of the appropriate taxes and states that the taxes assessed against the above property for property tax year(s) _____ and _____ are incorrect for the following reasons: (Briefly describe why the taxes have been levied erroneously or illegally, whether due to erroneous valuation, irregularity in levying, clerical error or overvaluation. Attach additional sheets if necessary.)

Petitioner's estimate of value: \$ _____ (_____) and \$ _____ (_____)
Value Year Value Year

I declare, under penalty of perjury in the second degree, that this petition, together with any accompanying exhibits or statements, has been prepared or examined by me, and to the best of my knowledge, information and belief, is true, correct, and complete.

Petitioner's Signature Daytime Phone Number (_____) _____
Email _____

By _____ Daytime Phone Number (_____) _____
Agent's Signature*

Printed Name: _____ Email _____

***Letter of agency must be attached when petition is submitted by an agent.**

If the Board of County Commissioners, pursuant to § 39-10-114(1), C.R.S., or the Property Tax Administrator, pursuant to § 39-2-116, C.R.S., 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 § 39-2-125, C.R.S., within thirty days of the entry of any such decision, § 39-10-114.5(1), C.R.S.

Section II:		Assessor's Recommendation					
		(For Assessor's Use Only)					
		Tax Year _____			Tax Year _____		
		<u>Actual</u>	<u>Assessed</u>	<u>Tax</u>	<u>Actual</u>	<u>Assessed</u>	<u>Tax</u>
Original	_____	_____	_____	_____	_____	_____	_____
Corrected	_____	_____	_____	_____	_____	_____	_____
Abate/Refund	_____	_____	_____	_____	_____	_____	_____
<input type="checkbox"/> Assessor recommends approval as outlined above.							
If the request for abatement is based upon the grounds of overvaluation, no abatement or refund of taxes shall be made if an objection or protest to such valuation has been filed and a Notice of Determination has been mailed to the taxpayer, § 39-10-114(1)(a)(I)(D), C.R.S.							
Tax year: _____ Protest?		<input type="checkbox"/> No		<input type="checkbox"/> Yes (If a protest was filed, please attach a copy of the NOD.)			
Tax year: _____ Protest?		<input type="checkbox"/> No		<input type="checkbox"/> Yes (If a protest was filed, please attach a copy of the NOD.)			
<input type="checkbox"/> Assessor recommends denial for the following reason(s):							
_____ Assessor's or Deputy Assessor's Signature							

FOR ASSESSORS AND COUNTY COMMISSIONERS USE ONLY

(Section III or Section IV must be completed)

Every petition for abatement or refund filed pursuant to § 39-10-114, C.R.S. shall be acted upon pursuant to the provisions of this section by the Board of County Commissioners or the Assessor, as appropriate, within six months of the date of filing such petition, § 39-1-113(1.7), C.R.S.

Section III:						Written Mutual Agreement of Assessor and Petitioner					
						(Only for abatements up to \$10,000)					
The Commissioners of _____ County authorize the Assessor by Resolution No. _____ 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 \$10,000 or less per tract, parcel, or lot of land or per schedule of personal property, in accordance with § 39-1-113(1.5), C.R.S.											
The Assessor and Petitioner mutually agree to the values and tax abatement/refund of:											
	Tax Year _____					Tax Year _____					
	Actual	Assessed	Tax			Actual	Assessed	Tax			
Original	_____	_____	_____			_____	_____	_____			
Corrected	_____	_____	_____			_____	_____	_____			
Abate/Refund	_____	_____	_____			_____	_____	_____			
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 or Deputy 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 _____ County, State of Colorado, at a duly and lawfully called regular meeting held on ____/____/____, at which meeting there were present the following members:											
Month Day Year											

with notice of such meeting and an opportunity to be present having been given to the Petitioner and the Assessor of said County and Assessor _____ <i>(being present--not present)</i> and											
Name											
Petitioner _____ <i>(being present--not present)</i> , and WHEREAS, the said											
Name											
County Commissioners have carefully considered the within petition, and are fully advised in relation thereto, NOW BE IT RESOLVED, that the Board <i>(agrees--does not agree)</i> with the recommendation of the Assessor and the petition be <i>(approved--approved in part--denied)</i> with an abatement/refund as follows:											
Year	Assessed Value	Taxes Abate/Refund	Year	Assessed Value	Taxes Abate/Refund						
_____	_____	_____	_____	_____	_____						
Chairperson of the Board of County Commissioners' Signature											
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 _____, _____											
Month Year						County Clerk's or Deputy County Clerk's Signature					
Note: Abatements greater than \$10,000 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 this abatement petition, is hereby											
<input type="checkbox"/> Approved <input type="checkbox"/> Approved in part \$ _____ <input type="checkbox"/> Denied for the following reason(s):											

Secretary's Signature				Property Tax Administrator's Signature				Date			