



CALGARY ASSESSMENT REVIEW BOARD

WITHDRAWAL OF COMPLAINT

I, _____, wish to acknowledge that I am the owner, or authorized
(Name)
agent of _____ acting on behalf of the owner, of the property or
(Company)
business located at:

Roll Number (Property): _____

or

Business Identifier (Business): _____

File Number: _____

Location Address: _____

Hearing Date: _____

I wish to withdraw my complaint against the assessment for the assessment roll year of
20__.

Note: Complete all information.

Authorization (Signature)

Authorization (Print Name)

Date: _____