

**THE STATE OF NEW HAMPSHIRE
BOARD OF TAX AND LAND APPEALS
GOVERNOR HUGH J. GALLEN STATE OFFICE PARK
107 PLEASANT STREET, JOHNSON HALL
CONCORD NH 03301**

v.

Docket No.: _____

WITHDRAWAL OF APPEAL

The undersigned Taxpayer(s) hereby withdraw(s) this appeal. No further action shall be taken on this appeal. No costs to either party.

Taxpayer Name (Please Print)

Taxpayer Name (Please Print)

Taxpayer's Signature Taxpayer's

Signature

Mailing Address Mailing

Address

City, State, Zip Code City,

State, Zip Code

A copy this Withdrawal of Appeal was hand delivered/mailed on _____, 20____, to
_____, Municipality.

Taxpayer Name (Please Print)

Taxpayer Signature

Date

Taxpayer Name (Please Print)

Taxpayer Signature

Date