

**To:** Secretary, Board of Revision

**RE: Request to Withdraw Appeal**

Roll No: \_\_\_\_\_

Appeal No.: \_\_\_\_\_  
(if known)

Property Address: \_\_\_\_\_

I request that my appeal to the Board of Revision, City of Saskatoon, with respect to the above-noted property be withdrawn.

\_\_\_\_\_  
(Signature - Appellant or Representative)

\_\_\_\_\_  
(date)

Confirmed: \_\_\_\_\_  
(Signature - Board Secretary or Designate)

\_\_\_\_\_  
(date)

cc: City Assessor

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**Board of Revision Fax No.(306) 975-2784**