

BEFORE THE WEST VIRGINIA OFFICE OF TAX APPEALS
1012 Kanawha Blvd., E., Suite #300, P. O. Box 2751, Charleston, WV 25330-2751
Fax: (304) 558-1670; Tel.: (304) 558-1666

WITHDRAWAL OF PETITION(S)

OTA Form 6 09/2013

Pg. 1 of 3 Pgs.

[Print out this form; fill in (legibly); and mail, fax, or hand deliver the completed form to OTA.]

[You **must** fill in all applicable blanks and **sign** and **date** this completed form.]

[OTA **must RECEIVE** this completed form no later than 7 calendar days before the scheduled prehearing conference or, if no prehearing conference was scheduled, OTA must receive this completed form no later than 7 calendar days before the scheduled evidentiary hearing. If **OTA** has decided that the matter will be submitted for decision on documents only (rarely done) -- you **must confirm** this by contacting OTA -- OTA must receive this completed form no later than 21 calendar days after the petition(s) was (were) filed.]

_____)		DOCKET NO(S). _____
[Taxpayer(s)-Petitioner's(s') Name(s)--))	_____
state the last name(s) first]))	_____
_____))	
[Name(s) Concluded]))	
Petitioner(s),))	
v.))	FILE NO(S). _____
_____))	_____
STEAGER, DALE W., as STATE))	
TAX COMMISSIONER OF))	
WEST VIRGINIA,))	
Respondent,))	

The Petitioner(s) named above is (are) hereby withdrawing the petition(s) for reassessment or for refund listed above by docket no(s).

**OTA Form 6, 09/2013
Withdrawal of Petition(s)**

Pg. 2 of 3 Pgs.

This withdrawal is final and the case(s) before the West Virginia Office of Tax Appeals with this (these) particular docket number(s) is (are) closed. The Petitioner(s), or any successor(s) in interest, may not later file another (other) petition(s) about this (these) same matter(s) for this (these) tax(es) and period(s) of time.

The Petitioner should promptly contact the Respondent West Virginia State Tax Commissioner's office about properly paying the state tax liability(ies) conceded here, in order to prevent the filing of a state tax lien(s) or any other authorized collection processes against the Petitioner(s).

Signed by: _____
Taxpayer(s)-Petitioner's(s') Name(s)

Taxpayer(s)-Petitioner's(s') Name(s) Concluded

Date: _____

Privacy Act Statement

WV Office of Tax Appeals

Pursuant to section 7 of the Federal Privacy Act of 1974, as last amended, your disclosure of your social security number, or your Federal Employer Identification Number, or West Virginia Taxpayer Number, whichever is applicable, is mandatory. This taxpayer identifying number is required by us so that we use the same taxpayer identifying number used by the Federal Internal Revenue Service or by the West Virginia State Tax Division, or both, enabling us to identify the correct taxpayer involved in administrative litigation before this tribunal, which assures that we comply with W. Va. Code § 11-10A-23, as last amended, requiring us to maintain the confidentiality of each taxpayer's return information as defined by W.Va. Code § 11-10-5d(b)(5), as last amended.

We have the authority to solicit your social security number or other taxpayer identifying number because of section 6109 of the Internal Revenue Code of 1986, as last amended, and the regulations promulgated in accordance therewith.

In addition, the Tax Reform Act of 1976, at 42 U.S.C. § 405(c)(2)(C)(i), as last amended, expressly exempts state or local agencies from the general restrictions on using and disclosing social security numbers, to the extent that such numbers are used in the administration of, among other things, any state or local tax law.

We will not disclose your social security number or other applicable taxpayer number except as, and only to the extent, authorized by specific federal and state law.

The Office of Tax Appeals does and will continue to appropriately secure your personal information.