

Clear Form

DTE 1
Rev. 12/22

Tax year _____ BOR no. _____

LORAIN COUNTY
BOARD OF REVISION

County _____ Date received _____

Complaint Against the Valuation of Real Property

Answer all questions and type or print all information. Read instructions on back before completing form.

2025 FEB 12 PM 2:28

Attach additional pages if necessary.

This form is for full market value complaints only. All other complaints should use DTE Form 2

☐ Original complaint ☐ Counter complaint

Notices will be sent only to those named below.

	Name	Street address, City, State, ZIP code	
1. Owner of property	GREG & ELAINA BAUS		
2. Complainant if not owner			
3. Complainant's agent			
4. Telephone number and email address of contact person 440-653-1290 GREG BAUS @ GMAIL.COM			
5. Complainant's relationship to property, if not owner			
If more than one parcel is included, see "Multiple Parcels" Instruction.			
6. Parcel numbers from tax bill	Address of property		
0500068600052	44285 TELEGRAPH Rd		
	Elyria, OH.		
7. Principal use of property Home			
8. The increase or decrease in market value sought. Counter-complaints supporting auditor's value may have -0- in Column C.			
Parcel number	Column A Complainant's Opinion of Value (Full Market Value)	Column B Current Value (Full Market Value)	Column C Change in Value
0500068600052	-0-	438,000.00	100%
9. The requested change in value is justified for the following reasons: 2 DRUNK GUYS @ DROWS PICK-UP THRU HOUSE MORNING OF 11-1-24 - WILL BE DEMOLISHED THIS SPRING			

10. Was property sold within the last three years? ☐ Yes ☒ No ☐ Unknown If yes, show date of sale _____

and sale price \$ _____ ; and attach information explained in "Instructions for Line 10" on back.

11. If property was not sold but was listed for sale in the last three years, attach a copy of listing agreement or other available evidence.

12. If any improvements were completed in the last three years, show date _____ and total cost \$ _____.

13. Do you intend to present the testimony or report of a professional appraiser? ☒ Yes ☐ No ☐ Unknown

14. If you have filed a prior complaint on this parcel since the last reappraisal or update of property values in the county, the reason for the valuation change requested must be one of those below. Please check all that apply and explain on attached sheet. See R.C. section 5715.19(A)(2) for a complete explanation.

- ☐ The property was sold in an arm's length transaction. ☐ The property lost value due to a casualty.
- ☐ A substantial improvement was added to the property. ☐ Occupancy change of at least 15% had a substantial economic impact on my property.

15. If the complainant is a legislative authority and the complaint is an original complaint with respect to property not owned by the complainant, R.C. 5715.19(A)(8) requires this section to be completed.

- ☐ The complainant has complied with the requirements of R.C. section 5715.19(A)(6)(b) and (7) and provided notice prior to the adoption of the resolution required by division (A)(6)(b) of that section as required by division (A)(7) of that section.

I declare under penalties of perjury that this complaint (including any attachments) has been examined by me and to the best of my knowledge and belief is true, correct and complete.

Date 2-12-25 Complainant or agent (printed) GREG BAULZ Title (if agent) _____

Complainant or agent (signature) _____

Sworn to and signed in my presence, this _____ day of _____

(Date) (Month) (Year)

Notary _____

Clear Form

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Tax year _____ BOR no. _____

LORAIN COUNTY
BOARD OF REVISION

County _____ Date received _____

Complaint Against the Valuation of Real Property

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Attach additional pages if necessary.

This form is for full market value complaints only. All other complaints should use DTE Form 2

☐ Original complaint ☐ Counter complaint

Notices will be sent only to those named below.

	Name	Street address, City, State, ZIP code	
1. Owner of property	Harry Williamson Jr.	1900 West 36th St. Lorain, Oh. 44053	
2. Complainant if not owner			
3. Complainant's agent			
4. Telephone number and email address of contact person 440-864-2720 hwilliamson2720@gmail.com			
5. Complainant's relationship to property, if not owner			
If more than one parcel is included, see "Multiple Parcels" Instruction.			
6. Parcel numbers from tax bill		Address of property	
0202014105012		1900 West 36th St. Lorain, Oh. 44053	
7. Principal use of property Residence			
8. The increase or decrease in market value sought. Counter-complaints supporting auditor's value may have -0- in Column C.			
Parcel number	Column A Complainant's Opinion of Value (Full Market Value)	Column B Current Value (Full Market Value)	Column C Change in Value
0202014105012	\$275,000	\$365,000 - \$396,000	\$90,000 - \$131,000
9. The requested change in value is justified for the following reasons: No major additions or structural alterations to referenced property in order to justify increase			

10. Was property sold within the last three years? ☐ Yes ☒ No ☐ Unknown If yes, show date of sale _____

and sale price \$ _____ ; and attach information explained in "Instructions for Line 10" on back.

11. If property was not sold but was listed for sale in the last three years, attach a copy of listing agreement or other available evidence.

12. If any improvements were completed in the last three years, show date _____ and total cost \$ _____

13. Do you intend to present the testimony or report of a professional appraiser? ☒ Yes ☐ No ☐ Unknown

14. If you have filed a prior complaint on this parcel since the last reappraisal or update of property values in the county, the reason for the valuation change requested must be one of those below. Please check all that apply and explain on attached sheet. See R.C. section 5715.19(A)(2) for a complete explanation.

- | | |
|--|---|
| <input type="checkbox"/> The property was sold in an arm's length transaction. | <input type="checkbox"/> The property lost value due to a casualty. |
| <input type="checkbox"/> A substantial improvement was added to the property. | <input type="checkbox"/> Occupancy change of at least 15% had a substantial economic impact on my property. |

15. If the complainant is a legislative authority and the complaint is an original complaint with respect to property not owned by the complainant, R.C. 5715.19(A)(8) requires this section to be completed.

- ☐ The complainant has complied with the requirements of R.C. section 5715.19(A)(6)(b) and (7) and provided notice prior to the adoption of the resolution required by division (A)(6)(b) of that section as required by division (A)(7) of that section.

I declare under penalties of perjury that this complaint (including any attachments) has been examined by me and to the best of my knowledge and belief is true, correct and complete.

Date 01/07/2025 Complainant or agent (printed) HarryWilliamsonJr Title (if agent) _____

Complainant or agent (signature) 

Sworn to and signed in my presence, this _____ day of _____ (Date) (Month) (Year)

Notary _____

Clear Form

DTE 1
Rev. 12/22

Tax year _____ BOR no. _____

County _____ Date received _____

LORAIN COUNTY
BOARD OF REVISION

Complaint Against the Valuation of Real Property

Answer all questions and type or print all information. Read instructions on back before completing form.

2025 FEB 12 PM 2:20 Attach additional pages if necessary.

This form is for full market value complaints only. All other complaints should use DTE Form 2

☐ Original complaint ☐ Counter complaint

Notices will be sent only to those named below.

	Name	Street address, City, State, ZIP code	
1. Owner of property	Paul and Mary Heyslinger, Trustee	32405 Brandon Place, Avon Lake, Ohio 44012	
2. Complainant if not owner			
3. Complainant's agent	Kenneth R. Resar	520 Broadway, Lorain, Ohio 44052	
4. Telephone number and email address of contact person	Kenneth R. Resar Phone: 440 244 5214, Email: Ken@rileyresar.com		
5. Complainant's relationship to property, if not owner	If more than one parcel is included, see "Multiple Parcels" Instruction.		
6. Parcel numbers from tax bill	Address of property		
04-00-019-143-301	32405 Brandon Pl. Avon Lake, Ohio 44012		
7. Principal use of property	Residence		
8. The increase or decrease in market value sought. Counter-complaints supporting auditor's value may have -0- in Column C.			
Parcel number	Column A Complainant's Opinion of Value (Full Market Value)	Column B Current Value (Full Market Value)	Column C Change in Value
04-00-019-143-301	\$700,000.00	\$963,410.00	\$263,410.00
9. The requested change in value is justified for the following reasons: An appraisal of the property was obtained on September 5, 2024. The appraisal report establishes the value of the property to be \$700,000.00 as of January 1, 2024. The value of the property was previously determined to be \$511,920 for real estate tax purposes. The house is Thirty Two years old and there have not been any significant improvements or modifications to the house since it was constructed.			

10. Was property sold within the last three years? ☐ Yes ☒ No ☐ Unknown If yes, show date of sale _____
and sale price \$ _____ ; and attach information explained in "Instructions for Line 10" on back.

11. If property was not sold but was listed for sale in the last three years, attach a copy of listing agreement or other available evidence.

12. If any improvements were completed in the last three years, show date Not applicable and total cost \$ _____.

13. Do you intend to present the testimony or report of a professional appraiser? ☒ Yes ☐ No ☐ Unknown

14. If you have filed a prior complaint on this parcel since the last reappraisal or update of property values in the county, the reason for the valuation change requested must be one of those below. Please check all that apply and explain on attached sheet. See R.C. section 5715.19(A)(2) for a complete explanation.

- ☐ The property was sold in an arm's length transaction. ☐ The property lost value due to a casualty.
☐ A substantial improvement was added to the property. ☐ Occupancy change of at least 15% had a substantial economic impact on my property.

15. If the complainant is a legislative authority and the complaint is an original complaint with respect to property not owned by the complainant, R.C. 5715.19(A)(8) requires this section to be completed.

- ☐ The complainant has complied with the requirements of R.C. section 5715.19(A)(6)(b) and (7) and provided notice prior to the adoption of the resolution required by division (A)(6)(b) of that section as required by division (A)(7) of that section.

I declare under penalties of perjury that this complaint (including any attachments) has been examined by me and to the best of my knowledge and belief is true, correct and complete.

Date 02/06/2025 Complainant or agent (printed) Paul Heyslinger Title (if agent) _____

Complainant or agent (signature) Paul Heyslinger

Sworn to and signed in my presence, this 6th day of February, 2025
(Date) (Month) (Year)

Notary Kenneth R. Resar



KENNETH R. RESAR - Attorney at Law
Notary Public - State of Ohio
My Commission has no expiration date
Section 147.03 R.C.

Clear Form

DTE 1
Rev. 12/22

Tax year _____ BOR no. _____

County Lorain Date received _____LORAIN COUNTY
BOARD OF REVISION**Complaint Against the Valuation of Real Property**

Answer all questions and type or print all information. Read instructions on back before completing form.

Attach additional pages if necessary.

2025 FEB 12 PM 2:10

This form is for full market value complaints only. All other complaints should use DTE Form 2

☒ Original complaint ☐ Counter complaint

Notices will be sent only to those named below.

	Name	Street address, City, State, ZIP code	
1. Owner of property	Shawn & Sheri McCracken	2915 Shady Lake Dr Vermilion Oh 44089	
2. Complainant if not owner			
3. Complainant's agent			
4. Telephone number and email address of contact person Sheri McCracken 440-258-9436 themccrackens18@gmail.com			
5. Complainant's relationship to property, if not owner			
If more than one parcel is included, see "Multiple Parcels" Instruction.			
6. Parcel numbers from tax bill	Address of property		
0100012000014	2915 Shady Lake Dr Vermilion, Oh 44089		
7. Principal use of property Owner Occupany			
8. The increase or decrease in market value sought. Counter-complaints supporting auditor's value may have -0- in Column C.			
Parcel number	Column A Complainant's Opinion of Value (Full Market Value)	Column B Current Value (Full Market Value)	Column C Change in Value
0100012000014	426,000	459,910	33,910
9. The requested change in value is justified for the following reasons: We purchased the home in July and the appraier that came out said 426,000 and that was pushing it because there is so much work to be done to make the property up to value. We paid 430,000 because previous owner left personal property items. Please see the attached appraisal			

10. Was property sold within the last three years? ☒ Yes ☐ No ☐ Unknown If yes, show date of sale 07/19/2024and sale price \$ 430,000 ; and attach information explained in "Instructions for Line 10" on back.

11. If property was not sold but was listed for sale in the last three years, attach a copy of listing agreement or other available evidence.

12. If any improvements were completed in the last three years, show date _____ and total cost \$ _____.

13. Do you intend to present the testimony or report of a professional appraiser? ☒ Yes ☐ No ☐ Unknown

14. If you have filed a prior complaint on this parcel since the last reappraisal or update of property values in the county, the reason for the valuation change requested must be one of those below. Please check all that apply and explain on attached sheet. See R.C. section 5715.19(A)(2) for a complete explanation.

- ☐ The property was sold in an arm's length transaction. ☐ The property lost value due to a casualty.
- ☐ A substantial improvement was added to the property. ☐ Occupancy change of at least 15% had a substantial economic impact on my property.

15. If the complainant is a legislative authority and the complaint is an original complaint with respect to property not owned by the complainant, R.C. 5715.19(A)(8) requires this section to be completed.

- ☐ The complainant has complied with the requirements of R.C. section 5715.19(A)(6)(b) and (7) and provided notice prior to the adoption of the resolution required by division (A)(6)(b) of that section as required by division (A)(7) of that section.

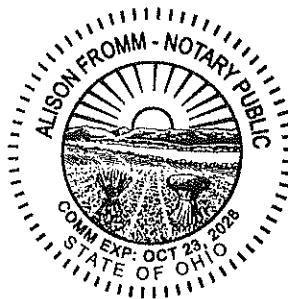
I declare under penalties of perjury that this complaint (including any attachments) has been examined by me and to the best of my knowledge and belief is true, correct and complete.

Date 2/8/2025 ^{SCM} Complainant or agent (printed) Sheri Shank-McCracken Title (if agent) owner

Complainant or agent (signature) *Sheri Shank-McCracken*

Sworn to and signed in my presence, this 8th day of February 2025
(Date) (Month) (Year)

Notary *Alison Fromm*





2025 FEB 12 PM 2:10

Complaint Against the Valuation of Real Property

Answer all questions and type or print all information. Read instructions on back before completing form. Attach additional pages if necessary.

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☒ Original complaint ☐ Counter complaint

Notices will be sent only to those named below.

Name <i>Sylvia E Hermo Fedro</i>		Street address, City, State, ZIP code	
1. Owner of property	<i>Sylvia E Hermo Fedro</i>	<i>221 Crestwood Drive Avon Lake OH 44012</i>	
2. Complainant if not owner			
3. Complainant's agent			
4. Telephone number and email address of contact person			
<i>440-371-1035</i>		<i>shermo@bgsu.edu</i>	
5. Complainant's relationship to property, if not owner			
If more than one parcel is included, see "Multiple Parcels" Instruction.			
6. Parcel numbers from tax bill		Address of property	
<i>04-00-007-121-013</i>		<i>221 Crestwood Dr Avon Lake</i>	
7. Principal use of property <i>main Residence</i>			
8. The increase or decrease in market value sought. Counter-complaints supporting auditor's value may have -0- in Column C.			
Parcel number	Column A Complainant's Opinion of Value (Full Market Value)	Column B Current Value (Full Market Value)	Column C Change in Value
<i>0400007121013</i>	<i>\$ 300,000</i>	<i>\$ 338,150</i>	<i>\$ -38,150</i>
9. The requested change in value is justified for the following reasons: <i>online comp search comparison, 2 online offers Last remodel 11 yrs ago</i>			



10. Was property sold within the last three years? ☐ Yes ☒ No ☐ Unknown If yes, show date of sale

_____ and sale price \$ _____ ; and attach information explained in "Instructions for Line 10" on back.

11. If property was not sold but was listed for sale in the last three years, attach a copy of listing agreement or other available evidence.

12. If any improvements were completed in the last three years, show date _____ and total cost \$ _____

13. Do you intend to present the testimony or report of a professional appraiser? ☐ Yes ☒ No ☐ Unknown

14. If you have filed a prior complaint on this parcel since the last reappraisal or update of property values in the county, the reason for the valuation change requested must be one of those below. Please check all that apply and explain on attached sheet. See R.C. section 5715.19(A)(2) for a complete explanation.

☐ The property was sold in an arm's length transaction.

☐ The property lost value due to a casualty.

☐ A substantial improvement was added to the property.

☐ Occupancy change of at least 15% had a substantial economic impact on my property.

15. If the complainant is a legislative authority and the complaint is an original complaint with respect to property not owned by the complainant, R.C. 5715.19(A)(8) requires this section to be completed.

☐ The complainant has complied with the requirements of R.C. section 5715.19(A)(6)(b) and (7) and provided notice prior to the adoption of the resolution required by division (A)(6)(b) of that section as required by division (A)(7) of that section.

I declare under penalties of perjury that this complaint (including any attachments) has been examined by me and to the best of my knowledge and belief is true, correct and complete.

Date 2-10-25 Complainant or agent (printed) Sylvia E Hermon-Fedro Title (if agent) _____

Complainant or agent (signature) Sylvia E Hermon-Fedro

Sworn to and signed in my presence, this 10 day of February 2025
(Date) (Month) (Year)

Notary [Signature]

Instructions for Completing DTE 1



Dean Joseph Perella Jr
Notary Public, State of Ohio
My Commission Expires:
12-30-2029

Tax year _____ BOR no. _____

County _____ Date received _____

LORAIN COUNTY
BOARD OF REVISION**Complaint Against the Valuation of Real Property**Answer all questions and type or print all information. Read instructions on back before completing form.
Attach additional pages if necessary.

2025 FEB 12 PM 2:09

This form is for full market value complaints only. All other complaints should use DTE Form 2

☒ Original complaint ☐ Counter complaint
Notices will be sent only to those named below.

Name		Street address, City, State, ZIP code	
Perrigan Michelle A		20601 E 31st LORAIN OH 44055	
Hobbs CARL E			
1. Owner of property			
2. Complainant if not owner			
3. Complainant's agent			
4. Telephone number and email address of contact person		440 309 3678 michelleperrigan@gmail.com	
440 277 0211 carl.hobbs@gmail.com			
5. Complainant's relationship to property, if not owner			
If more than one parcel is included, see "Multiple Parcels" instruction.			
6. Parcel numbers from tax bill		Address of property	
03-00-094-103-018		2059 E 31st LORAIN OH 44055	
7. Principal use of property		Home	
8. The increase or decrease in market value sought. Counter-complaints supporting auditor's value may have -0- in Column C.			
Parcel number	Column A Complainant's Opinion of Value (Full Market Value)	Column B Current Value (Full Market Value)	Column C Change in Value
03-00-094-103-018	100,690	197,930	97,240
9. The requested change in value is justified for the following reasons:			
Property value \$97,000 (almost doubled) No improvements on property.			

10. Was property sold within the last three years? ☐ Yes ☒ No ☐ Unknown If yes, show date of sale _____

and sale price \$ _____ ; and attach information explained in "Instructions for Line 10" on back.

11. If property was not sold but was listed for sale in the last three years, attach a copy of listing agreement or other available evidence.

12. If any improvements were completed in the last three years, show date _____ and total cost \$ _____

13. Do you intend to present the testimony or report of a professional appraiser? ☐ Yes ☒ No ☐ Unknown

14. If you have filed a prior complaint on this parcel since the last reappraisal or update of property values in the county, the reason for the valuation change requested must be one of those below. Please check all that apply and explain on attached sheet. See R.C. section 5715.19(A)(2) for a complete explanation.

- ☐ The property was sold in an arm's length transaction. ☐ The property lost value due to a casualty.
- ☐ A substantial improvement was added to the property. ☐ Occupancy change of at least 15% had a substantial economic impact on my property.

15. If the complainant is a legislative authority and the complaint is an original complaint with respect to property not owned by the complainant, R.C. 5715.19(A)(8) requires this section to be completed.

- ☐ The complainant has complied with the requirements of R.C. section 5715.19(A)(6)(b) and (7) and provided notice prior to the adoption of the resolution required by division (A)(6)(b) of that section as required by division (A)(7) of that section.

I declare under penalties of perjury that this complaint (including any attachments) has been examined by me and to the best of my knowledge and belief is true, correct and complete.

Date 2-16-25 Complainant or agent (printed) Michelle A. Reagan Title (if agent) Michelle A. Reagan

Complainant or agent (signature) _____

Sworn to and signed in my presence, this _____ day of _____
(Date) (Month) (Year)

Notary _____

Clear Form

DTE 1
Rev. 12/22Tax year 2024

BOR no. _____

LORAIN COUNTY
BOARD OF REVISIONCounty Lorain

Date received _____

Complaint Against the Valuation of Real PropertyAnswer all questions and type or print all information. Read instructions on back before completing form.
Attach additional pages if necessary.This form is for full market value complaints only. All other complaints should use DTE Form 2
☒ Original complaint ☐ Counter complaint

Notices will be sent only to those named below.

	Name	Street address, City, State, ZIP code
1. Owner of property	Augustinov, Karol & Rebeca	21967 Foster Rd Wellington, OH 44090
2. Complainant if not owner		
3. Complainant's agent		
4. Telephone number and email address of contact person	330-421-7434 rebecca-augustinov@hotmail.com	
5. Complainant's relationship to property, if not owner		

If more than one parcel is included, see "Multiple Parcels" Instruction.

6. Parcel numbers from tax bill	Address of property
19-04-034-000-005	21967 Foster Rd Wellington, OH 44090

7. Principal use of property living at this address

8. The increase or decrease in market value sought. Counter-complaints supporting auditor's value may have -0- in Column C.

Parcel number	Column A Complainant's Opinion of Value (Full Market Value)	Column B Current Value (Full Market Value)	Column C Change in Value
19-04-034-000-005	100,000	223,310	123,310

9. The requested change in value is justified for the following reasons:

The house has an old slate roof, gravel driveway, built in 1900, main skeletal structure contain same old nails and wood studs

10. Was property sold within the last three years? ☐ Yes ☒ No ☐ Unknown If yes, show date of sale _____

and sale price \$ _____ ; and attach information explained in "Instructions for Line 10" on back.

11. If property was not sold but was listed for sale in the last three years, attach a copy of listing agreement or other available evidence.

12. If any improvements were completed in the last three years, show date _____ and total cost \$ _____

13. Do you intend to present the testimony or report of a professional appraiser? ☐ Yes ☐ No ☐ Unknown

14. If you have filed a prior complaint on this parcel since the last reappraisal or update of property values in the county, the reason for the valuation change requested must be one of those below. Please check all that apply and explain on attached sheet. See R.C. section 5715.19(A)(2) for a complete explanation.

- ☐ The property was sold in an arm's length transaction. ☐ The property lost value due to a casualty.
- ☐ A substantial improvement was added to the property. ☐ Occupancy change of at least 15% had a substantial economic impact on my property.

15. If the complainant is a legislative authority and the complaint is an original complaint with respect to property not owned by the complainant, R.C. 5715.19(A)(8) requires this section to be completed.

- ☐ The complainant has complied with the requirements of R.C. section 5715.19(A)(6)(b) and (7) and provided notice prior to the adoption of the resolution required by division (A)(6)(b) of that section as required by division (A)(7) of that section.

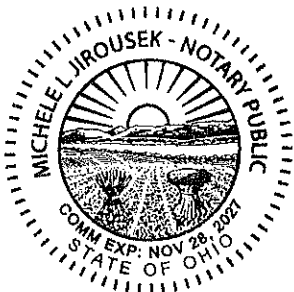
I declare under penalties of perjury that this complaint (including any attachments) has been examined by me and to the best of my knowledge and belief is true, correct and complete.

Date 2/10/25 Complainant or agent (printed) Rebeca Augustinov Title (if agent) _____

Complainant or agent (signature) _____

Sworn to and signed in my presence, this 4th day of Feb 2025
(Date) (Month) (Year)

Notary _____



Clear Form

DTE 1
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Tax year _____ BOR no. _____

County _____ Date received _____

LORAIN COUNTY
BOARD OF REVISION

Complaint Against the Valuation of Real Property

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2025 FEB 12 PM 2:08

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☐ Original complaint ☐ Counter complaint

Notices will be sent only to those named below.

	Name	Street address, City, State, ZIP code	
1. Owner of property	DAVID M. HOLOWECKY	4530 STONEY RIDGE RD. AVON, OH 44011	
2. Complainant if not owner	-	-	
3. Complainant's agent	-	-	
4. Telephone number and email address of contact person 440-934-4706 mholowecky@gmail.com			
5. Complainant's relationship to property, if not owner -			
If more than one parcel is included, see "Multiple Parcels" Instruction.			
6. Parcel numbers from tax bill	Address of property		
04-00-012-101-034	4530 STONEY RIDGE, AVON, OH 44011		
04-00-012-101-055	REAR LAND - 4530 STONEY RIDGE, AVON, OH 44011		
04-00-002-103-026	LONG ROAD, AVON, OH 44011		
7. Principal use of property			
8. The increase or decrease in market value sought. Counter-complaints supporting auditor's value may have -0- in Column C.			
Parcel number	Column A Complainant's Opinion of Value (Full Market Value)	Column B Current Value (Full Market Value)	Column C Change in Value
04-00-012-101-034	\$167,530.00	\$254,000.00	+\$86,530.00
04-00-012-101-055	\$50,490	\$111,540.00	+\$61,050.00
04-00-002-103-026	\$42,150	\$49,580	+\$7,430.00
9. The requested change in value is justified for the following reasons: SEE ATTACHED SHEET			

10. Was property sold within the last three years? ☐ Yes ☒ No ☐ Unknown If yes, show date of sale _____

and sale price \$ _____ ; and attach information explained in "Instructions for Line 10" on back.

11. If property was not sold but was listed for sale in the last three years, attach a copy of listing agreement or other available evidence.

12. If any improvements were completed in the last three years, show date _____ and total cost \$ _____

13. Do you intend to present the testimony or report of a professional appraiser? ☐ Yes ☒ No ☐ Unknown

14. If you have filed a prior complaint on this parcel since the last reappraisal or update of property values in the county, the reason for the valuation change requested must be one of those below. Please check all that apply and explain on attached sheet. See R.C. section 5715.19(A)(2) for a complete explanation.

☐ The property was sold in an arm's length transaction.

☐ The property lost value due to a casualty.

☐ A substantial improvement was added to the property.

☐ Occupancy change of at least 15% had a substantial economic impact on my property.

15. If the complainant is a legislative authority and the complaint is an original complaint with respect to property not owned by the complainant, R.C. 5715.19(A)(8) requires this section to be completed.

☐ The complainant has complied with the requirements of R.C. section 5715.19(A)(6)(b) and (7) and provided notice prior to the adoption of the resolution required by division (A)(6)(b) of that section as required by division (A)(7) of that section.

I declare under penalties of perjury that this complaint (including any attachments) has been examined by me and to the best of my knowledge and belief is true, correct and complete.

Date 2-7-25 Complainant or agent (printed) DAVID M. HOLOWECKY Title (if agent) _____

Complainant or agent (signature) David M. Holowecsky

Sworn to and signed in my presence, this 7th day of February 2025
(Date) (Month) (Year)

Notary Hossein Kashiani



HOSSEIN KASHIANI
NOTARY PUBLIC
FOR THE
STATE OF OHIO
My Commission Expires
January 22, 2028

Clear Form

DTE 1
Rev. 12/22

Tax year _____ BOR no. _____
County _____ Date received _____

LORAIN COUNTY
BOARD OF REVISION

Complaint Against the Valuation of Real Property

Answer all questions and type or print all information. Read instructions on back before completing form.

2025 FEB 12 PM 2:07

Attach additional pages if necessary.

This form is for full market value complaints only. All other complaints should use DTE Form 2

☐ Original complaint ☐ Counter complaint

Notices will be sent only to those named below.

	Name	Street address, City, State, ZIP code	
1. Owner of property	Kenneth L. Radabaugh	143 Penrose Ct. Elyria OH 44035	
2. Complainant if not owner			
3. Complainant's agent			
4. Telephone number and email address of contact person			
1-440-324-4449 Carol/Ken @ windstream.net			
5. Complainant's relationship to property, if not owner			
If more than one parcel is included, see "Multiple Parcels" Instruction.			
6. Parcel numbers from tax bill	Address of property		
7. Principal use of property Rental			
8. The increase or decrease in market value sought. Counter-complaints supporting auditor's value may have -0- in Column C.			
Parcel number	Column A Complainant's Opinion of Value (Full Market Value)	Column B Current Value (Full Market Value)	Column C Change in Value
06-23-017-101-019	100,000	132,660	32,660

9. The requested change in value is justified for the following reasons:
The property value on 2023 taxes was 83,100 and it went to 132,660 in 2024 taxes. Increase of 49,500 which is over 55% of the value. Tax increase of 627.34 Yr

10. Was property sold within the last three years? ☐ Yes ☒ No ☐ Unknown If yes, show date of sale _____ and sale price \$ _____ ; and attach information explained in "Instructions for Line 10" on back.
11. If property was not sold but was listed for sale in the last three years, attach a copy of listing agreement or other available evidence.
12. If any improvements were completed in the last three years, show date NONE and total cost \$ _____
13. Do you intend to present the testimony or report of a professional appraiser? ☐ Yes ☒ No ☐ Unknown

14. If you have filed a prior complaint on this parcel since the last reappraisal or update of property values in the county, the reason for the valuation change requested must be one of those below. Please check all that apply and explain on attached sheet. See R.C. section 5715.19(A)(2) for a complete explanation.

☐ The property was sold in an arm's length transaction.

☐ The property lost value due to a casualty.

☐ A substantial improvement was added to the property.

☐ Occupancy change of at least 15% had a substantial economic impact on my property.

15. If the complainant is a legislative authority and the complaint is an original complaint with respect to property not owned by the complainant, R.C. 5715.19(A)(8) requires this section to be completed.

☐ The complainant has complied with the requirements of R.C. section 5715.19(A)(6)(b) and (7) and provided notice prior to the adoption of the resolution required by division (A)(6)(b) of that section as required by division (A)(7) of that section.

I declare under penalties of perjury that this complaint (including any attachments) has been examined by me and to the best of my knowledge and belief is true, correct and complete.

Date _____ Complainant or agent (printed) _____ Title (if agent) _____

Complainant or agent (signature) _____

Sworn to and signed in my presence, this _____ day of _____
(Date) (Month) (Year)

Notary _____

Clear Form

Tax year _____ BOR no. _____
 County _____ Date received _____

DTE 1
 Rev. 12/22

LORAIN COUNTY
 BOARD OF REVISION

Complaint Against the Valuation of Real Property

Answer all questions and type or print all information. Read instructions on back before completing form.

2025 FEB 12 PM 1:19

Attach additional pages if necessary.

This form is for full market value complaints only. All other complaints should use DTE Form 2

☐ Original complaint ☐ Counter complaint

Notices will be sent only to those named below.

	Name	Street address, City, State, ZIP code
1. Owner of property	Manal L Rizk, Thabit Rizk	34150 Gail Dr, North Ridgeville OH 44039
2. Complainant if not owner		
3. Complainant's agent		

4. Telephone number and email address of contact person

manohoba2000@yahoo.com

5. Complainant's relationship to property, if not owner

If more than one parcel is included, see "Multiple Parcels" instruction.

6. Parcel numbers from tax bill	Address of property
0700016111027	34150, Gail Dr, North Ridgeville OH 44039

7. Principal use of property

8. The increase or decrease in market value sought. Counter-complaints supporting auditor's value may have -0- in Column C.

Parcel number	Column A Complainant's Opinion of Value (Full Market Value)	Column B Current Value (Full Market Value)	Column C Change in Value
0700016111027	211,000	232,500	

9. The requested change in value is justified for the following reasons: my original appraisal on 08/20/24 by Jason Murphy was for 211,000. I feel that was accurate to the true value of my home not the proposed value by the city. Initially when the house was purchased, an inspection was not done in 2020, there were unforeseen issues were unknown hence making the actual value of the property at or below 211,000. I would like task the city to reconsider these factor in your review of my house's value.

10. Was property sold within the last three years? ☐ Yes ☐ No ☒ Unknown If yes, show date of sale _____

and sale price \$ _____ ; and attach information explained in "Instructions for Line 10" on back.

11. If property was not sold but was listed for sale in the last three years, attach a copy of listing agreement or other available evidence.

Drive way, house's windows "all" 35,000

12. If any improvements were completed in the last three years, show date 2021 and total cost \$ 35,000

13. Do you intend to present the testimony or report of a professional appraiser? ☐ Yes ☒ No ☐ Unknown

14. If you have filed a prior complaint on this parcel since the last reappraisal or update of property values in the county, the reason for the valuation change requested must be one of those below. Please check all that apply and explain on attached sheet. See R.C. section 5715.19(A)(2) for a complete explanation

- ☐ The property was sold in an arm's length transaction. ☐ The property lost value due to a casualty.
- ☐ A substantial improvement was added to the property. ☐ Occupancy change of at least 15% had a substantial economic impact on my property.

15. If the complainant is a legislative authority and the complaint is an original complaint with respect to property not owned by the complainant, R.C. 5715.19(A)(8) requires this section to be completed.

- ☐ The complainant has complied with the requirements of R.C. section 5715.19(A)(6)(b) and (7) and provided notice prior to the adoption of the resolution required by division (A)(6)(b) of that section as required by division (A)(7) of that section.

I declare under penalties of perjury that this complaint (including any attachments) has been examined by me and to the best of my knowledge and belief is true, correct and complete.

Date 2-6-2025 Complainant or agent (printed) Robert & Kathleen Quinn Title (if agent) _____

Complainant or agent (signature) Robert E Quinn
Kathleen M. Quinn

Sworn to and signed in my presence, this 6 (Date) day February (Month) 2025 (Year)

Notar Danielle Mahany



Clear Form

DTE 1
Rev. 12/22

LORAIN COUNTY
BOARD OF REVISION

Tax year _____ BOR no. _____

County _____ Date received _____

Complaint Against the Valuation of Real Property

Answer all questions and type or print all information. Read instructions on back before completing form.
Attach additional pages if necessary.

This form is for full market value complaints only. All other complaints should use DTE Form 2

☐ Original complaint ☐ Counter complaint

Notices will be sent only to those named below.

	Name	Street address, City, State, ZIP code	
1. Owner of property	MIKE VITOJITZ	391 QUARTER HORSE	
2. Complainant if not owner		LAWRENCE OH 44050	
3. Complainant's agent			
4. Telephone number and email address of contact person 440 2256-432			
5. Complainant's relationship to property, if not owner			
If more than one parcel is included, see "Multiple Parcels" Instruction.			
6. Parcel numbers from tax bill		Address of property	
15-00-098-108-086		391 QUARTER HORSE LANE	
15-00-098-108-093			
7. Principal use of property LIVE			
8. The increase or decrease in market value sought. Counter-complaints supporting auditor's value may have -0- in Column C.			
Parcel number	Column A Complainant's Opinion of Value (Full Market Value)	Column B Current Value (Full Market Value)	Column C Change in Value
15-00-098-108-086	9500 ⁰⁰	9500 ⁰⁰	
15-00-098-108-093	228,000	256,410	
9. The requested change in value is justified for the following reasons: HOMES DONT SELL AT HIGH (IN PHEANT RUN)			

10. Was property sold within the last three years? ☐ Yes ☒ No ☐ Unknown If yes, show date of sale _____

and sale price \$ _____ ; and attach information explained in "Instructions for Line 10" on back.

11. If property was not sold but was listed for sale in the last three years, attach a copy of listing agreement or other available evidence.

12. If any improvements were completed in the last three years, show date NONE and total cost \$ _____

13. Do you intend to present the testimony or report of a professional appraiser? ☐ Yes ☒ No ☐ Unknown

14. If you have filed a prior complaint on this parcel since the last reappraisal or update of property values in the county, the reason for the valuation change requested must be one of those below. Please check all that apply and explain on attached sheet. See R.C. section 5715.19(A)(2) for a complete explanation.

- ☐ The property was sold in an arm's length transaction. ☐ The property lost value due to a casualty.
- ☐ A substantial improvement was added to the property. ☐ Occupancy change of at least 15% had a substantial economic impact on my property.

15. If the complainant is a legislative authority and the complaint is an original complaint with respect to property not owned by the complainant, R.C. 5715.19(A)(8) requires this section to be completed.

- ☐ The complainant has complied with the requirements of R.C. section 5715.19(A)(6)(b) and (7) and provided notice prior to the adoption of the resolution required by division (A)(6)(b) of that section as required by division (A)(7) of that section.

I declare under penalties of perjury that this complaint (including any attachments) has been examined by me and to the best of my knowledge and belief is true, correct and complete.

Date 2/11/25 Complainant or agent (printed) MIKE VITOULIS Title (if agent) _____

Complainant or agent (signature) Mike Vitooulis

Sworn to and signed in my presence, this 11 day of February 2025

(Date)

(Month)

(Year)

Notary Samantha Glover



SAMANTHA GLOVER
Notary Public, State of Ohio
My Commission Expires
March 01, 2027
COMMISSION: 2022-RE-845457

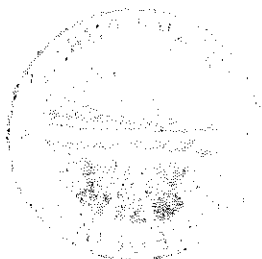
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Tax year _____ BOR no. _____

County _____ Date received _____

LORAIN COUNTY
BOARD OF REVENUE**Complaint Against the Valuation of Real Property**

Answer all questions and type or print all information. Read instructions on back before completing form.

Attach additional pages if necessary.

2025 FEB 12 PM 12:18

This form is for full market value complaints only. All other complaints should use DTE Form 2

☐ Original complaint ☐ Counter complaint

Notices will be sent only to those named below.

	Name	Street address, City, State, ZIP code	
1. Owner of property	ERIK R MILLER	7106 FAIRACRES RD NORTH RIDGEVILLE	
2. Complainant if not owner		OHIO 44039	
3. Complainant's agent			
4. Telephone number and email address of contact person 440-670-0656 teammillers@icloud.com			
5. Complainant's relationship to property, if not owner If more than one parcel is included, see "Multiple Parcels" Instruction.			
6. Parcel numbers from tax bill	Address of property		
07-00-016-108-007	7106 FAIRACRES RD NORTH RIDGEVILLE OH 44039		
7. Principal use of property I OWN THIS PROPERTY			
8. The increase or decrease in market value sought. Counter-complaints supporting auditor's value may have -0- in Column C.			
Parcel number	Column A Complainant's Opinion of Value (Full Market Value)	Column B Current Value (Full Market Value)	Column C Change in Value
07 00 016 108 007	\$ 100,000	\$ 166,960	\$ 66,960
9. The requested change in value is justified for the following reasons: 2023 VALUE WAS \$ 126,230 THE 2024 REASSESSED VALUE IS \$ 166,960 WHICH IS A 32% INCREASE. THIS IS UNACCEPTABLE. PLEASE READJUST THE VALUE TO A FAIR INCREASE WHICH SHOULD BE IN LINE WITH OTHER HOUSES WITH A SQUARE FOOTAGE OF 1,036 ft ² SINGLE CAR, SINGLE BATH RANCH HOUSE ON A CRAWL SPACE.			

10. Was property sold within the last three years? ☐ Yes ☐ No ☐ Unknown If yes, show date of sale _____

and sale price \$ _____ ; and attach information explained in "Instructions for Line 10" on back.

11. If property was not sold but was listed for sale in the last three years, attach a copy of listing agreement or other available evidence.

12. If any improvements were completed in the last three years, show date _____ and total cost \$ _____

13. Do you intend to present the testimony or report of a professional appraiser? ☐ Yes ☐ No ☐ Unknown

14. If you have filed a prior complaint on this parcel since the last reappraisal or update of property values in the county, the reason for the valuation change requested must be one of those below. Please check all that apply and explain on attached sheet. See R.C. section 5715.19(A)(2) for a complete explanation.

- | | |
|--|---|
| <input type="checkbox"/> The property was sold in an arm's length transaction. | <input type="checkbox"/> The property lost value due to a casualty. |
| <input type="checkbox"/> A substantial improvement was added to the property. | <input type="checkbox"/> Occupancy change of at least 15% had a substantial economic impact on my property. |

15. If the complainant is a legislative authority and the complaint is an original complaint with respect to property not owned by the complainant, R.C. 5715.19(A)(8) requires this section to be completed.

- ☐ The complainant has complied with the requirements of R.C. section 5715.19(A)(6)(b) and (7) and provided notice prior to the adoption of the resolution required by division (A)(6)(b) of that section as required by division (A)(7) of that section.

I declare under penalties of perjury that this complaint (including any attachments) has been examined by me and to the best of my knowledge and belief is true, correct and complete.

Date 01/21/2025 Complainant or agent (printed) ERIK R MILLER Title (if agent) _____

Complainant or agent (signature) Erik R Miller

Sworn to and signed in my presence, this _____ day of _____
(Date) (Month) (Year)

Notary _____

Clear Form

DTE 1
Rev. 12/22

Tax year _____ BOR no. _____

LORAIN COUNTY
BOARD OF REVISION

County _____ Date received _____

Complaint Against the Valuation of Real Property

Answer all questions and type or print all information. Read instructions on back before completing form.

2025 FEB 12 PM 12:13

Attach additional pages if necessary.

This form is for full market value complaints only. All other complaints should use DTE Form 2

☐ Original complaint ☐ Counter complaint

Notices will be sent only to those named below.

	Name	Street address, City, State, ZIP code	
1. Owner of property	ERIK R MILLER	33731 SICILY CT. N. RIDGEVILLE OH	
2. Complainant if not owner		44039	
3. Complainant's agent			
4. Telephone number and email address of contact person			
440-670-0656 teammiller@icloud.com			
5. Complainant's relationship to property, if not owner			
If more than one parcel is included, see "Multiple Parcels" Instruction.			
6. Parcel numbers from tax bill		Address of property	
07-00-012-103-063		33731 SICILY CT N RIDGEVILLE OHIO 44039	
7. Principal use of property I LIVE ON THIS PROPERTY			
8. The increase or decrease in market value sought. Counter-complaints supporting auditor's value may have -0- in Column C.			
Parcel number	Column A Complainant's Opinion of Value (Full Market Value)	Column B Current Value (Full Market Value)	Column C Change in Value
0700012103063	\$ 100,000	\$ 283,230	\$ 183,230
9. The requested change in value is justified for the following reasons: ON 7/16/2024 REAPPRAISAL LETTER THE PREVIOUS VALUE WAS \$200,090 - THE 2024 VALUE INCREASED 64% TO \$ 327,810. I ATTENDED AN INFORMAL REVIEW ON 8/5/24 AND WAS LATELY SENT AN ADJUSTED ASSESSMENT OF 283,230 WHICH IS A 42% INCREASE IN VALUE. THIS IS UNACCEPTABLE.			

PLEASE READJUST THE VALUE TO A FAIR INCREASE AND IN LINE WITH OTHER HOUSES WITH A

10. Was property sold within the last three years? ☐ Yes ☒ No ☐ Unknown If yes, show date of sale _____ and sale price \$ _____ ; and attach information explained in "Instructions for Line 10" on back. SQUARE FOOTAGE OF 1860 ft².

11. If property was not sold but was listed for sale in the last three years, attach a copy of listing agreement or other available evidence.

12. If any improvements were completed in the last three years, show date NONE and total cost \$ _____

13. Do you intend to present the testimony or report of a professional appraiser? ☐ Yes ☒ No ☐ UnknownALSO OF THE 1860 ft² of my house, 640 ft² is below grade. Plus the last time valuations were done - I met with the board because they had the incorrect square footage of my house on record. I don't think that was ever corrected. Hence I have been over charged for years

14. If you have filed a prior complaint on this parcel since the last reappraisal or update of property values in the county, the reason for the valuation change requested must be one of those below. Please check all that apply and explain on attached sheet. See R.C. section 5715.19(A)(2) for a complete explanation.

- | | |
|--|---|
| <input type="checkbox"/> The property was sold in an arm's length transaction. | <input type="checkbox"/> The property lost value due to a casualty. |
| <input type="checkbox"/> A substantial improvement was added to the property. | <input type="checkbox"/> Occupancy change of at least 15% had a substantial economic impact on my property. |

15. If the complainant is a legislative authority and the complaint is an original complaint with respect to property not owned by the complainant, R.C. 5715.19(A)(8) requires this section to be completed.

- ☐ The complainant has complied with the requirements of R.C. section 5715.19(A)(6)(b) and (7) and provided notice prior to the adoption of the resolution required by division (A)(6)(b) of that section as required by division (A)(7) of that section.

I declare under penalties of perjury that this complaint (including any attachments) has been examined by me and to the best of my knowledge and belief is true, correct and complete.

Date 01/21/2025 Complainant or agent (printed) ERIK R MILLER Title (if agent) _____

Complainant or agent (signature) Erik R. Miller

Sworn to and signed in my presence, this _____ day of _____
(Date) (Month) (Year)

Notary _____

Clear Form

LORAIN COUNTY
BOARD OF REVISION

Tax year 2024 pay 2025

BOR no. _____

DTE 1
Rev. 12/22

County Lorain

Date received _____

Complaint Against the Valuation of Real Property

Answer all questions and type or print all information. Read instructions on back before completing form.

Attach additional pages if necessary.

This form is for full market value complaints only. All other complaints should use DTE Form 2

☒ Original complaint ☐ Counter complaint

Notices will be sent only to those named below.

	Name	Street address, City, State, ZIP code	
1. Owner of property	Brenda Maynard	32823 Redwood Blvd. Avon Lake OH 44012	
2. Complainant if not owner			
3. Complainant's agent	Jeff Strauch	193 Williamsburg Dr. Avon Lake OH 44012	
4. Telephone number and email address of contact person	Brenda 517 896 7222 maynardblee@gmail.com		
5. Complainant's relationship to property, if not owner			
If more than one parcel is included, see "Multiple Parcels" Instruction.			
6. Parcel numbers from tax bill	Address of property		
04 00 018 120 026	32823 Redwood Blvd. Avon Lake OH 44012		
7. Principal use of property	Primary Res		
8. The increase or decrease in market value sought. Counter-complaints supporting auditor's value may have -0- in Column C.			
Parcel number	Column A Complainant's Opinion of Value (Full Market Value)	Column B Current Value (Full Market Value)	Column C Change in Value
04 00 018 120 026	\$285,000	\$325,690	-\$40,690
9. The requested change in value is justified for the following reasons: Just bought for \$285k (actual market value). Which was also under the original list price of \$299,900, which seller could not secure.			

10. Was property sold within the last three years? ☒ Yes ☐ No ☐ Unknown If yes, show date of sale 8/6/24

and sale price \$ 285,000 ; and attach information explained in "Instructions for Line 10" on back.

11. If property was not sold but was listed for sale in the last three years, attach a copy of listing agreement or other available evidence.

12. If any improvements were completed in the last three years, show date _____ and total cost \$ _____

13. Do you intend to present the testimony or report of a professional appraiser? ☐ Yes ☒ No ☐ Unknown

14. If you have filed a prior complaint on this parcel since the last reappraisal or update of property values in the county, the reason for the valuation change requested must be one of those below. Please check all that apply and explain on attached sheet. See R.C. section 5715.19(A)(2) for a complete explanation.

- ☒ The property was sold in an arm's length transaction. ☐ The property lost value due to a casualty.
☐ A substantial improvement was added to the property. ☐ Occupancy change of at least 15% had a substantial economic impact on my property.

15. If the complainant is a legislative authority and the complaint is an original complaint with respect to property not owned by the complainant, R.C. 5715.19(A)(8) requires this section to be completed.

- ☐ The complainant has complied with the requirements of R.C. section 5715.19(A)(6)(b) and (7) and provided notice prior to the adoption of the resolution required by division (A)(6)(b) of that section as required by division (A)(7) of that section.

I declare under penalties of perjury that this complaint (including any attachments) has been examined by me and to the best of my knowledge and belief is true, correct and complete.

Date 2/12/25 Complainant or agent (printed) Brenda Maynard Title (if agent) _____

Complainant or agent (signature) Brenda Maynard

Sworn to and signed in my presence, this _____ day of _____
(Date) (Month) (Year)

Notary _____

LORAIN COUNTY
BOARD OF REVISION

2025 FEB 12 AM 11:40

Tax year _____ BOR no. _____

County _____ Date received _____

DTE 1
Rev. 12/22

Complaint Against the Valuation of Real Property

Answer all questions and type or print all information. Read instructions on back before completing form.

Attach additional pages if necessary.

This form is for full market value complaints only. All other complaints should use DTE Form 2

☐ Original complaint ☐ Counter complaint

Notices will be sent only to those named below.

	Name	Street address, City, State, ZIP code	
1. Owner of property	RONALD TETER	47657 US 20 OBERLIN 44074	
2. Complainant if not owner			
3. Complainant's agent			
4. Telephone number and email address of contact person 440-204-9352 SHAWN16080@YAHOO.COM			
5. Complainant's relationship to property, if not owner			
If more than one parcel is included, see "Multiple Parcels" Instruction.			
6. Parcel numbers from tax bill		Address of property	
14-00-029-000-017			
7. Principal use of property LIVE THERE			
8. The increase or decrease in market value sought. Counter-complaints supporting auditor's value may have -0- in Column C.			
Parcel number	Column A Complainant's Opinion of Value (Full Market Value)	Column B Current Value (Full Market Value)	Column C Change in Value
14-00-029-000-017	150,000	328,380	
9. The requested change in value is justified for the following reasons: THE CONDITION OF IT			

10. Was property sold within the last three years? ☐ Yes ☒ No ☐ Unknown If yes, show date of sale _____

and sale price \$ _____ ; and attach information explained in "Instructions for Line 10" on back.

11. If property was not sold but was listed for sale in the last three years, attach a copy of listing agreement or other available evidence.

12. If any improvements were completed in the last three years, show date _____ and total cost \$ _____

13. Do you intend to present the testimony or report of a professional appraiser? ☒ Yes ☐ No ☐ Unknown

14. If you have filed a prior complaint on this parcel since the last reappraisal or update of property values in the county, the reason for the valuation change requested must be one of those below. Please check all that apply and explain on attached sheet. See R.C. section 5715.19(A)(2) for a complete explanation.

- ☐ The property was sold in an arm's length transaction. ☐ The property lost value due to a casualty.
☐ A substantial improvement was added to the property. ☐ Occupancy change of at least 15% had a substantial economic impact on my property.

15. If the complainant is a legislative authority and the complaint is an original complaint with respect to property not owned by the complainant, R.C. 5715.19(A)(8) requires this section to be completed.

- ☐ The complainant has complied with the requirements of R.C. section 5715.19(A)(6)(b) and (7) and provided notice prior to the adoption of the resolution required by division (A)(6)(b) of that section as required by division (A)(7) of that section.

I declare under penalties of perjury that this complaint (including any attachments) has been examined by me and to the best of my knowledge and belief is true, correct and complete.

Date 2-12-25 Complainant or agent (printed) RONALD TETER Title (if agent) _____

Complainant or agent (signature) Ronald Teter

Sworn to and signed in my presence, this _____ day of _____
(Date) (Month) (Year)

Notary _____

Clear Form

DTE 1
Rev. 12/22

LORAIN COUNTY
BOARD OF REVISION

Tax year 2025 BOR no. _____
County LORAIN Date received _____

Complaint Against the Valuation of Real Property

Answer all questions and type or print all information. Read instructions on back before completing form.

2025 FEB 12 AM 11:29

Attach additional pages if necessary.

This form is for full market value complaints only. All other complaints should use DTE Form 2

☐ Original complaint ☐ Counter complaint

Notices will be sent only to those named below.

	Name	Street address, City, State, ZIP code	
1. Owner of property	MARK STEVENSON	627 LAKESIDE Ave, Lorain OHIO 44052	
2. Complainant if not owner			
3. Complainant's agent			
4. Telephone number and email address of contact person 440-864-7651 LAKESIDE STEVENSON @ GMAIL.COM			
5. Complainant's relationship to property, if not owner			
If more than one parcel is included, see "Multiple Parcels" Instruction.			
6. Parcel numbers from tax bill		Address of property	
06-24-026-110-028		231 SPRUCE ST, ELYRIA OHIO 44035	
7. Principal use of property Residential Dwelling			
8. The increase or decrease in market value sought. Counter-complaints supporting auditor's value may have -0- in Column C.			
Parcel number	Column A Complainant's Opinion of Value (Full Market Value)	Column B Current Value (Full Market Value)	Column C Change in Value
06-24-026-110-028	\$30,000-	\$123,030	93,030
9. The requested change in value is justified for the following reasons: Property WAS Purchased AT Sheriff SALE FOR \$18,500 on 2-8-23 Home HAS NO Heat system, NO Kitchen, 2 Exterior Blg THAT Need Removed, Home Need 100% Remodeled and is Poor Condition			

10. Was property sold within the last three years? ☒ Yes ☐ No ☐ Unknown If yes, show date of sale 2-8-23
and sale price \$ 18,500 ; and attach information explained in "Instructions for Line 10" on back.

11. If property was not sold but was listed for sale in the last three years, attach a copy of listing agreement or other available evidence.

12. If any improvements were completed in the last three years, show date 6/24/2024 and total cost \$ 11,020⁰⁰
New Roof

13. Do you intend to present the testimony or report of a professional appraiser? ☐ Yes ☒ No ☐ Unknown

14. If you have filed a prior complaint on this parcel since the last reappraisal or update of property values in the county, the reason for the valuation change requested must be one of those below. Please check all that apply and explain on attached sheet. See R.C. section 5715.19(A)(2) for a complete explanation.

- ☒ The property was sold in an arm's length transaction. ☐ The property lost value due to a casualty.
☐ A substantial improvement was added to the property. ☐ Occupancy change of at least 15% had a substantial economic impact on my property.

15. If the complainant is a legislative authority and the complaint is an original complaint with respect to property not owned by the complainant, R.C. 5715.19(A)(8) requires this section to be completed.

- ☐ The complainant has complied with the requirements of R.C. section 5715.19(A)(6)(b) and (7) and provided notice prior to the adoption of the resolution required by division (A)(6)(b) of that section as required by division (A)(7) of that section.

I declare under penalties of perjury that this complaint (including any attachments) has been examined by me and to the best of my knowledge and belief is true, correct and complete.

Date 2/12/2025 Complainant or agent (printed) MARK STEVENSON Title (if agent) owner

Complainant or agent (signature) _____

Sworn to and signed in my presence, this 12th day of February 2025
(Date) (Month) (Year)

Notary _____

Deborah McCartney



DEBORAH McCARTNEY
Notary Public State of Ohio
My Commission Expires
11-5-27

Clear Form

Tax year 2025 BOR no. _____
 County LORAIN Date received _____

DTE 1
 Rev. 12/22

LORAIN COUNTY
 BOARD OF REVISION

2025 FEB 12 AM 11:29

Complaint Against the Valuation of Real Property

Answer all questions and type or print all information. Read instructions on back before completing form.

Attach additional pages if necessary.

This form is for full market value complaints only. All other complaints should use DTE Form 2

☐ Original complaint ☐ Counter complaint

Notices will be sent only to those named below.

	Name	Street address, City, State, ZIP code	
1. Owner of property	MARK STEVENSON	627 LAKESIDE AVE Lorain Ohio	
2. Complainant if not owner	N/A	44035	
3. Complainant's agent	MA		
4. Telephone number and email address of contact person 440-864-7651 LAKE SIDE STEVENSON@G.mail.com			
5. Complainant's relationship to property, if not owner			
If more than one parcel is included, see "Multiple Parcels" Instruction.			
6. Parcel numbers from tax bill		Address of property	
06-21-005-105-036			
7. Principal use of property			
8. The increase or decrease in market value sought. Counter-complaints supporting auditor's value may have -0- in Column C.			
Parcel number	Column A Complainant's Opinion of Value (Full Market Value)	Column B Current Value (Full Market Value)	Column C Change in Value
06-21-005-105-036	\$2,000	30,040	28,040
9. The requested change in value is justified for the following reasons: This is a Non-Buildable piece of Land. to small too small for a septic system and no city sewers.			

10. Was property sold within the last three years? ☐ Yes ☒ No ☐ Unknown If yes, show date of sale _____

and sale price \$ _____ ; and attach information explained in "Instructions for Line 10" on back.

11. If property was not sold but was listed for sale in the last three years, attach a copy of listing agreement or other available evidence.

12. If any improvements were completed in the last three years, show date 2 and total cost \$ 2

13. Do you intend to present the testimony or report of a professional appraiser? ☐ Yes ☒ No ☐ Unknown

14. If you have filed a prior complaint on this parcel since the last reappraisal or update of property values in the county, the reason for the valuation change requested must be one of those below. Please check all that apply and explain on attached sheet. See R.C. section 5715.19(A)(2) for a complete explanation.

☐ The property was sold in an arm's length transaction.

☐ The property lost value due to a casualty.

☒ A substantial improvement was added to the property.

☐ Occupancy change of at least 15% had a substantial economic impact on my property.

By you?

15. If the complainant is a legislative authority and the complaint is an original complaint with respect to property not owned by the complainant, R.C. 5715.19(A)(8) requires this section to be completed.

☐ The complainant has complied with the requirements of R.C. section 5715.19(A)(6)(b) and (7) and provided notice prior to the adoption of the resolution required by division (A)(6)(b) of that section as required by division (A)(7) of that section.

I declare under penalties of perjury that this complaint (including any attachments) has been examined by me and to the best of my knowledge and belief is true, correct and complete.

Date 2/12/2025 Complainant or agent (printed) MARK STEVENSON Title (if agent) owner

Complainant or agent (signature) [Signature]

Sworn to and signed in my presence, this 12th day of February 2025
(Date) (Month) (Year)

Notary Deborah McCartney



DEBORAH MCCARTNEY
Notary Public State of Ohio
My Commission Expires
11-5-27

Clear Form

DTE 1
Rev. 12/22Tax year 2024 BOR no. _____LORAIN COUNTY
BOARD OF REVISIONCounty LORAIN Date received _____**Complaint Against the Valuation of Real Property**

Answer all questions and type or print all information. Read instructions on back before completing form.

2025 FEB 12 AM 11:13

Attach additional pages if necessary.

This form is for full market value complaints only. All other complaints should use DTE Form 2

☒ Original complaint ☐ Counter complaint
Notices will be sent only to those named below.

	Name	Street address, City, State, ZIP code	
1. Owner of property	BLAZ John Mary	42570 Adelbert St Ely, O	
2. Complainant if not owner			
3. Complainant's agent			
4. Telephone number and email address of contact person 440 324 7482			
5. Complainant's relationship to property, if not owner			
If more than one parcel is included, see "Multiple Parcels" Instruction.			
6. Parcel numbers from tax bill		Address of property	
06-24-044-102-017		42570 Adelbert St Ely, O 44035	
7. Principal use of property <u>SELF</u>			
8. The increase or decrease in market value sought. Counter-complaints supporting auditor's value may have -0- in Column C.			
Parcel number	Column A Complainant's Opinion of Value (Full Market Value)	Column B Current Value (Full Market Value)	Column C Change in Value
06 24 044 102 017	275,000 - 315,000	384,790	
9. The requested change in value is justified for the following reasons: <u>The Assessed VALUE is higher than comparable properties</u> <u>Ex: 06-24-044-102-010</u>			

10. Was property sold within the last three years? ☐ Yes ☒ No ☐ Unknown If yes, show date of sale _____
and sale price \$ _____; and attach information explained in "Instructions for Line 10" on back.

11. If property was not sold but was listed for sale in the last three years, attach a copy of listing agreement or other available evidence.

12. If any improvements were completed in the last three years, show date Ø and total cost \$ Ø.13. Do you intend to present the testimony or report of a professional appraiser? ☒ Yes ☐ No ☐ Unknown

NO
14. If you have filed a prior complaint on this parcel since the last reappraisal or update of property values in the county, the reason for the valuation change requested must be one of those below. Please check all that apply and explain on attached sheet. See R.C. section 5715.19(A)(2) for a complete explanation.

- ☐ The property was sold in an arm's length transaction. ☐ The property lost value due to a casualty.
☐ A substantial improvement was added to the property. ☐ Occupancy change of at least 15% had a substantial economic impact on my property.

NO
15. If the complainant is a legislative authority and the complaint is an original complaint with respect to property not owned by the complainant, R.C. 5715.19(A)(8) requires this section to be completed.

- ☐ The complainant has complied with the requirements of R.C. section 5715.19(A)(6)(b) and (7) and provided notice prior to the adoption of the resolution required by division (A)(6)(b) of that section as required by division (A)(7) of that section.

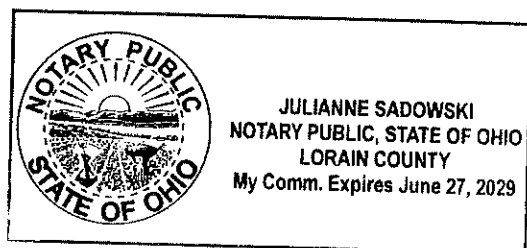
I declare under penalties of perjury that this complaint (including any attachments) has been examined by me and to the best of my knowledge and belief is true, correct and complete.

Date 2-11-25 Complainant or agent (printed) JOHN M BLAZ Title (if agent) _____

Complainant or agent (signature) John M Blaz

Sworn to and signed in my presence, this 11th day of Feb 2025
(Date) (Month) (Year)

Notary Julianne Sadowski



Clear Form

DTE 1
Rev. 12/22Tax year 2024 BOR no. _____
County Lorain Date received _____LORAIN COUNTY
BOARD OF REVISION**Complaint Against the Valuation of Real Property**

Answer all questions and type or print all information. Read instructions on back before completing form.

2025 FEB 12 AM 9:04

Attach additional pages if necessary.

This form is for full market value complaints only. All other complaints should use DTE Form 2

☒ Original complaint ☐ Counter complaint

Notices will be sent only to those named below.

	Name	Street address, City, State, ZIP code	
1. Owner of property	Brian M & Paula M Clark	4935 Arbor Ave., Shef. Vlg., Ohio 44054	
2. Complainant if not owner			
3. Complainant's agent			
4. Telephone number and email address of contact person 440-522-3687 paulaclark740@gmail.com			
5. Complainant's relationship to property, if not owner			
If more than one parcel is included, see "Multiple Parcels" Instruction.			
6. Parcel numbers from tax bill	Address of property		
03-00-071-105-002	Arbor Ave		
03-00-071-105-006	Walnut Ave		
03-00-071-105-005	Walnut Ave		
7. Principal use of property First two parcels vacant/unimproved/unbuildable land/ third parcel backyard with 2 barns.			
8. The increase or decrease in market value sought. Counter-complaints supporting auditor's value may have -0- in Column C.			
Parcel number	Column A Complainant's Opinion of Value (Full Market Value)	Column B Current Value (Full Market Value)	Column C Change in Value
03-00-071-105-002	4090.00	56470.00	52380.00
03-00-071-105-006	4090.00	56470.00	52380.00
03-00-071-105-005	37730.00	90110.00	52380.00
9. The requested change in value is justified for the following reasons: 2 of 3 of the questionable parcels are vacant,unbuildable,unapproved properties exactly like other surrounding them. The last one does has two older barns on them in our backyard. There are roads indicating access on the maps, but the roads are either nonexistent or cut short as I have indicated on the attached map. All the other similair lots surrounding these have a land appraisal listed between \$3770 - \$4090. These three should be no different.			

10. Was property sold within the last three years? ☐ Yes ☒ No ☐ Unknown If yes, show date of sale _____

and sale price \$ _____ ; and attach information explained in "Instructions for Line 10" on back.

11. If property was not sold but was listed for sale in the last three years, attach a copy of listing agreement or other available evidence.

12. If any improvements were completed in the last three years, show date _____ and total cost \$ _____

13. Do you intend to present the testimony or report of a professional appraiser? ☐ Yes ☒ No ☐ Unknown

14. If you have filed a prior complaint on this parcel since the last reappraisal or update of property values in the county, the reason for the valuation change requested must be one of those below. Please check all that apply and explain on attached sheet. See R.C. section 5715.19(A)(2) for a complete explanation.

- ☐ The property was sold in an arm's length transaction. ☐ The property lost value due to a casualty.
☐ A substantial improvement was added to the property. ☐ Occupancy change of at least 15% had a substantial economic impact on my property.

15. If the complainant is a legislative authority and the complaint is an original complaint with respect to property not owned by the complainant, R.C. 5715.19(A)(8) requires this section to be completed.

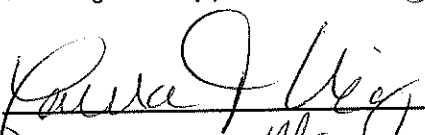
- ☐ The complainant has complied with the requirements of R.C. section 5715.19(A)(6)(b) and (7) and provided notice prior to the adoption of the resolution required by division (A)(6)(b) of that section as required by division (A)(7) of that section.

I declare under penalties of perjury that this complaint (including any attachments) has been examined by me and to the best of my knowledge and belief is true, correct and complete.

Date 02/10/2025 Complainant or agent (printed) Brian & Paula Clark Title (if agent) _____

Complainant or agent (signature) 

Sworn to and signed in my presence, this, 14 day of February, 2025
(Date) (Month) (Year)

Notary 
exp. May 30, 2028

Clear Form

LORAIN COUNTY
BOARD OF REVISION

DTE 1
Rev. 12/22

Tax year _____ BOR no. _____
County _____ Date received _____

Complaint Against the Valuation of Real Property

2025 FEB 12 AM 9:57
Answer all questions and type or print all information. Read instructions on back before completing form.

Attach additional pages if necessary.

This form is for full market value complaints only. All other complaints should use DTE Form 2

☒ Original complaint ☐ Counter complaint

Notices will be sent only to those named below.

	Name	Street address, City, State, ZIP code	
1. Owner of property	Frank Szollosy	47431 Garfield Rd Oberlin, OH 44074	
2. Complainant if not owner			
3. Complainant's agent			
4. Telephone number and email address of contact person 419 776 7858 / 440 308 6038 Baby doc @ Centurytel .net			
5. Complainant's relationship to property, if not owner			
If more than one parcel is included, see "Multiple Parcels" Instruction.			
6. Parcel numbers from tax bill	Address of property		
05-00-058-000-236	724 Trails End Dr Amherst OH 44001		
09-00-053-000-029	47431 Garfield Rd Oberlin, OH 44074		
7. Principal use of property			
8. The increase or decrease in market value sought. Counter-complaints supporting auditor's value may have -0- in Column C.			
Parcel number	Column A Complainant's Opinion of Value (Full Market Value)	Column B Current Value (Full Market Value)	Column C Change in Value
05-00-058-000-236	\$ 280,000.00	\$ 354,080.00	\$ 74,080.00
09-00-053-000-029	\$ 497,500.00	\$ 651,010.00	\$ 153,510.00
9. The requested change in value is justified for the following reasons: The 2024 Tax year value as proposed by the county auditor are too high compared to the full market value. Both properties were appraised for their current value. (A change of 57% + 22% respectively.)			

10. Was property sold within the last three years? ☐ Yes ☒ No ☐ Unknown If yes, show date of sale _____
and sale price \$ _____ ; and attach information explained in "Instructions for Line 10" on back.

11. If property was not sold but was listed for sale in the last three years, attach a copy of listing agreement or other available evidence.
N/A

12. If any improvements were completed in the last three years, show date Sep 2022 and total cost \$ 19,000
New ROOF

13. Do you intend to present the testimony or report of a professional appraiser? ☒ Yes ☐ No ☐ Unknown

14. If you have filed a prior complaint on this parcel since the last reappraisal or update of property values in the county, the reason for the valuation change requested must be one of those below. Please check all that apply and explain on attached sheet. See R.C. section 5715.19(A)(2) for a complete explanation. N/A

- ☐ The property was sold in an arm's length transaction. ☐ The property lost value due to a casualty.
- ☐ A substantial improvement was added to the property. ☐ Occupancy change of at least 15% had a substantial economic impact on my property.

15. If the complainant is a legislative authority and the complaint is an original complaint with respect to property not owned by the complainant, R.C. 5715.19(A)(8) requires this section to be completed.

- ☐ The complainant has complied with the requirements of R.C. section 5715.19(A)(6)(b) and (7) and provided notice prior to the adoption of the resolution required by division (A)(6)(b) of that section as required by division (A)(7) of that section.

I declare under penalties of perjury that this complaint (including any attachments) has been examined by me and to the best of my knowledge and belief is true, correct and complete.

Date 02-10-2025 Complainant or agent (printed) FRANK F. SZOLLOSY Title (if agent) _____

Complainant or agent (signature) [Signature]

Sworn to and signed in my presence, this 10th day of February 2025
(Date) (Month) (Year)

Notary Melanie Prosser



