| | | 0004 | | | | | DTE 1 |
|--|---------------------|--|---------------------------------------|--------------------------------------|---|-------------------------|-------------------|
| LARA | N COU | Tax year 2024 | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | _ BC | OR no | | Rev. 12/22 |
| BOARD | OF RE | V Scounty Lorain | | _ Da | te received | | |
| Answer all gue | Comp eqtionspa | Dlaint Against nd type er print all in Attach ad Il market value comp | formation. Read ditional pages i | l instr f nece other | complaints should use | completing form. | |
| | ** | | sent only to tho | | | * * | |
| | | Na | me | | Street address, | City, State, ZIP co | de |
| 1. Owner of property | | Elena V | Grigore | | 49158 US Highway | 20, Oberlin, Ohio | 44074 |
| 2. Complainant if not own | er | N | IA | | | | |
| 3. Complainant's agent | | N | IA | | | | |
| 4. Telephone number and | email ad | dress of contact perso | n 440-453-520 evgrigore@g | | com | | |
| 5. Complainant's relations | ship to pro | operty, if not owner | NA | | | | |
| | If mo | re than one parcel is | included, see " | Multip | le Parcels" Instruction. | | |
| 6. Parcel numbers from ta | x bill | | () | | Address of property | Gr. | |
| 07000 | 071200 | 01 | THE | THERESA ST NORTH RIDGEVILLE OH 44039 | | | |
| 07000 | 071200 | 02 | THERESA ST NORTH RIDGEVILLE OH 44039 | | | | |
| See Attached | for more | e parcels | See Attached for more parcels | | | | |
| 7. Principal use of propert | y 500 - | RESIDENTIAL VAC | ANT LAND | | • | | |
| 8. The increase or decreas | se in marl | ket value sought. Coun | ter-complaints su | pportii | ng auditor's value may hav | ve -0- in Column C. | |
| Parcel number | Co | Column A omplainant's Opinion (Full Market Valu | | (| Column B Current Value Full Market Value) | Column (Change in V | =: |
| 0700007120001 | | \$490.00 | | | \$4300.00 | -\$3,810.0 | 10 |
| 0700007120002 | | \$490.00 | | | \$4300.00 | -\$3,810.0 | 10 |
| See Attached | | See Attached | | 19 | See Attached | See Attach | ned |
| The requested change Adjacent parcels values parcels have structures justifiable. Value shown | increas to appre | ed by 40% on the we eciate. This land has | est side and 35 been and rem | ains v | acant and an increase | in value of 1228 | those % is not |
| 10. Was property sold with | nin the las | st three years? | s 🛭 No 🗌 U | Inknov | vn If yes, show date of sa | ale_NA | |
| and sale price \$ 0.00 | | ; and attach infor | rmation explained | d in "In | structions for Line 10" on | back. | |
| 11. If property was not sold | but was I | isted for sale in the last | three years, attac | h a co | py of listing agreement or o | other available evide | ence. |
| 12. If any improvements w | ere comp | oleted in the last three | years, show date | NA NA | and total | al cost \$ | |

13. Do you intend to present the testimony or report of a professional appraiser?

Yes No Unknown

| | reappraisal or update of property values in the county, the reason Please check all that apply and explain on attached sheet. See R.C. |
|--|--|
| ☐ 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 complainant, R.C. 5715.19(A)(8) requires this section to be comp | is an original complaint with respect to property not owned by the leted. |
| ☐ The complainant has complied with the requirements of R adoption of the resolution required by division (A)(6)(b) of | .C. section 5715.19(A)(6)(b) and (7) and provided notice prior to the that section as required by division (A)(7) of that section. |
| | |
| I declare under penalties of perjury that this complaint (including knowledge and belief is true, correct and complete. | any attachments) has been examined by me and to the best of my |
| | |
| DateComplainant or agent (printed) | ena V. Grigore _{Title (if agent)} Owner |
| Complainant or agent (signature) <u>Clema ()</u> | igne |
| Sworn to and signed in my presence, this(Date) | day of February 2025 (Month) (Year) |
| Notary | |
| JENNIFER M. DECORTE NOTARY PUBLIC STATE OF OHIO Recorded in Lorain County My Comm. Exp. 10/8/20 | |



| | | Tax year | | ВО | R no | Rev. 12/22 |
|---|-------------------------|---|--|------------|---|--|
| · OOAIM | col | County | | Dat | e received | and a second second second second second |
| DOADDA | CDE | WIELD A acinct | ho Valuati | nn | ot Real Proberty | |
| | | I to a an invited all inte | AMORION KOSO I | nstru | ICHOUS OH DACK DEIVICE OF | in stating terms |
| 2025 FEB .L | tor ful | Market value comple | aints only. All of | her | complaints should use D | ΓE Form 2 |
| 11113 101111 13 | 101 101 | l Original co | omplaint | unter | Complaint | |
| | | Notices will be | | Tian | Street address, C | ity, State, ZIP code |
| | | 5.1 to | 11, 10 | _ | 310 B. Hermort IA | ine Amherst, DH 44001 |
| Owner of property | | Delmonico, Fe | eter + Linoxa | ٠٠ | JAO DUITETMETO 20 | site Alleria |
| 2. Complainant if not owner | | | | | | |
| 3. Complainant's agent | | | | - | | |
| 4. Telephone number and en | mail ad | Idress of contact person | n | | | |
| 440-985-7115, 4 | 40-5 | 541-6679 de | 137@oh.n | r.c | om | |
| 5. Complainant's relationshi | p to pr | operty, if not owner | | | | |
| | lf mo | ore than one parcel is | included, see "N | /lultip | ole Parcels" Instruction. | |
| 6. Parcel numbers from tax | bill | | | | Address of property | |
| 05-00-026-719- | | | 320 Butterm | ere | Lane Amherst, O | H 44001 |
| 05-00 020 NT | | | | | | |
| | | | | | | |
| | Rec | idenat. | | | | |
| 7. Principal use of property 8. The increase or decrease | 1105 | Tache County | tor complaints su | nnort | ing auditor's value may hav | e -0- in Column C. |
| 8. The increase or decrease | in ma | | iter-complaints so | pport | | Column C |
| | | Column A | o of Value | | Column B Current Value | Change in Value |
| Parcel number | C | omplainant's Opinion (Full Market Val | ue) | | (Full Market Value) | |
| | | | | - 7 | 10 GOD (2621 10/10) | 113,550 |
| 05-026-719-005 | 157 | ,440 (2023 Val | ue) | 21 | 0,990 (2024 value) | 115,500 |
| | | | | | | |
| | | | · · · · · · · · · · · · · · · · · · · | | | |
| 9. The requested change in | n value | is justified for the follow size + tax bric | e for identi | cal | unit (321) in Eng | lish Lakes is not ted as having my 2,171 sq. ft. unit! price, |
| uniform. Another | ex- | - 3 story 145 A | Ambleside C | light | the higher than r | ny 2,171 sq. Ft. unit! |
| 3,366 59 Ft. Yet | Faolis | sh Lokes condos | should ret | -leci | t the exact tax | price, |
| | | | | | | |
| 10. Was property sold with | nin the | last three years? 🔲 Y | 'es 🛮 No 📋 l | Jnkn | own If yes, show date of s | are |
| and sale price \$ | | ; and attach inf | ormation explaine | d in ' | 'Instructions for Line 10" or | n back. |
| 11. If property was not sold | but wa | s listed for sale in the la | st three years, atta | ich a | copy of listing agreement or | other available evidence. |
| | | | | | Vone and to | |
| 13. Do you Intend to prese Appraisal sen no additions | ent the 1+ + 5 or | testimony or report of a to Lorain Count changes ma | a professional app y Auditor de to pro | Mai Per | er? □ Yes □ No ☑ U rk R. Stewart ID ty, | nknown 24/12 and |

And the second of the second o

| | Please check all that apply and explain on attached sheet. See R.C. |
|---|--|
| ☐ 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 complainant, R.C. 5715.19(A)(8) requires this section to be comp | |
| ☐ The complainant has complied with the requirements of R adoption of the resolution required by division (A)(6)(b) of | .C. section 5715.19(A)(6)(b) and (7) and provided notice prior to the that section as required by division (A)(7) of that section. |
| I declare under penalties of perjury that this complaint (including a knowledge and belief is true, correct and complete. | any attachments) has been examined by me and to the best of my |
| Date 2/11/25 Complainant or agent (printed) Lir | nd a J. DelMonjo Title (if agent) |
| Complainant or agent (signature) Les de J. Gel M. | Unico |
| Sworn to and signed in my presence, this 2 11 25 (Date) | day of REDITION SCOT |
| | RAQUEL CARABALLO Notary Public State of Ohio My Comm. Expires |

| | • | | | |
|--|---|--|--|---|
| | | | | |
| | | | | |
| | | | | |
| | | | | • |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

| | | Tourse | | D.C | ND no | | DTE 1 Rev. 12/22 |
|--|------------|-----------------------------|--------------------------------------|--------|----------------------------|--------------------|---------------------|
| LORAINC | COUNT | Tax year | | _ BC | DR no | | Rev. 12/22 |
| COADII III- | HF WI. | IUII | the Velueti | _ Da | te received | | |
| | | | | | | | |
| 2025 FEB 14 | PM 2 | Attach ad | ditional pages if | nece | uctions on back before o | | |
| This form | is for fu | ii market value comp | laints only. All o complaint 🔲 Co | tner | compiaints should use i | DIE Form 2 | |
| | | Notices will be | sent only to those | e nan | ned below. | | |
| | | Na | | | Street address, | | |
| 1. Owner of property | | Danny L. Perkin | s ar Janice | Α | 34413 Puth Dr. | Avon OH | 44011 |
| 2. Complainant if not own | er | | | | | | |
| 3. Complainant's agent | | | ħ | | | | |
| 4. Telephone number and | email ac | ldress of contact perso | n 440-670- | .421 | 3 | | |
| | | | TPISMO | NTO | 38AOL.com | | |
| 5. Complainant's relations | hip to pr | operty, if not owner | | | T | | |
| | If mo | re than one parcel is | included, see "l | Multip | ole Parcels" Instruction. | | |
| 6. Parcel numbers from ta | ıx bill | 14 | | | Address of property | | |
| 04-00-02 | 3-105 | 5-108 | 34413 Puth Dr., Avon OH 44011 | | | | |
| | | | | | | | |
| | | | | | | | 2 |
| 7. Principal use of propert | y P | Lesidence | | | | | |
| 8. The increase or decreas | se in mar | ket value sought. Coun | iter-complaints su | pporti | ng auditor's value may ha | ve -0- in Column (|) . |
| | | Column A | | | Column B | Column | C |
| Parcel number | C | omplainant's Opinior | | | Current Value | Change in | |
| 7 | - î | (Full Market Val | ue) | (| Full Market Value) | 15 | |
| 04-00-023-105-108 | | 1500 | | | 14,490 | -12,99 | Ď. |
| - , | | t) | | | | | |
| | | 6 | | | | | |
| 9. The requested change This . It piece of very much a mar surrounding naish | in value | is justified for the follow | ving reasons: | th 41 | ne purchase of the | house. The la | nd is |
| This . To piece of | sh mo | st of the year, | the land is | שי ב | ideveloped and land | word out th | e |
| surrounding neight | sors. T | neland is not | - actualished | L T | he property cannot a | even grow gr | ass, |
| surrounding neight current assessment | that | The Cooping This | S COTOUN SIVE | ٠, ١ | | | |
| 10. Was property sold with | hin the la | st three years? 🗌 Ye | es 🛮 No 🗌 U | nknov | wn If yes, show date of sa | ale | |

| and sale price \$ | $_$; and attach information explained in "Instructions for Li | ne 10" on back. |
|--|--|------------------------------------|
| 11. If property was not sold but was liste | ed for sale in the last three years, attach a copy of listing agre | ement or other available evidence. |
| 12. If any improvements were complete | ted in the last three years, show date | and total cost \$ |
| 13. Do you intend to present the testim | nony or report of a professional appraiser? Yes N | o 🗍 Unknown |

| | Please check all that apply and explain on attached sheet. See R.C. |
|--|--|
| ☐ 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 complainant, R.C. 5715.19(A)(8) requires this section to be comp | |
| ☐ The complainant has complied with the requirements of R adoption of the resolution required by division (A)(6)(b) of | .C. section 5715.19(A)(6)(b) and (7) and provided notice prior to the that section as required by division (A)(7) of that section. |
| I declare under penalties of perjury that this complaint (including a knowledge and belief is true, correct and complete. | any attachments) has been examined by me and to the best of my |
| Date 2-14-25 Complainant or agent (printed) To | NCE A. Perkins Title (if agent) |
| Complainant or agent (signature) Acrice a Por | <u>oins</u> |
| Sworn to and signed in my presence, this | day of February 235 (Year) |
| Notary | CLAYTON CUNNINGHAM Notary Public State of Ohio My Comm. Expires April 23, 2028 |

Tax year_

BOR no. ___

| 201111 | COUNTY County | | Date received | |
|---|--|--------------------------------------|--|---|
| Answer all ques | is for full market value com pl ☐ Original c | formation. Read | instructions on back before on necessary. ther complaints should use bounter complaint | completing form. |
| | Na | me | Street address, | City, State, ZIP code |
| Owner of property | Joshua | Jacob | 5411 Lee Ann D | r, Orlando FL 32808 |
| 2. Complainant if not owner | er | | | |
| 3. Complainant's agent | | | | |
| 4. Telephone number and | email address of contact perso | _n 415-806-3419 | 9 | |
| 5. Complainant's relations | hip to property, if not owner | | | |
| | If more than one parcel is | included, see "l | Multiple Parcels" Instruction. | |
| 6. Parcel numbers from ta | x bill | | Address of property | |
| 06240 | 02000046 | 10 | 64 BRUNSWICK DR ELYRI | A OH 44035 |
| | | | | |
| | | | | |
| 7. Principal use of propert | y long term rental | | | |
| | se in market value sought. Cour | ter-complaints su | pporting auditor's value may ha | ve -0- in Column C. |
| Parcel number | Column A Complainant's Opinior (Full Market Val | | Column B Current Value (Full Market Value) | Column C Change in Value |
| 0624002000046 | 110,000 | | 235,270 | 125,270 |
| | | | | |
| | | | | |
| I bought it less than a yeassesment pages as 77 | in value is justified for the follow ear ago for \$100,000 with 10 5,500. 2023 FMV was \$122,6 on for the FMV to have incre |)k in fees. Previ 640 when I boug | ght it, and nearby similar pro | d on the property perties are largely in the |
| 10. Was property sold with and sale price \$ | hin the last three years? 📝 Yo | es | Inknown If yes, show date of s | ale <u>4/4/2024</u> n back. |
| | I but was listed for sale in the las | | | |
| 12. If any improvements v | vere completed in the last three | e years, show date | e and to | tal cost \$ |
| 13. Do you intend to pres | ent the testimony or report of a | professional app | raiser? 🗌 Yes 🔳 No 📗 U | nknown |

in the contraction of the contra

| 14. If you have filed a prior complaint on this parcel since the last for the valuation change requested must be one of those below. F section 5715.19(A)(2) for a complete explanation. | reappraisal or update of lease check all that ap | of property values in the county, the ply and explain on attached sheet. | reason See R.C. |
|--|---|---|--------------------|
| The property was sold in an arm's length transaction. | ☐ The property lost v | ralue due to a casualty. | |
| ☐ A substantial improvement was added to the property. | Occupancy change economic impact on n | e of at least 15% had a substantial ny property. | |
| 15. If the complainant is a legislative authority and the complaint i complainant, R.C. 5715.19(A)(8) requires this section to be comp | s an original complaint leted. | with respect to property not owned | by the |
| The complainant has complied with the requirements of R adoption of the resolution required by division (A)(6)(b) of | .C. section 5715.19(A)(that section as required | (6)(b) and (7) and provided notice p d by division (A)(7) of that section. | rior to the |
| I declare under penalties of perjury that this complaint (including a knowledge and belief is true, correct and complete. | any attachments) has b | een examined by me and to the be | st of my |
| DateComplainant or agent (printed) | shua Jacob | _Title (if agent) | |
| Complainant or agent (signature) | | | |
| Sworn to and signed in my presence, this(Date) | day of | (Month) (| Year) |
| Notary | | | |

| | Tax year 20 | 24 | BOR no | DTE 1 Rev. 12/22 | | | |
|--|--|----------------------|--|-----------------------------|--|--|--|
| LORAIN COU | County | | | | | | |
| BOARD OF CO | Answer all questions and type or print all information. Read instructions on back before completing form. Attach additional pages if necessary. Attach additional pages if necessary. 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 | | | | | | |
| | | ame | | City, State, ZIP code | | | |
| 1. Owner of property | Kts Invest | ment Inc | Pro.Bax 1825 | 25 Shelby tup Mi | | | |
| 2. Complainant if not owner | | | | 48318 | | | |
| 3. Complainant's agent | | | | | | | |
| 4. Telephone number and ema | il address of contact pers | on 244 / S | Stevegrash | rold Yahoo-(om | | | |
| 5. Complainant's relationship t | 1 1 7 | | | | | | |
| l: | f more than one parcel i | s included, see "M | ultiple Parcels" Instruction. | | | | |
| 6. Parcel numbers from tax bill | | | Address of property | | | | |
| 09-00-096-103-044 2915. Mainst oberlin oH 44074 | | | | | | | |
| | 1. 1.2 | 1 | | | | | |
| 7. Principal use of property | Commercia | 1 | , | | | | |
| 8. The increase or decrease in | market value sought. Cou | ınter-complaints sup | porting auditor's value may ha | ve -0- in Column C. | | | |
| Parcel number | Column A Complainant's Opinio (Full Market Va | on of Value | Column B Current Value (Full Market Value) | Column C Change in Value | | | |
| 09-00-096-103- | 1,760.00 | O | 1,700,000 | 0 | | | |
| 044 | | | | | | | |
| | | | | | | | |
| 9. The requested change in value is justified for the following reasons: Pecrease as value has not increased to level stated. | | | | | | | |
| | | | MACHINE THE STREET | Vennez | | | |
| 10. Was property sold within the | ne last three years? | Yes No Un | known If yes, show date of sa | ale $4 - 5 - 22$ | | | |
| and sale price \$ 1 () o | γονουν; and attach in | tormation explained | in "Instructions for Line 10" or | i Dack. | | | |
| 11. If property was not sold but | | | | | | | |
| 12. If any improvements were | completed in the last three | ee years, show date | None and tot | ral cost \$ | | | |
| 13. Do you intend to present to | he testimony or report of | a professional appra | niser? D Yes □ No □ U | nknown | | | |

| 14. If you have filed a prior complaint on this parcel since the last for the valuation change requested must be one of those below. F section 5715.19(A)(2) for a complete explanation. | reappraisal or up Please check all th | date of property values in the nat apply and explain on attac | county, the reason hed sheet. See R.C. |
|--|--|--|---|
| ☐ 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 c economic impac | hange of at least 15% had a t on my property. | substantial |
| 15. If the complainant is a legislative authority and the complaint is complainant, R.C. 5715.19(A)(8) requires this section to be complained. | s an original comp leted. | plaint with respect to property | not owned by the |
| The complainant has complied with the requirements of R. adoption of the resolution required by division (A)(6)(b) of the complainant has complied with the requirements of R. | C. section 5715.1 that section as rec | 9(A)(6)(b) and (7) and provid uired by division (A)(7) of tha | ed notice prior to the at section. |
| I declare under penalties of perjury that this complaint (including a knowledge and belief is true, correct and complete. | iny attachments) h | nas been examined by me an | d to the best of my |
| Date 1-3-2025 Complainant or agent (printed) | MEZ Ra | S f Jitle (if agent) <u>U</u> w | ner, preside |
| Complainant or agent (signature) | | | |
| Sworn to and signed in my presence, this | day of | february (Month) | 2025 |
| Notary_ Merille Mf | | (install) | (Teal) |
| Neville Nofar NOTARY PUBLIC - STATE OF MICHIGAN COUNTY OF Macomb My Commission Expires January 30, 2030 Acting in the County of Micomb | | | |

| | | Tax vear | | ВС | DR no. | | DTE 1 Rev. 12/22 |
|---|---|--|--------------------|---|-----------------------------|-----------------------|---------------------|
| LORAIN | COUN | County | | - Da | te received | | |
| 2025 FEB 14 | Answer all questions and type or print all information. Read instructions on back before completing form. 2025 FEB 4 PM 2: 33 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. | | | | | | |
| | | Na | | | | City, State, ZIP co | de |
| 1. Owner of property | | Dale Dye | | | 3051 ridge lan | d St. Lorein | 0444055 |
| 2. Complainant if not owner | er | | | | | | |
| 3. Complainant's agent | | | | | | | |
| 4. Telephone number and 440 258 60 | email ac | Idress of contact perso | n чеФФ7 (| e a | ol.com | | |
| 5. Complainant's relations | hip to pr | operty, if not owner | | | | | |
| | If mo | re than one parcel is | included, see "l | Vlultip | le Parcels" Instruction. | | |
| 6. Parcel numbers from ta | x bill | | | | Address of property | | |
| 03-00-100 | 7-12 | 0-011 | ridgel | ano | 5-+- | | |
| | | | | | | | |
| | | | | | | al . | |
| 7. Principal use of property | V | acant lan | <u>d</u> | | * | | |
| 8. The increase or decreas | e in mar | ket value sought. Coun | ter-complaints su | pporti | ng auditor's value may ha | ve -0- in Column C. | |
| Parcel number | C | Column A omplainant's Opinion of Value (Full Market Value) (| | Column B Current Value Full Market Value) | Column (Change in V | | |
| 03-00-109120011 | 4 | Mangara . | \$10,980.00 | \$ | 21,980.00 | \$ 11,000 | 0.00 |
| | | | | | | | |
| | | | | | | | |
| 9. The requested change in value is justified for the following reasons: 1 Believe the raise in valve was a mistake. I have 3 vacamt parcels and they should not have raised in valve. Vet only this one parcel was raised in valve. all the other vacant parcels in my area DiD noth was raised in valve. all the other vacant parcels in my area DiD noth gove that much in valve. There has Been no improvements, structure. Or buildings Done on this Parcel. It is Just Vacant property. 10. Was property sold within the last three years? Yes No Unknown If yes, show date of sale. | | | | | | | |
| and sale price \$ | | ; and attach info | rmation explained | d in "Ir | nstructions for Line 10" or | back. | |
| 11. If property was not sold | but was | listed for sale in the last | three years, attac | ch a co | opy of listing agreement or | other available evide | ence. |
| 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

No

Unknown

| | reappraisal or update of property values in the county, the reason Please check all that apply and explain on attached sheet. See R.C. |
|--|--|
| 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 i complainant, R.C. 5715.19(A)(8) requires this section to be comp | |
| ☐ The complainant has complied with the requirements of Radoption of the resolution required by division (A)(6)(b) of | C. section 5715.19(A)(6)(b) and (7) and provided notice prior to the that section as required by division (A)(7) of that section. |
| I declare under penalties of perjury that this complaint (including a knowledge and belief is true, correct and complete. | any attachments) has been examined by me and to the best of my |
| Date 2-/4-75 Complainant or agent (printed) | ale DyeTitle (if agent) |
| Complainant or agent (signature) Dale Dyl | |
| Sworn to and signed in my presence, this(Date) | day of(Month) (Year) |
| Notary | |

_____ BOR no. _____

DTE 1 Rev. 12/22

is

| Date received | | | | | | | |
|--|---|--|-------------------------|-----------------------------|--------------------------|-----------------------|-------|
| VIOLENTIA DE CONTRA DE CON | stions a | nd type or print all info Attach add Il market value compl | ormation. Read | instruences other c | omplaints should use l | completing form. | |
| | | | sent only to thos | e name | | | 1 |
| | | Nan | ne | | | City, State, ZIP code | |
| 1. Owner of property | | Ryan Die | nes | | 33900 Henwe | 11 Rd. Columbia | 44028 |
| 2. Complainant if not owner | er | | - 1 | | | × | |
| 3. Complainant's agent | | | | | | | |
| 4. Telephone number and | 144 | Deansie | THE STATE OF THE PARTY. | air | n. com | | |
| 5. Complainant's relations | | | ncluded see "l | Multipl | e Parcels" Instruction. | | 1 |
| 6. Parcel numbers from tax bill Address of property 11-00-009-102-045 33900 Henwell Rd Columbia Station | | | | | | | |
| 7. Principal use of property 8. The increase or decrease | | torage ket value sought. Count | er-complaints su | pportin | g auditor's value may ha | ve -0- in Column C. | |
| Parcel number | Co | | | Column C Change in Value | | | |
| | 50 | 0.000 | | 14 | 1,540 | 91,540 | 1 |
| | | | | | | , , , | 1 |
| 9. The requested change in value is justified for the following reasons: Structure is not livable. Being used as a workshop and for storage. Most of structure was interior removed to make room for work shop. No Kitchen. No gas or furnace. Electric twater is functioning. 10. Was property sold within the last three years? Yes No Unknown If yes, show date of sale | | | | | | | |
| 12. If any improvements w | 12. If any improvements were completed in the last three years, show date 2020 - present and total cost \$ / 0,000. | | | | | | |

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



| · · · · · · · · · · · · · · · · · · · | reappraisal or update of property values in the county, the reason Please check all that apply and explain on attached sheet. See R.C. |
|--|---|
| ☐ 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 i complainant, R.C. 5715.19(A)(8) requires this section to be comp | |
| ☐ The complainant has complied with the requirements of R adoption of the resolution required by division (A)(6)(b) of | C. section 5715.19(A)(6)(b) and (7) and provided notice prior to the that section as required by division (A)(7) of that section. |
| I declare under penalties of perjury that this complaint (including a knowledge and belief is true, correct and complete. | any attachments) has been examined by me and to the best of my |
| Date 2/4/25 Complainant or agent (printed) Ry | an Dienes Title (if agent) |
| Complainant or agent (signature) Myon Kimld | <u>/</u> |
| Sworn to and signed in my presence, this(Date) | day of February 3025 |
| Notary Que (Date) | (world) / (real) |
| LAURA A GILLOTA Notary Public State of Ohio My Comm. Expires February 23, 2026 | |

| LORAIN COUNTY | Tax year | 24 | _ BOR no | | | DTE 1 Rev. 12/22 | |
|--|--|-------------------|------------------|------------------------------------|-------------------------|--|--|
| BOARD OF REVISION | ON County | | _ Date recei | ved | | | |
| Answer all questions:a | 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 Notices will be sent only to those named below. Name Street address, City, State, ZIP code | | | | | | |
| | | | | | City, State, ZIP co | de | |
| Owner of property | Zion Investment (| Group LLL | 241 | 175 St. Rt. | . 58 | | |
| 2. Complainant if not owner | | | | , | | 11 | |
| 3. Complainant's agent | | | | | | | |
| 4. Telephone number and email ad 440-371-0578 | Anna contraction of the contract | | nail.com | | | | |
| 5. Complainant's relationship to pr | operty, if not owner | , | | | | | |
| If mo | ore than one parcel is | included, see " | Multiple Parc | els" Instruction. | | | |
| 6. Parcel numbers from tax bill | | 1 | | ddress of property | | | |
| 18-00-028-105-010 145 Junes St. Wellinston OH 44090 | | | | | | | |
| · · · · · · · · · · · · · · · · · · · | | | | | | | |
| 7. Principal use of property Re | ridential Home | - | | | | | |
| 8. The increase or decrease in mar | ket value sought. Coun | ter-complaints su | pporting audit | or's value may hav | /e -0- in Column C. | Λ | |
| Parcel number C | Column A omplainant's Opinior (Full Market Val | | Curre | umn B ent Value erket Value) | Column (Change in V | and the same of th | |
| 18-00-028-105-010 | 1165,000 | , | 1 700,000 - | | -#35000 | | |
| | | | | | | | |
| 9. The requested change in value is justified for the following reasons: Price is to high for the House. See (omps + neighbors houses which are nices. | | | | | | | |
| 10. Was property sold within the last three years? ☐ Yes ☒ No ☐ Unknown If yes, show date of sale | | | | | | | |
| and sale price \$ | ; and attach info | rmation explained | d in "Instructio | ns 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 com | pleted in the last three | years, show date | N/A | and tota | al 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 for the valuation change requested must be section 5715.19(A)(2) for a complete explan | one of those below | | | • • |
|--|---------------------|--|--|--------------------------|
| ☐ The property was sold in an arm's le | ngth transaction. | The property | lost value due to a casualty. | |
| A substantial improvement was adde | ed to the property. | Cocupancy cleconomic impact | nange of at least 15% had a on my property. | substantial |
| 15. If the complainant is a legislative authoricomplainant, R.C. 5715.19(A)(8) requires the | | int is an original comp | olaint with respect to propert | y not owned by the |
| The complainant has complied with t adoption of the resolution required by | | | | |
| | | | | |
| I declare under penalties of perjury that this knowledge and belief is true, correct and co | | ng any attachments) f | nas been examined by me a | nd to the best of my |
| Date Complainant or | agent (printed) | | Title (if agent) | |
| | | West Company | | |
| Complainant or agent (signature) | | 60.0%, 350, | | |
| | 254 N 254 | \$ 15 mg 4 mg 1 mg 2 | = entre | |
| Swarn to and signed in my propense, this | | Ada gradani dou of | | |
| Sworn to and signed in my presence, this | (Date) | day of | (Month) | (Year) |
| Notary | | | | |
| | | | | |
| | | and the second of the second o | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | Laterday (1969) (1979) (1979) | to delit in estimalizade |
| | | | gt v | |

| | | Tax vear | | _ BC | DR no | DTE 1 Rev. 12/22 |
|---|----------|--|---|-------------|---|--------------------------------------|
| LORAINC | OUN | County | | _ _ Da | te received | |
| Answer all duesti | ons ar | id type or brint all in | iorniation, Read | IIISU | of Real Property | y ompleting form. |
| 2025 FFB 14 | AM I | 0: 4 Attach ad | ditional pages if | nece | ssary. complaints should use D | |
| 11113 101111 13 | 101 14 | Original o | complaint | ounte | r complaint | |
| | | | me | e nan | | City, State, ZIP code |
| Owner of property | | FAILA DA Edu | 4edo 8 MARI | A | 4567 E.R | iver Rd |
| 2. Complainant if not owner | | 7/11/1-17 | , <u>, , , , , , , , , , , , , , , , , , </u> | | Sheffield V | illage, 0H |
| 3. Complainant's agent | | | | | // | 44054 |
| 4. Telephone number and en | nail ad | dress of contact perso | n CONTLOOK | .00 | m | |
| 5. Complainant's relationship | | 02 280 23 | • | | | × |
| * | If mo | re than one parcel is | included, see " | Multip | ole Parcels" Instruction. | |
| 6. Parcel numbers from tax b | | | | | Address of property | |
| 03-00-071-103-002 4567 & River Rd Shapp | | | Prield Village | | | |
| OH 4405 | | | | # 44054 | | |
| | | 1 | | | | |
| 7. Principal use of property | | rden | | | | |
| 8. The increase or decrease | in mar | ket value sought. Coun | ter-complaints su | ipporti | ng auditor's value may hav | e -0- in Column C. |
| Parcel number | Co | Column A omplainant's Opinior (Full Market Val | | (| Column B Current Value Full Market Value) | Column C Change in Value |
| 03-00-071-103-002 | | 10,000 | da . | 40 | ,000 your | 30,000 |
| | | 34 to 11111111111111111111111111111111111 | 1948 1078 | | , , | , |
| | | Parket Land | 49 | | | (() |
| Appraised VAII | value i | s justified for the folloy | wing reasons: | 8,8 | 30 - Per She | Kjield Vellage |
| 9. The requested change in Appraised VAII 2014 - 40,08 | 0 2 | Buildin | ig Dept | 10 | t is not i | buildable. |
| 10. Was property sold within | | | • | | | |
| and sale price \$ | | ; and attach info | rmation explaine | d in "lı | nstructions for Line 10" on | back. |
| | | | | | | other available evidence. <i>N/A</i> |
| 12. If any improvements wer | e com | pleted in the last three | years, show dat | e | N/A and total | ıl cost \$ |
| 13. Do you intend to present | t the te | stimony or report of a | professional app | raiser' | ? ☐ Yes ☐ No ဩ\ Un | known |

| | Please check all that apply and explain on attached sheet. See R.C. |
|--|--|
| ☐ 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 i complainant, R.C. 5715.19(A)(8) requires this section to be comp | s an original complaint with respect to property not owned by the leted. |
| ☐ The complainant has complied with the requirements of R adoption of the resolution required by division (A)(6)(b) of | .C. section 5715.19(A)(6)(b) and (7) and provided notice prior to the that section as required by division (A)(7) of that section. |
| I declare under penalties of perjury that this complaint (including a knowledge and belief is true, correct and complete. | any attachments) has been examined by me and to the best of my |
| Date 1-14-25 Complainant or agent (printed) | arie fallada Title (if agent) |
| Complainant or agent (signature) | Maria Falleda |
| Sworn to and signed in my presence, this(Date) | day of FEBRUARY 2025 (Month) (Year) |
| Notary Shawn Burton | A SOLIC STATE OF THE STATE OF T |

| DTE | 1 |
|------|-------|
| Rev. | 12/22 |

| | Tax year | B(| OR no | DTE 1 Rev. 12/22 | |
|---|--|--|--|-------------------------------------|--|
| INRAIN | COUNT YCounty | Da | ate received | . Maring (C. 16 25 m) 1. 999 (S. 16 | |
| BOARD Of | tions and type or print all informations and type or print all information AMID: L.7 Attach additional for full market value complained or complained to the complained correct the complained to the complained t | ne Valuation mation. Read instr | of Real Proper uctions on back before essary. complaints should use or complaint | completing form. | |
| | Name | е | Street address, | City, State, ZIP code | |
| Owner of property | Tylicki, Mark Frank | & Katherine L. | 47600 Middle Ridge | Rd, Amherst, OH 44001 | |
| 2. Complainant if not owner | | | | | |
| 3. Complainant's agent | n Statista | p 1 2 2 2 2 5 6 pm | | | |
| 4. Telephone number and e | email address of contact person | 440-988-2727 | THE ALL VOLUME OF THE OWNER. | ,100 | |
| 5. Complainant's relationsh | ip to property, if not owner | | | | |
| and the second | If more than one parcel is in | cluded, see "Multi | ple Parcels" Instruction | pin zsisci ku seh ur laber i | |
| 6. Parcel numbers from tax bill Address of property | | | | | |
| 05-00-00 | 6-000-001 | 47600 Middle Ridge Rd, Amherst, OH 44001 | | | |
| 1000 | | | | | |
| | | | hoj i mga ng katalahan d | | |
| 7. Principal use of property | Residence | | | | |
| 8. The increase or decrease | e in market value sought. Counte | r-complaints support | ing auditor's value may ha | ve -0- in Column C. | |
| Parcel number | Column A Complainant's Opinion o (Full Market Value | | Column B Current Value (Full Market Value) | Column C Change in Value | |
| 05-00-006-000-001 | 230,000 | | 267,390 | 37,390 | |
| | | | | | |
| The requested change in Appraisal report, attache | า value is justified for the followin a. ภูลูษาการราช ปีที่บริ | (819.Y | | | |
| 10. Was property sold within | in the last three years? | ☑ No ☐ Unkno | wn If yes, show date of s | sale | |
| | ; and attach inform | IMMODE A CANADA | Mar 1970/ | | |
| and said price of | 1 dia attaon mon | and explained in a | The second secon | | |
| 11. If property was not sold l | but was listed for sale in the last th | nree years, attach a c | opy of listing agreement or | other available evidence. | |
| 12 If any improvements we | ere completed in the last three ve | ears, show date | and to | tal cost \$ | |

13. Do you intend to present the testimony or report of a professional appraiser? **EXECUTE:** Yes \(\subseteq \text{No} \subseteq \subseteq \text{Unknown} \)

| | t reappraisal or update of property values in the county, the reason Please check all that apply and explain on attached sheet. See R.C. |
|--|---|
| ☐ 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 complainant, R.C. 5715.19(A)(8) requires this section to be complainant. | is an original complaint with respect to property not owned by the pleted. |
| The complainant has complied with the requirements of F adoption of the resolution required by division (A)(6)(b) of | R.C. section $5715.19(A)(6)(b)$ and (7) and provided notice prior to the that section as required by division $(A)(7)$ of that section. |
| I declare under penalties of perjury that this complaint (including knowledge and belief is true, correct and complete. | any attachments) has been examined by me and to the best of my |
| Date <u>2-7-25</u> Complainant or agent (printed) Mark | Frank & Katherine L. Tylicki Title (if agent) |
| Complainant or agent (signature) Katherine L. | Suchi Mark Frank Tylich day of FEBRUARY 2025 (Month) (Year) |
| Sworn to and signed in my presence, this | day of FEBRUARY 2025 (Month) (Year) |
| THE COLUMN THE PROPERTY OF THE | |



| | Toy year | | _ BOR no | DTE 1 Rev. 12/22 | |
|---|----------------------------------|--|---|-----------------------------|-----------|
| LORAIN | COUNTY County | | Date received | 100. 12.22 | |
| BOARD OF | Complaint Against | the Valuat | ion of Real Propert | | |
| Answer all quest | ions and type or print all in | formation. Read | instructions on back before c | ompleting form. | |
| This form is | for full market value com | dditional pages if plaints only. All c | necessary. other complaints should use D | OTE Form 2 | |
| | ☐ Original | complaint | ounter complaint | | |
| | | ame | Street address, 0 | City, State, ZIP code | |
| Owner of property | JOHN S. | YasKaNi | ch 874 Kenil | worth Ave Shoff | Lake OHI |
| 2. Complainant if not owner | | | | | 11031 |
| 3. Complainant's agent | Same | 199 | | | 1 |
| 4. Telephone number and e | mail address of contact pers | on 440-6 | 670-3909 | | |
| ~ | rohnyaskan | vich @ j | 19400. COM | | _ |
| 5. Complainant's relationsh | | | | | 1 |
| | If more than one parcel i | s included, see " | Multiple Parcels" Instruction. | | |
| 6. Parcel numbers from tax bill Address of property | | | | | |
| 03-00-034-112-010 Madison Ave Sheffield Lake OH 4405. | | | | | |
| | | | | | |
| | | | | | 1 |
| 7. Principal use of property | | | | | 1 |
| 8. The increase or decrease | e in market value sought. Cou | ınter-complaints sı | ipporting auditor's value may hav | ve -0- in Column C. | 4 |
| Parcel number | Column A Complainant's Opinio | on of Value | Column B Current Value | Column C Change in Value | |
| Parcei number | (Full Market Va | | (Full Market Value) | Change in value | |
| 03-00-034-112-010 | 839.3 | | 7, | |] |
| | #3500,0 | 00 | | | |
| а | - 9 | | | | _ |
| 9. The requested change in | value is justified for the follo | owing reasons: | NO improvement | s such as | |
| 9. The requested change in value is justified for the following reasons: Vacant land on Woodruff with no improvements such as City water, sewer, gas, electric, or road Access to the property. No current land transfers within 100 years? | | | | | |
| arresty ND current land transfers within 100 years, | | | | | |
| 10. Was property sold within the last three years? Yes No Unknown If yes, show date of sale N/A | | | | | _ |
| and sale price \$; and attach information explained in "Instructions for Line 10" on back. | | | | | |
| | | | ch a copy of listing agreement or | | o listing |

11. If prop

value is equal to the value of five (5) 1/4 acre lots, \$5.87 x 5 = \$29.35

| | reappraisal or update of property values in the county, the reason Please check all that apply and explain on attached sheet. See R.C. |
|--|--|
| ☐ 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 i complainant, R.C. 5715.19(A)(8) requires this section to be comp | s an original complaint with respect to property not owned by the leted. |
| ☐ The complainant has complied with the requirements of R. adoption of the resolution required by division (A)(6)(b) of | C. section 5715.19(A)(6)(b) and (7) and provided notice prior to the that section as required by division (A)(7) of that section. |
| I declare under penalties of perjury that this complaint (including a knowledge and belief is true, correct and complete. | any attachments) has been examined by me and to the best of my |
| Date 2-12-204 Emplainant or agent (printed) | Thu S. Yas Kartille (if agent) _ OWNER of prope |
| Complainant or agent (signature) Sworn to and signed in my presence, this | Banich day of Ichruary 2025 |
| Notary Show A Swedy | SHARON A. SWEDA NOTARY PUBLIC, STATE OF OHIO My Commission Exolices Feb. 24, 2026 |

| Tax year <u>20</u> 24 | | | ВС | PR no | | DTE 1 Rev. 12/22 | |
|---|------------|--|--|--------|--|-----------------------|--------|
| LORAIN COUNT County Lorain | | | | _ Da | te received | | |
| Answer all questions and type or print all information. Read instructions on back before completing form. 2075 FEB L PM : 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 | | | | | de | | |
| Owner of property | | Ethar | ı Irish | | 7830 Spencer Lake Rd. Medina, Ohio 4425 | | 44256 |
| 2. Complainant if not owne | | | | | | | |
| 3. Complainant's agent | | | | | | | |
| 4. Telephone number and | email ad | dress of contact perso | n Cell: 440-506 | 6-735 | 5, email: ethan.irish@m | e.com | |
| 5. Complainant's relations | hip to pro | pperty, if not owner | | | | | |
| | If mo | re than one parcel is | included, see " | Multip | ole Parcels" Instruction. | | |
| 6. Parcel numbers from ta | x bill | | | | Address of property | | |
| 20-05-0 | 09-000-0 | 040 | 49300 West Bursley Rd Wellington, Ohio 44090 | | | | |
| | , | | | | | | |
| | | | | | | | |
| 7. Principal use of propert | у | nd Property - Recrea | | | | | |
| 8. The increase or decrease in market value sought. Counter-complaints supporting auditor's value may have -0- in Column C. | | | | | - | | |
| Parcel number | Co | Column A omplainant's Opinion of Value (Full Market Value) | | (| Column B [*] Current Value Full Market Value) | Column Change in V | |
| 2005009000040 | | \$170,000 | | 374,5 | 500.00 (tax assesment) | -\$204,50 | 00 |
| | | | | | | | |
| 9. The requested change in value is justified for the following reasons: Current tax assessment does not match that provided by two recent professional full appraisals on property and house. Home has been abandoned since the passing of original owner: Maurice A Irish Jr. House in dilapidated condition. See attached appraisals with images of house condition. | | | | | | | |
| 10. Was property sold with | nin the la | st three years? 🛭 Ye | es 🗌 No 🔲 U | Jnkno | wn If yes, show date of sa | ile | |
| and sale price $\$ \frac{0}{2}$; and attach information explained in "Instructions for Line 10" on back. | | | | | | | |
| 11. If property was not sold | l but was | listed for sale in the las | t three years, atta | ch a c | opy of listing agreement or | other available evid | dence. |
| 12. If any improvements v | vere com | pleted in the last three | years, show dat | e NA | and tota | al cost \$ 0 | · |
| 13. Do you intend to present the testimony or report of a professional appraiser? Yes No Unknown | | | | | | | |

| · | | |
|---|--|--|
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |

| for the valuation change requested must be one of those below. F section 5715.19(A)(2) for a complete explanation. | lease check all that apply and explain on attached sheet. See R.C. |
|--|---|
| ☐ 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 i complainant, R.C. 5715.19(A)(8) requires this section to be comp | s an original complaint with respect to property not owned by the eted. |
| ☐ The complainant has complied with the requirements of R. adoption of the resolution required by division (A)(6)(b) of | C. section 5715.19(A)(6)(b) and (7) and provided notice prior to the that section as required by division (A)(7) of that section. |
| I declare under penalties of perjury that this complaint (including a knowledge and belief is true, correct and complete. | any attachments) has been examined by me and to the best of my |
| 01/27/2025 Complainant or agent (printed) | han Irish Owner Owner |
| Complainant or agent (signature) | |
| Sworn to and signed in my presence, this | day of <u>January</u> 2025 (Month) (Year) |
| Notary Amy M. Magy | |
| AMY M NAGY Notary Public State of Ohio My Comm. Expires December 19, 2026 | |



| 1.05 | AIM | County LOIGHT | | | te received | |
|---|--|---|--------------------------------------|---------------|---|---------------------------|
| Answer all que | stions a | nd type or print all int Attach ad | formation, Read ditional pages if | instr nece | of Real Propert uctions on back before o ssary. | completing form. |
| Thisigorm | is for fu | X Original c | omplaint 🔲 C | ounte | complaints should use I r complaint | DIE Form 2 |
| | | | sent only to thos | e nan | | City State 7IP code |
| | Name Street address, City, State, ZIP code 1. Owner of property NORMAN C. MCNARY MENARY 747 OSBORN AVE LORAIN 011 440.5 2 | | | | | |
| Owner of property | Owner of property NORMAN C. MCNARY MENNRY 747 OSBORN AVE LORAIN 011 44052 | | | | | |
| 2. Complainant if not own | er | | | | | |
| 3. Complainant's agent | | | | | | |
| 4. Telephone number and | | | | 10 | TWC.COM | |
| 5. Complainant's relations | | | OWNER | 10 | 1000,007,1 | |
| 5. Complainant's relations | | | | Multir | ole Parcels" Instruction. | <u> </u> |
| C. Daraal numbers from to | | , , , , , , , , , , , , , , , , , , , | | • | Address of property | |
| 6. Parcel numbers from ta | | -011 | 747 0 | SBO | RN AVE LORAIN | |
| Ua va va i | 110 | | 1710 | JULI | 190 1102 (0)914-70 | 011 // 020 |
| | | | | | | |
| 7. Principal use of propert | v R | ESIDENTIAL | | | | |
| | | | ter-complaints su | pporti | ng auditor's value may hav | ve -0- in Column C. |
| Parcel number | | Column A Column B Column C Complainant's Opinion of Value (Full Market Value) Column B Column B Column C Current Value (Full Market Value) | | | Column C | |
| 0202027110011 | # / | 135,660.00 \$ 158,570.00 - \$ 22,910.00 | | | | |
| 9. The requested change in value is justified for the following reasons: THE MEDIAN SALE PRICE PER SQ FOOT OF A HOUSE FN LORAIN IS \$ 114.00 IN 2025 1190 Sq Ft. X \$ 114.00 = \$ 135,660 | | | | | | |
| | | | | | | ale |
| and sale price \$ | | ; and attach info | rmation explaine | d in "l | nstructions for Line 10" on | back. |
| 11. If property was not solo | l but was | listed for sale in the last | three years, atta | ch a co | opy 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 preso | ent the te | estimony or report of a | professional app | raiser' | ? ☐ Yes 💆 No ☐ Ur | nknown |
| | | | | | | |

BOR no. _____

DTE 1 Rev. 12/22

| | · | |
|--|---|---|
| | | |
| | | |
| | | |
| | | |
| | | , |
| | | |
| | | |
| | | |
| | | |

| for the valuation change requested must be one of those below. For the faction 5715.19(A)(2) for a complete explanation. | Please check all that apply and explain on attached sheet. See R.C. | | | | | |
|--|--|--|--|--|--|--|
| ☐ 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 complainant, R.C. 5715.19(A)(8) requires this section to be comp | is an original complaint with respect to property not owned by the leted. | | | | | |
| ☐ The complainant has complied with the requirements of R adoption of the resolution required by division (A)(6)(b) of | .C. section 5715.19(A)(6)(b) and (7) and provided notice prior to the that section as required by division (A)(7) of that section. | | | | | |
| 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 <u>2-12-2025</u> Complainant or agent (printed) <u>No</u> | RMAN C. MCNMS/Title (if agent) | | | | | |
| Complainant or agent (signature) <u>Rorman</u> CM | why | | | | | |
| Sworn to and signed in my presence, this | day of February 2025 (Month) (Year) | | | | | |
| Notary Rinda Lancustu. | CONTRACTOR AND RECONSTRUCTION OF THE PARTY O | | | | | |

