CI	ea	17	50	Yel o	n
<u> </u>			ALC: N		-11.0

			DTE 4	
Tax year_	2024	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.

\(\lambda\)		Na	me		Street address, (City, State, ZIP code
1. Owner of property		PONDED J.	TIMKO		145 WOODVIEW	DR. EMMA, OH
2. Complainant if not owne	r					44035
3. Complainant's agent						
4. Telephone number and						- 4
440-581-4	-851	7 / 220	SMC @ WI	ND	STREAM , NET	
5. Complainant's relationsh						
	If mo	re than one parcel is	included, see "N	/lultip	ole Parcels" Instruction.	
6. Parcel numbers from tax	bill				Address of property	
06-23-025-1	105-	042	145 WOOD	VIE	W DR. EMPIA	OH 44035
		MAN AND MANAGEMENT OF THE PARTY				
7. Principal use of property	R	ESIDENCE				
8. The increase or decreas	e in mar	ket value sought. Coun	ter-complaints su	pporti	ng auditor's value may hav	ve -0- in Column C.
Parcel number	C	Column A omplainant's Opinior (Full Market Val		(Column B Current Value (Full Market Value)	Column C Change in Value
06-23-025-105-042		216,000			251,410	(-35,410)
9. The requested change in value is justified for the following reasons: BHSED ON COMPARABLE RELENT HOME SALES (ACTUAL)						
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						

5 1 8 th Marie 3

the state of the second second

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 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 any attachments) has been examined by me and to the best of my knowledge and belief is true, correct and complete.				
Date 2-4-25 Complainant or agent (printed) Roll	IACO J. TIMKO Title (if agent)			
Complainant or agent (signature)				
Sworn to and signed in my presence, this(Date)	day of(Month) (Year)			
Notary				

3.3 3

Land Control

 $A_{i}^{(k)} = \mathbb{Q}_{q_{i}} \mathbb{Q}_{q_{i}(k)} = \mathbb{Q}_{q_{i}}$

the Month of the Country of the Coun

Charles are being the array of the property of the contract of

Control Contro

 $(x_1, x_2, \dots, x_n) = (x_1, x_2, \dots, x_n) + (x_1, x_2, \dots, x_n)$

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	Tax year_<	aca 4 BC	OR no	Rev. 12/22		
edicen of OF	County Log	Da Da	te 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.						
	Na	ıme		City, State, ZIP code		
1. Owner of property	Travis-	Shamsali	1671 north	Light 19- Folgh		
2. Complainant if not owner						
3. Complainant's agent						
4. Telephone number and email	. 0	chal Tha	mswyw	000		
5. Complainant's relationship to						
lf ı	nore than one parcel is	included, see "Multip	le Parcels" Instruction.			
6. Parcel numbers from tax bill			Address of property			
05-00-111-11	5-07					
	2 1000 10		of			
7. Principal use of property	3 tola of the	ator complaints supporti	ng auditoria valuo may ha	uo A in Column C		
8. The increase or decrease in m		iter-compiaints supporti	- 54 N			
Parcel number	Column A Complainant's Opinio (Full Market Val		Column B Current Value Full Market Value)	Column C Change in Value		
63.00-111-115-017	3000	20, - 9	50060:-	650160°=		
9. The requested change in valu	e is justified for the follow	wing reasons:	v 1 -			
it's Doord Worth more than what I sail in						
10. Was property sold within the last three years? Yes \(\subseteq \text{No} \subseteq \text{Unknown If yes, show date of sale} \(\text{X3} \) \(\text{20} \) \(\text{20} \) and sale price \$\(\text{25} \) \(\text{20} \) \(\text{35} \); 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 \(\subseteq \) No \(\subseteq \) 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 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 any attachments) has been examined by me and to the best of my knowledge and belief is true, correct and complete.					
Date 2/5/2025 Complainant or agent (printed)	Title (if agent)				
Complainant or agent (signature)	-2/5/25				
Sworn to and signed in my presence, this(Date)	day of(Month) (Year)				
Notary					

Clear Form

	Tax year	BOR no.	DTE 1 Rev. 12/22
	County Login		
Answer all questions	plaint Against the Valua and type or print all information. Rea Attach additional pages ull market value complaints only. A	ation of Real Propert ad instructions on back before if necessary. Il other complaints should use Counter complaint	ty completing form.
	Name		City, State, ZIP code
1. Owner of property	Leig I Morrie Sevar	onetiche 44555 51.1	81. 162 wellington 0.44
2. Complainant if not owner			
3. Complainant's agent4. Telephone number and email a	dduran af anutoat mayang		
4. releptione number and email a	ddress of contact person		
5. Complainant's relationship to p	roperty, if not owner		
lf m	ore than one parcel is included, see	"Multiple Parcels" Instruction.	
6. Parcel numbers from tax bill		Address of property	······································
21-17-013-000	-006	-44555 51. Bt. 162	welling ton O
21-17-014-000	-005		44090
21-17-616-02	b - 862		
7. Principal use of property	Farming		
8. The increase or decrease in ma	arket value sought. Counter-complaints	supporting auditor's value may ha	ve -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
21-17-013-000-004 1	7, 500.00	19, 880	
21-17-014'000'005 24		100,260	
21-17-616-000-002 4	is justified for the following reasons:	49,500	
9. The requested change in value	is justified for the following reasons:	•	
	ast three years? ☐ Yes ☑ No ☐		
	s listed for sale in the last three years, at		

12. If any improvements were completed in the last three years, show date 50me (and total cost \$ 12,000.00.

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

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 complainant, R.C. 5715.19(A)(8) requires this section to be comp				
☐ 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 a knowledge and belief is true, correct and complete.	any attachments) has been examined by me and to the best of my			
Date 2- 5-2025 Complainant or agent (printed)	I.E.S WARTY Title (if agent)			
Complainant or agent (signature) <u>The Gradwartunt</u>	uler			
Sworn to and signed in my presence, this(Date)	day of(Month) (Year)			
Notary				

	Tax year		BOR no	DTE 1 Rev. 12/22
	·			
Answer all questi	omplaint Agains ons and type or print all Attach for full market value co	st the Valuati I information. Read additional pages if	on of Real Propert nstructions on back before necessary. ther complaints should use nunter complaint	completing form.
		Name	Street address,	City, State, ZIP code
Owner of property	KEITH	CESARE	P.O.BOX 946/	2335 ZENOB
Complainant if not owner			NORWALK, O	410 44857
Complainant's agent				
Telephone number and en		erson		
Complainant's relationship	o to property, if not owner			
	If more than one parce	l is included, see "l	fultiple Parcels" Instruction.	
Parcel numbers from tax I			Address of property	
- <i> 2-000-000-</i>	065	BURSLEY	RD. WELLING	STON, OHIO
Principal use of property	NONE DUI	E TO REST	RICTIONS	
The increase or decrease	in market value sought. C	ounter-complaints su	pporting auditor's value may ha	ve -0- in Column C.
Parcel number	Column Complainant's Opir (Full Market	nion of Value	Column B Current Value (Full Market Value)	Column C Change in Value
-12-000-000-065	0		0	0
	*			

9. The requested change in value is justified for t
1.) COPY OF DEED WITH RES
ATTORNEY WORKING WIT RESTRICTIONS ON THIS LOT, THESE RESTRICTIONS DROP THE VALUE.

10. Was property sold within the last three years? 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. **NEVER BEEN FOR SALE** 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

	for the valuation change requested must be one of those below. Please check all the section 5715.19(A)(2) for a complete explanation.	
	☐ The property was sold in an arm's length transaction. ☐ The property le	ost value due to a casualty.
	☐ A substantial improvement was added to the property. ☐ Occupancy checonomic impact	ange of at least 15% had a substantial on my property.
	15. If the complainant is a legislative authority and the complaint is an original complainant, R.C. 5715.19(A)(8) requires this section to be completed.	aint with respect to property not owned by the
	☐ The complainant has complied with the requirements of R.C. section 5715.19 adoption of the resolution required by division (A)(6)(b) of that section as requ	(A)(6)(b) and (7) and provided notice prior to the tired by division (A)(7) of that section.
	I declare under penalties of perjury that this complaint (including any attachments) had knowledge and belief is true, correct and complete.	as been examined by me and to the best of my
	Date 2/4/25 Complainant or agent (printed) KEITH CESAN	₹ETitle (if agent)
	Complainant or agent (signature) <u>Kuth</u> Cesare	
	Sworn to and signed in my presence, this day of day of	(Month) (Year)
+	tate of Ohio	
2	Notary	LIE D. COOK Public, State of Ohio commission Expires
		March 10, 2029 SSION: 2019-RE-468330



BOR no. __

Tax year_

DTE 1 Rev. 12/22

S (II) OF N	A 1 1 2 1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2		Date received		
Answer all que	is for full market value con Origina	information. Read in additional pages if n	structions on back before ecessary. ner complaints should use inter complaint named below.	DTE Form 2	
		Name		City, State, ZIP code	
Owner of property	GREGORY	PROHASKA	35796 CRYSTAL	_ CK CT.	
2. Complainant if not own	er		GRAFTO	N, 0410 44044	
3. Complainant's agent					
I. Telephone number and	email address of contact pe	rson			
5. Complainant's relations	ship to property, if not owner	*			
	If more than one parce	is included, see "M	ultiple Parcels" Instruction	•	
3. Parcel numbers from ta	ax bill		Address of property		
11000450	000067	35796 CI	24STAL CREEK		
			GRAFTON, OHI		
			44044		
7. Principal use of propert	, RESIDENTIAL	: SINGLE I	FAMILY HOME PR	LIMARY	
	se in market value sought. Co	ounter-complaints supp	oorting auditor's value may ha	ve -0- in Column C.	
Parcel number	Column / Complainant's Opin (Full Market \	A ion of Value	Column B Current Value (Full Market Value)	Column C Change in Value	
1100045000067	\$460,000		\$ 492,920	-\$32,920	
			6		
PROPERTY APPRAISAL REPORT OR VALUATION FROM 5/3 BANK ON 9/30/2024					
10. Was property sold wit	hin the last three years?	Yes No □ Unl	known If yes, show date of s	ale	
and sale price \$; and attach i	nformation explained i	n "Instructions for Line 10" or	n back.	
11. If property was not solo	d but was listed for sale in the	last three years, attach	a copy of listing agreement or	other available evidence.	
				tal cost \$	
13. Do you intend to pres	3. Do you intend to present the testimony or report of a professional appraiser? Yes 🔲 No 🔲 Unknown				

			ţ
		•	

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 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 complained.	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.	nny attachments) has been examined by me and to the best of my
Date 2 3 25 Complainant or agent (printed)	Title (if agent)
Complainant or agent (signature)	
Sworn to and signed in my presence, this	day of FEBRUARY 2025 (Month) (Year)
Notary	

Clear Form

Tax year______ BOR no. _____

DTE 1 Rev. 12/22

	County		Da	te received	
Com	plaint Against	the Valuati	on	of Real Propert	у
Answer all questions		iformation. Read i Iditional pages if		uctions on back before o	completing form.
This form is for	full market value comp	olaints only. All o	ther o	complaints should use [OTE Form 2
	Notices will be	complaint	unter e nam	red below.	
	Na	ame		Street address, 0	City, State, ZIP code
1. Owner of property	Dennis 1	nitchell		200 Conper F	baker Parkrate.
2. Complainant if not owner					
3. Complainant's agent					
4. Telephone number and email	address of contact pers	on			
Dennismitchell 5	981@ Gmai	1. Com C	44	(0) 225-598	
5. Complainant's relationship to		<u>-</u>			
		s included, see "N	lultip	le Parcels" Instruction.	
6. Parcel numbers from tax bill				Address of property	
06-51-001-101-0	57	200 C001	300	70 . 10 .	d E. Lovain, Oh
04 21 001 101 0	44053				
7. Principal use of property	īvina				
8. The increase or decrease in m		nter-complaints sur	portir	ng auditor's value may hav	/e -0- in Column C.
LISURAM	Column A			Column B	Column C
Parcel number	Complainant's Opinio			Current Value	Change in Value
06-21-001-101-007	(Full Market Va	lue)	(1	Full Market Value)	
00 2100114001	\$ 160,000	<u> </u>	8	257,160	
·····					
9. The requested change in valu It doesn't worth afford the vote of	e is justified for the follo	wing reasons: 7	he	property need	s Many repairs
It doesn't worth	close to what	they appr	ais	ed if at this ye	ar. I can't
afford the rate of	taxes. My 18	104her 15 hu	MNC -	g at the propert	yand I do
not charge her a	ng rear.				
10. Was property sold within the	last three years?	es 🔀 No 🗌 Ui	nknov	vn If yes, show date of sa	ale
and sale price \$; and attach info	ormation explained	in "Ir	nstructions for Line 10" on	back,
			L	e the binary and a second and	athan avaifahla aviidanaa
11. If property was not sold but wa	is listed for sale in the las	st three years, attacl	n a co	ppy of listing agreement or	oiner available evidence,
12. If any improvements were co	mpleted in the last three	e years, show date		and tota	al cost \$
				· · · · · · · · · · · · · · · · · · ·	1
13. Do you intend to present the	testimony or report of a	professional appra	aiser?	'∐ Yes LYNO ∐ Ur	known

	·	

	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	
☐ 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 $\frac{\partial}{\partial J} \frac{\partial}{\partial J} \frac{\partial}{\partial J} \frac{\partial}{\partial J}$ Complainant or agent (printed)	ennis Mitchell Title (if agent)
Complainant or agent (signature)	
Sworn to and signed in my presence, this	day of
Notary ARTHUR J MARCUSSEN Notary Public State of Onlo My Comm. Expires Decomber 24, 2004	

	•	

		Tax year 20	24	_ BC	PR no		DTE 1 Rev. 12/22
eo ARD OF	CUU				te received		
Answer all ques	omp tions a	olaint Agains nd type or print all i Attach a ill market value com Original	t the Valuat nformation. Read dditional pages i	ion instru f nece other ounte	of Real Prope uctions on back before ssary. complaints should us complaint	e completing form.	
		l N	ame			s, City, State, ZIP co	de
Owner of property		MATAYA, KI	BINDETHMO		257785014NRD.	CLASTED TWP	4138
2. Complainant if not owner	r	,					
3. Complainant's agent					×		
4. Telephone number and e	email ad	ddress of contact pers	son				
440-429-0552	461	L 440 235	2512 HOM	6	DKM 9196)	PAHOS, CO.	m
5. Complainant's relationsh							
	If mo	ore than one parcel i	s included, see "	Multip	le Parcels" Instructio	n.	
6. Parcel numbers from tax	bill				Address of proper		
07-00-026-7	01-0	006	36998 509	AR R	OGERD N. Riog.	EVILLE OHD	Uyit
7. Principal use of property	OWNE	ERS STORAGE	OF PERSO	NAL	ITEMS- NON	DEOMMERC	inc
8. The increase or decrease							
Parcel number	С	Column A omplainant's Opinio (Full Market Va	on of Value	(Column B Current Value Full Market Value)	Column Change in V	
07-00-026-701-006	40	,236,00		11	14510,00	\$ 34474,00	5
					V		
			3			- XVII 00.	
9. The requested change in I DU 96 IN CREATE OF PROPERTY IS TO BATH, OR US MY PORTION	SEO.	IN TAXES IS FOR OWNGRS	UNCONSCIO	17	EMS - NONCE	REASONABLE MMIERCI AC	<u> </u>
10. Was property sold withi	in the la	ast three years? 🔲 `	Yes ☑ No 🔲 l	Jnknov	wn If yes, show date of	sale	
and sale price \$; and attach in	formation explaine	d in "I	nstructions for Line 10"	on back.	
11. If property was not sold I	but was	listed for sale in the la	st three years, atta	ch a co	ppy of listing agreement	or other available evid	lence.

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

	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 a knowledge and belief is true, correct and complete.	any attachments) has been examined by me and to the best of my
K	ENNETH MATIANA
Date $3-3-2025$ Complainant or agent (printed) $\frac{K_0}{D_0}$	Nun Matala_ Title (if agent)
Complainant or agent (signature) <u>Kenneth Marto</u>	rea. Davn Matava
Sworn to and signed in my presence, this	day of February 2025 (Month) (Year)
Notary	
Thomas A. Helmick Hotary Public, State of Ohio My Commission Expires 03/24/2029	

	Tax year	В	OR no	DTE 1 Rev. 12/22
COLUMN TO THE RE	County	D	ate received	
Com Answer all questions	plaint Against and type or print all in Attach ad full market value comp	the Valuatior formation. Read inst Iditional pages if nec	of Real Propei ructions on back before essary. r complaints should use er complaint	rty e completing form.
		me		, City, State, ZIP code
1. Owner of property	Donald + Cora	Wicks	1821 W. 19.	th St. Lorgin OH
2. Complainant if not owner				
3. Complainant's agent				
4. Telephone number and email a	address of contact perso	614-986	-8376	
5. Complainant's relationship to p	property, if not owner	¥-		
If m	ore than one parcel is	included, see "Mult	iple Parcels" Instruction	1.
6. Parcel numbers from tax bill			Address of propert	ty
02-02-624-115	-063	1821 W.	19th St. Lon	xine, 04 44052
				,
7. Principal use of property	estido ine.	the Proper	-4	
8. The increase or decrease in ma	arket value sought. Cour	nter-complaints suppor	ting auditor's value may h	ave -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
02-02-024-115-063		Bodo		
has decreased	otery, one	rteel From bad + 2 bat	h horace. The	AUD A
10. Was property sold within the and sale price \$; and attach info	rmation explained in "	n County 2 "Of another true to county 3 "Of Asy 25 2026	n back.
11. If property was not sold but wa	s listed for sale in the last	t three years, attach a c	copy of listing agreement o	r otner 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

	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 comp	is an original complaint with respect to property not owned by the pleted.
☐ The complainant has complied with the requirements of R 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 2 /- 25 Complainant or agent (printed)	Title (if agent)
Complainant or agent (signature) Cornf. Wick	
Sworn to and signed in my presence, this(Date)	day of <u>Folo</u> 2025 (Year)
Notary I'm Keryl	
IRMA MARQUEZ Notary Public, State of Ohio Lorain County My Commission Expires May 25, 2026	

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	
0 1 1 1 M 1 - 2 - 2 - 1 - 2 - 2 - 1 - 2 - 2 - 1 - 2 - 2	
0 + 1 1 M 41 - 1 2 2 0 + 1 - 1 1 A2	
1. Owner of property Bert & Laura Madden 302 Buttermere In. Am	
2. Complainant if not owner	4400
3. Complainant's agent	
4. Telephone number and email address of contact person 140-823-9697 Jaura 1023 Dhotmail.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	
03-00-028-11-002 1302 purici niere 201 201 1502	1001
7. Principal use of property 「とらじんといこと 8. The increase or decrease in market value sought. Counter-complaints supporting auditor's value may have -0- in Column C.	
Column A Column B Column C Parcel number Complainant's Opinion of Value (Full Market Value) Column B Column C Complainant's Opinion of Value (Full Market Value)	ue
05-00-026- \$240,000.00 \$263,480.00 \$23,480.	00
9. The requested change in value is justified for the following reasons: We had a professional appraisal completed showing a lower valuation.	
 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 evider 	ice.

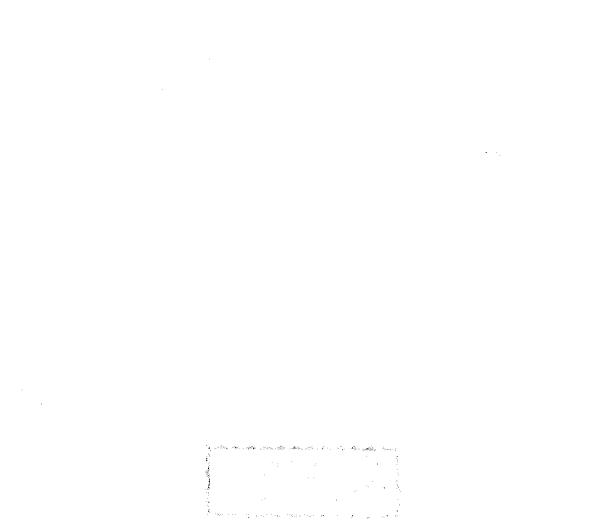
12. If any improvements were completed in the last three years, show date _____ and total cost \$ _____.

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

DTE 1 Rev. 12/22



for the valuation change requested must be one of those below. I section 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 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 $\frac{1/30/25}{25}$ Complainant or agent (printed) $\frac{1}{25}$	aura MadderTitle (if agent) homeowner
Complainant or agent (signature)	adden
Sworn to and signed in my presence, this $\frac{\sqrt{3}\sqrt{4}}{\sqrt{2}}$	day of Junuary 2025 (Month) (Year)
Notary 22	
	MICHAEL J ANSELMO Notary Public - State of Florida Commission # HH 128944 My Comm. Expires May 11, 2025



Answer all questions	County	the Valuatio formation. Read ins Iditional pages if ne	er complaints should use l	y completing form.	
		e sent only to those r		City, State, ZIP code	
Owner of property				R DR LORAIN	
Complainant if not owner	MAHMOOD NO NILY			0H10, 44053	
Complainant's agent		Q O			
4. Telephone number and email a 4. To 3 0 8 - 8 5. Complainant's relationship to p	roperty, if not owner		Itiple Parcels" Instruction.		
6. Parcel numbers from tax bill Address of property					
02-02-015-104-023		3351 MAURER DR			
		LORAIN, OH10 44053			
7. Principal use of property			,		
8. The increase or decrease in ma	arket value sought. Cour	nter-complaints supp	orting auditor's value may ha	ve -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	
02-02-015-64-023 100,0001		001	154,000,00	54,000.00	
9. The requested change in value I HAVE SOCIAL SHARD TO PAY INCA	ECURTY INCO REASE 110000 KIN FRONT	ME OF 1300 o DOLLARS/	.00 DULLARS/M YEAR · I AM WIL SE FOR THE CIT	ONTH ITIS VERY LING TO TAKE CAN Y AND SAVE GIT	

OFW A LOTS OF MONEY.

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 \$ ____

. ne state of the second

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 la for the valuation change requested must be one of those below section 5715.19(A)(2) for a complete explanation.	ast reappraisal or update of property values in the county, the reason w. 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 complain complainant, R.C. 5715.19(A)(8) requires this section to be con	nt is an original complaint with respect to property not owned by the mpleted.
The complainant has complied with the requirements of adoption of the resolution required by division (A)(6)(b) of	f R.C. section 5715.19(A)(6)(b) and (7) and provided notice prior to the of 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.	ng any attachments) has been examined by me and to the best of my
Date 2,5,25 Complainant or agent (printed) _/	M · NNTitle (if agent)
Complainant or agent (signature) M · N · N	
Sworn to and signed in my presence, this(Date)	day of(Month) (Year)
Notary	