

Tax year \_\_\_\_\_ BOR no. \_\_\_\_\_

DTE 1M  
Rev. 02/19

County \_\_\_\_\_ Date received \_\_\_\_\_

### Complaint Against the Valuation of a Manufactured or Mobile Home Taxed Like Real Property

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

2024 JAN 16 AM 1:18

Attach additional pages if necessary.

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

1. Owner of home		Name <i>Lorene B Baker</i>		Street address, City, State, ZIP code <i>22546 West Rd Wellington, OH 44090</i>	
2. Complainant if not owner					
3. Complainant's agent					
4. Telephone number of contact person		<i>440 647 2300</i>			
5. Email address of complainant					
6. Complainant's relationship to home, if not owner					
If more than one home is included, see "Multiple Homes" on back.					
7. Registration number from tax bill			Address of home		
<i>App # 20190077</i>			<i>22546 West Rd Wellington, OH</i>		
<i>Parcel # 18-00-003-000-035</i>					
<i>Tax District -66</i>					
8. Principal use of home					
9. The increase or decrease in market value sought. Counter-complaints supporting auditor's value may have -0- in Column C.					
Registration Number	Column A Complainant's Opinion of Value (Full Market Value)	Column B Current Value (Full Market Value)	Column C Change in Value		
	<i>\$ 4,990</i>	<i>\$ 4,990</i>	<i>\$ 0</i>		
10. The requested change in value is justified for the following reasons:					

11. Was home 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 11" on back.
12. If home was not sold but was listed for sale in the last three years, attach a copy of listing agreement or other available evidence.
13. If any improvements were completed in the last three years, show date \_\_\_\_\_ and total cost \$ \_\_\_\_\_
14. Do you intend to present the testimony or report of a professional appraiser?  Yes  No  Unknown
15. If you have filed a prior complaint on this home 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 home was sold in an arm's length transaction.  The home lost value due to a casualty.
- A substantial improvement was added to the home.  Occupancy change of at least 15% had a substantial economic impact on my property.

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 1/7/25 Complainant or agent Lorene B. Baker Signature Title (if agent) January 7, 2025

Sworn to and signed in my presence, this \_\_\_\_\_ day of \_\_\_\_\_ year \_\_\_\_\_

Notary \_\_\_\_\_ Signature

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

2024 JAN 16 10:11 AM

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

	<b>Name</b>	<b>Street address, City, State, ZIP code</b>	
1. Owner of property	Scott L Saari	143 Harvey Parkway, Avon Lake, OH 44012	
2. Complainant if not owner			
3. Complainant's agent			
4. Telephone number and email address of contact person 440-670-6112 Scott_L_Saari@yahoo.com			
5. Complainant's relationship to property, if not owner Self			
If more than one parcel is included, see "Multiple Parcels" Instruction.			
6. Parcel numbers from tax bill		Address of property	
04-00-019-110-010		143 Harvey Parkway, Avon Lake, OH 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
04-00-019-110-010	\$199,640	\$238,000	\$38,360
9. The requested change in value is justified for the following reasons: Both the average and median price per square foot of the recent sales of similar properties, are considerably lower than the 2024 Current Value (Full Market Value) of my 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 NA and total cost \$ NA.

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.

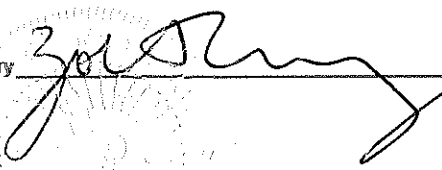
- The complainant has complied with the requirements of R.C. section 5715.19(A)(6)(b) and (7) and provided notice prior to the adoption of the resolution required by division (A)(6)(b) of that section as required by division (A)(7) of that section.

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 1/9/2025 Complainant or agent (printed) Scott L. Saari Title (if agent) Self

Complainant or agent (signature) 

Sworn to and signed in my presence, this 9th day of January 2025

Notary 



ZOE J. CUMMINGS  
Notary Public, State of Ohio  
My Commission Expires  
June 21, 2028

Tax year 2024 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.

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.

	<b>Name</b>	<b>Street address, City, State, ZIP code</b>	
1. Owner of property	Mary Smik	3000 W Erie Ave. Lorain, Oh 44053	
2. Complainant if not owner	Mary Smik		
3. Complainant's agent			
4. Telephone number and email address of contact person    440-240-8605    maryoffour@hotmail.com			
5. Complainant's relationship to property, if not owner			
<b>If more than one parcel is included, see "Multiple Parcels" Instruction.</b>			
6. Parcel numbers from tax bill		Address of property	
02-02-022-101-021		3000 W Erie Ave. Lorain, OH 44053	
7. Principal use of property <u>Residential</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
02-02-022-101-021	\$819,000.00	\$1,406,660.00	(\$587,660.00)
9. The requested change in value is justified for the following reasons: Should be \$615,000.00 from 2022 complaint files and corrected from appraisal then - approved 07/07/2022 Recent bank appraisal, attached dated 10/16/2024 was \$819,000.00			

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.
- A substantial improvement was added to the property.
- The property lost value due to a casualty.
- 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 1/8/2025 Complainant or agent (printed) Mary Smik Title (if agent) \_\_\_\_\_

Complainant or agent (signature) *Mary Smik*

Sworn to and signed in my presence, this 1-8-2025 day of Jan 2025  
(Date) (Month) (Year)

Notary *Michelle Burge*

