

Tax year 2023 BOR no. _____
County Lorain Date received _____

LORAIN COUNTY
BOARD OF REVISION

Complaint Against the Assessment of Real Property Other than Market Value

Use this form to file board of revision complaints regarding assessment issues other than the market value of property. Complaints against market value should be filed on the DTE Form 1. Answer all questions and type or print all information. Read the instructions on the back before completing form. Attach additional pages as necessary.

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

1) Owner of property		Chad + Sarah Senghas		43300 Parsons Rd Lagrange, OH 43050	
2) Complainant if not owner					
3) Complainant's agent					
4) Telephone number of contact person		216-509-4532		440-935-4900	
5) Email address of complainant		sarah.senghas@windstream.net		chad.senghas@windstream.net	
6) Complainant's relationship to property, if not owner				windstream.net	
If more than one parcel number is included, see "Multiple Parcels" on back					
7) Parcel number from tax bill	# Acres, if applicable	Address of property			
0900104000008	16	St Rte 58 Oberlin			
0900105000021	54.67				
0900105000020	0.59				
8) Indicate the reason for this complaint:					
<input type="checkbox"/> The classification of property under RC 5713.041. <input checked="" type="checkbox"/> The classification of property under RC 319.302. <input type="checkbox"/> The denial of a CAUV application filed under RC 5713.32 or the conversion of CAUV property under RC 5713.35. <input type="checkbox"/> The valuation of property on the agricultural land tax list. <input type="checkbox"/> Determination whether good cause exists for land on the CAUV program to remain idle under RC 5713.30(A)(4). <input type="checkbox"/> Determination of whether good cause exists for the failure to file a CAUV renewal application pursuant to RC 5713.351. <input type="checkbox"/> The denial of the partial exemption of a qualifying child care center under RC 323.16.					
9) If the complaint is seeking a change in the value of the property, complete line 9. Complainants appealing other issues do not need to complete this line.					
Parcel number	Column A Complainant's Opinion of Value (Full Market Value)	Column B Current Value (Full Market Value)	Column C Change in Value		

10) The requested change is justified for the following reasons: Bought this 71 acres of farmland in Feb. 2023. Did not transfer CAUV from previous farmer. Have farmed it in 2023 and 2024 (soybeans) Need to register land as CAUV and not pay back taxes

11) 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 penalty 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 1/9/25 Complainant or agent Sarah Senghas Title (if agent) _____

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

Notary _____ Signature



MICHELLE ANN PULLIN
NOTARY PUBLIC - OHIO
MY COMMISSION EXPIRES
01-30-26

Clear Form

DTE 1
Rev. 12/22

Tax year 2024 BOR no. _____
 County Lorain Date received _____

LORAIN COUNTY
BOARD OF REVISION
2024 JAN 18 AM 1:01

Complaint Against the Valuation of Real Property

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

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

Original complaint Counter complaint

Notices will be sent only to those named below.

	Name	Street address, City, State, ZIP code	
1. Owner of property	Matthew and Kathleen Midea	32444 Legacy Pointe Pkwy	
2. Complainant if not owner			
3. Complainant's agent		32444 Legacy Pointe Pkwy Avon Lake OH 44012 United States	
4. Telephone number and email address of contact person <u>1-972-268-1304</u> <u>Kathymidea@gmail.com</u>			
5. Complainant's relationship to property, if not owner			
If more than one parcel is included, see "Multiple Parcels" Instruction.			
6. Parcel numbers from tax bill		Address of property	
04-00-020-101-194		32444 Legacy Pointe Pkwy Avon Lake OH 44012 United States	
7. Principal use of property <u>Residence</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
04-00-020-101-194	\$780,000	841,700	61,700 or 7.91%
9. The requested change in value is justified for the following reasons: Previous value \$669,380. Purchased September 2020 for \$675,000. Original: Roof, Appliances, Windows, Garage door, Flooring, Cabinet and Door Hardware, Light Fixtures, Exterior Siding, Interior and Exterior Paint, Carpets, and Furnace.			

10. Was property sold within the last three years? Yes No Unknown If yes, show date of sale September 19, 2020
 and sale price \$ \$675,000 ; and attach information explained in "Instructions for Line 10" on back.

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

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

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