

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.

2027-01-01 15:01:57
 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 | Kristina Edmison | 5015 E Lake Rd. Sheffield Lake, OH 44054 | |
| 2. Complainant if not owner | | | |
| 3. Complainant's agent | | | |
| 4. Telephone number and email address of contact person <u>216-536-1430</u> <u>kristyedmison@yahoo.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 | | |
| | | | |
| | | | |
| | | | |
| 7. Principal use of property | | | |
| 8. The increase or decrease in market value sought. Counter-complaints supporting auditor's value may have -0- in Column C. | | | |
| Parcel number | Column A Complainant's Opinion of Value (Full Market Value) | Column B Current Value (Full Market Value) | Column C Change in Value |
| 03-00-035-101-003 | 380,000 | 523,710 | 143,710 |
| | | | |
| | | | |
| 9. The requested change in value is justified for the following reasons: Separate individual appraisal was conducted and is attached to this document. | | | |

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

Clear Form

DTE 1
Rev. 12/22

Tax year _____ BOR no. _____

County _____ Date received _____

LORAIN COUNTY
BOARD OF

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 | ROBERT & LINDA CASSESE | 16591 CHAMBERLAIN RD GRAFTON TWP, OH 44044 | |
| 2. Complainant if not owner | | | |
| 3. Complainant's agent | | | |
| 4. Telephone number and email address of contact person 440-926-1221 | | | |
| 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 | |
| 16-00-041-000-040 | | 16591 CHAMBERLAIN RD GRAFTON TWP. OH 44044 | |
| 7. Principal use of property ONLY 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 |
| 16-00-041-000-040 | 256,760.00 | 331,720.00 | |
| | | | |
| 9. The requested change in value is justified for the following reasons: PLEASE SEE THE ATTACHED STATEMENT | | | |

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

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

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

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

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

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

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


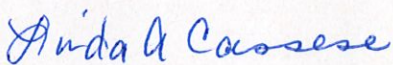
15. If the complainant is a legislative authority and the complaint is an original complaint with respect to property not owned by the complainant, R.C. 5715.19(A)(8) requires this section to be completed.

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

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

Date JAN 10, 2025 Complainant or agent (printed) ROBERT E. CASSESE Title (if agent) _____

LINDA A. CASSESE

Complainant or agent (signature)  

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

Notary _____

Tax year 2024 BOR no. _____

DTE 1
Rev. 12/22

LORAIN COUNTY
BOARD OF REVISION

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.

2024 JAN 21 PM 11:21

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 | Dale & Robin Mayda | 7312 Case Rd, N Ridgeville, Ohio, 44039 | |
| 2. Complainant if not owner | | | |
| 3. Complainant's agent | | | |
| 4. Telephone number and email address of contact person 440-371-6676 gcrd2012@outlook.com | | | |
| 5. Complainant's relationship to property, if not owner | | | |
| If more than one parcel is included, see "Multiple Parcels" Instruction. | | | |
| 6. Parcel numbers from tax bill | | Address of property | |
| 07-00-046-106-014 | | 7312 Case Rd, North Ridgeville, Ohio 44039 | |
| | | | |
| | | | |
| 7. Principal use of property Residential Primary Home | | | |
| 8. The increase or decrease in market value sought. Counter-complaints supporting auditor's value may have -0- in Column C. | | | |
| Parcel number | Column A Complainant's Opinion of Value (Full Market Value) | Column B Current Value (Full Market Value) | Column C Change in Value |
| 07-00-046-106-014 | \$180,000.00 | \$251,750.00 | \$71,750 |
| | | | |
| | | | |
| 9. The requested change in value is justified for the following reasons: The valuation \$251,750 is an 80 percent increase to \$175 per sq foot. Surrounding properties averaged \$97 for 2023 and increased to \$127 per sq ft average for 2024. We are seeking \$125 per sq ft for 7312 Case Rd. see the attached for details. | | | |

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 7/2024 and total cost \$ \$7500.

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 12/26/2024 Complainant or agent (printed) Dale Mayda Title (if agent) _____

Complainant or agent (signature) *Dale Mayda*

Sworn to and signed in my presence, this 26th day of December 2024
(Date) (Month) (Year)

Notary *Patricia A. Simon*



PATRICIA A. SIMON
NOTARY PUBLIC, STATE OF OHIO
My Commission Expires June 19, 2027

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

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 | | Name: <u>Donel Sprenger</u> | | Street address, City, State, ZIP code: <u>2200 Baumhart Rd. Vermilion, OH 44089</u> | |
| 2) Complainant if not owner | | | | | |
| 3) Complainant's agent | | | | | |
| 4) Telephone number of contact person | | | | | |
| 5) Email address of complainant | | <u>baumhartberryfarm@yahoo.com</u> | | | |
| 6) Complainant's relationship to property, if not owner | | | | | |
| 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 | |
| <u>0100038000051</u> | | | | <u>Baumhart Berry Farm</u> | |
| <u>0100038000040</u> | | | | <u>2200 Baumhart Rd.</u> | |
| | | | | <u>Vermilion, OH 44089</u> | |
| 8) Indicate the reason for this complaint: | | | | | |
| <input type="checkbox"/> The classification of property under RC 5713.041. <input type="checkbox"/> The classification of property under RC 319.302. <input checked="" 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: 10

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 1/21/25 Complainant or agent Donel Sprenger Title (if agent) Owner
Signature

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

Notary _____
Signature

Instructions for Completing DTE 2

DTE 2
Rev. 12/22

FILING DEADLINE: A COMPLAINT FOR THE CURRENT TAX YEAR MUST BE RECEIVED BY THE COUNTY AUDITOR ON OR BEFORE MARCH 31 OF THE FOLLOWING TAX YEAR OR THE LAST DAY TO PAY FIRST-HALF TAXES WITHOUT A PENALTY, WHICHEVER DATE IS LATER. A COUNTER-COMPLAINT MUST BE FILED WITHIN 30 DAYS AFTER RECEIPT OF NOTICE FROM THE AUDITOR THAT AN ORIGINAL COMPLAINT HAS BEEN FILED.

WHO MAY FILE: Any person owning taxable real property in the county, the board of county commissioners, the county prosecutor, the county treasurer, the board of township trustees of any township with territory in the county, the board of education of any school district with territory in the county, or the mayor or legislative authority of any municipal corporation with territory in the county may file a complaint, or a tenant of the property owner, if the property is classified as to use for tax purposes as commercial or industrial, the lease requires the tenant to pay the entire amount of taxes charged against the property, and the lease allows, or the property owner otherwise authorizes, the tenant to file such a complaint with respect to the property. See R.C. 5715.19 for additional information.

TENDER PAY: If the owner of a property files a complaint that seeks a reduction in the taxable value of that property, the owner is entitled to tender to the county treasurer an amount of taxes based on the valuation claimed for the property in the complaint. NOTE: if the amount tendered is less than the amount finally determined, interest will be charged on the difference. In addition, if the amount finally determined equals or exceeds the amount originally billed, a penalty will be charged on the difference between the amount tendered and the original amount.

MULTIPLE PARCELS: Only parcels that (1) are in the same taxing district and (2) have identical ownership may be included in one complaint. Otherwise, separate complaints **must** be used. However, for ease of administration, parcels that are (1) in the same taxing district, (2) have identical ownership, and in the case of complaints challenging the eligibility of property for CAUV, (3) are farmed as a single economic unit should be included in one complaint. The increase or decrease in valuation may be separately stated for each parcel or listed as an aggregate sum for the economic unit. If more than three parcels are included in one complaint, use additional sheets of paper.

GENERAL INSTRUCTIONS: The Board of Revision will notify all parties not less than ten days prior to the hearing of the time and place the complaint will be heard. The complainant should submit any documents supporting the complaint to the Board prior to the hearing. The Board may also require the complainant and/or owner to provide the Board with additional information be filed with the complaint and may request additional information at the hearing.

R.C. 5715.19(G) provides that "a complainant shall provide to the Board of Revision all information or evidence within the complainant's knowledge or possession that affects the real property" in question. Evidence or information that is not presented to the Board cannot later be presented on any appeal, unless good cause is shown for failure to present such evidence to the Board.

NOTICE REGARDING LINE 5: If the county auditor is in possession of an email address for you the auditor may choose to send any notices the auditor is required to send regarding this complaint by email and regular mail instead of by certified mail.

INSTRUCTIONS FOR LINE 8. Following is a brief description of the types of complaints that can be filed by using this form. Complaints against the market value of property should be filed on the DTE Form 1.

The classification of property under RC 5713.041. Check this box if the complaint is contesting the classification of the property based on its primary use or, in the case of vacant land, its highest and best use, or the failure to tax mineral rights separately from land that is used for agricultural purposes.

The classification of property under RC 319.302. Check this box if the complaint is contesting whether the property is eligible for the non-business tax credit for qualifying levies.

The denial of a CAUV application filed under RC 5713.32 or the conversion of CAUV property under RC 5713.35. Check this box if the complaint is contesting the denial of an initial CAUV application or the removal of property from the CAUV program and the subsequent billing of recoupment.

The valuation of property on the agricultural land tax list. Check this box if the complaint is contesting the auditor's application of the CAUV Table to the property, e.g. listing land as cropland which the complainant believes should be listed as conservation or woodland property, or if the complaint is contesting the accuracy of the value in the CAUV Table as it relates to the property. Note that the complainant will be required to prove that the alternative value is more accurate using valid sales data. See OAC 5703-25-34(L).

Determination whether good cause exists for land on the CAUV program to remain idle under RC 5713.30(A)(4). Check this box if the complaint is seeking this finding to allow CAUV property to remain idle for a second year.

Determination of whether good cause exists for the failure to file a CAUV renewal application pursuant to RC 5713.351. Check this box if the complaint is seeking this finding to have the property reinstated in the CAUV program following the failure to file or timely file a renewal application.

Denial of the partial exemption of a qualifying child care center under RC 323.16. Check this box if the complaint is seeking reversal of the county auditor's denial of an Application for the Partial Exemption of a Qualifying Child Care Center, DTE 105J.

Instructions for Line 9. In Column A enter the complainant's opinion of the full market value of the parcel before the application of the 35% percent listing percentage. In Column B enter the current full market value of the parcel. This will be equal to the total taxable value as it appears on the tax bill divided by 0.35. Enter the difference between Column B and Column A in Column C.

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

LEWIS COUNTY
 BOARD OF REVENUE

Complaint Against the Valuation of Real Property

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

2024 JAN 21 PM 3:57

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.

| 1. Owner of property | | Frederick J. Surdock | | 11429 Martha Drive | |
|---|---|--|-----------------------------|--------------------|--|
| 2. Complainant if not owner | | | | | |
| 3. Complainant's agent | | | | | |
| 4. Telephone number and email address of contact person | | 440-458-5546 hssewsquilts@windstream.net | | | |
| 5. Complainant's relationship to property, if not owner | | | | | |
| If more than one parcel is included, see "Multiple Parcels" Instruction. | | | | | |
| 6. Parcel numbers from tax bill | | | Address of property | | |
| 10-00-006-119-009 | | | 11429 Martha Drive | | |
| 7. Principal use of property <u>primary 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 | | |
| 10-00-006-119-009 | 160,000.00 | 206,000.00 | -46,000 | | |
| | | | | | |
| 9. The requested change in value is justified for the following reasons: We strongly believe that the auditor has overstated the real value of the parcel above. | | | | | |

10. Was property sold within the last three years? Yes No Unknown If yes, show date of sale _____
 and sale price \$ _____ ; and attach information explained in "Instructions for Line 10" on back.
11. If property was not sold but was listed for sale in the last three years, attach a copy of listing agreement or other available evidence.
12. If any improvements were completed in the last three years, show date _____ and total cost \$ _____
13. Do you intend to present the testimony or report of a professional appraiser? Yes No Unknown

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

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

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

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

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

Date 01/08/2025 Complainant or agent (printed) Frederick J. Surdock Title (if agent) _____

Complainant or agent (signature) *Frederick J. Surdock*

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

Notary *[Signature]*



MICHELLE HENRY
NOTARY PUBLIC
STATE OF OHIO
My Commission Expires
August 1, 2029

Clear Form

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

DTE 1
Rev. 12/22

Complaint Against the Valuation of Real Property

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

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

Original complaint Counter complaint

Notices will be sent only to those named below.

| | Name | Street address, City, State, ZIP code | |
|---|---|--|-----------------------------|
| 1. Owner of property | James P. and Linda P. Errickson | 590 Brennans Court, Avon Lake OH 44012 | |
| 2. Complainant if not owner | | | |
| 3. Complainant's agent | | | |
| 4. Telephone number and email address of contact person 440-552.5459 jericksonalo@gmailo.com | | | |
| 5. Complainant's relationship to property, if not owner | | | |
| If more than one parcel is included, see "Multiple Parcels" Instruction. | | | |
| 6. Parcel numbers from tax bill | | Address of property | |
| 04-00-029-107-016 | | 590 Brennans Court, Avon Lake, OH 44012 | |
| | | | |
| 7. Principal use of property | | | |
| 8. The increase or decrease in market value sought. Counter-complaints supporting auditor's value may have -0- in Column C. | | | |
| Parcel number | Column A Complainant's Opinion of Value (Full Market Value) | Column B Current Value (Full Market Value) | Column C Change in Value |
| 04-00-029-107-016 | \$330,010 | 314,060 | 0 |
| | See multi-page attachment | Proposed Value for 2025 | Difference |
| 04-00-029-107-016 | \$330,010 | \$389,340 | (\$59,330) |
| 9. The requested change in value is justified for the following reasons: | | | |
| See dicsussion, calculations and proposed valuation for 2025 in multi-page attachment | | | |

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

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

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

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

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

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

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

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

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

Date 01/14/2025 Complainant or agent (printed) James and Linda Erickson Title (if agent) _____

Complainant or agent (signature) *James & Linda P. Erickson*

Sworn to and signed in my presence, this 15th day of January 2025
(Date) (Month) (Year)

Notary *Steven B. Garrett*



STEVEN B GARRETT
Notary Public
State of Ohio
My Comm. Expires
June 22, 2026