J	D.	ΓΕ		2
20V	1	21	2	2

Tax year	BOR no.			Rev. 12/22
County_	Date rec	eived _		
204.70	the Assessment of Rea	_		
Complaint Against	the Assessment of Rea	I Pro	perty Other tha	an Market Value
Use this form to file board of revisagainst market value should be file	sion complaints regarding assessment ed on the DTE Form 1. Answer all que e back before completing form. Attach	issues stions a additio	other than the market val and type or print all inform anal pages as necessary.	ue of property. Complaints
	Original complaint			
	Notices will be sent only to the	se nar		
1) 0	Name			City, State, ZIP code
1) Owner of property	Dan a Squire Trofee		41491 Biggs Rd	Lagrange, OH 44050
2) Complainant if not owner				
3) Complainant's agent				
4) Telephone number of contact per	son			
5) Email address of complainant				
6) Complainant's relationship to pro				
	than one parcel number is included			СК
7) Parcel number from tax bill	# Acres, if applicable		ess of property	1
5-00-003-000-004			les whitehoad Rd	
15-00-003-000-005	28	191	of wholehead ald	Cagrange, Al 44090
		+		
8) Indicate the reason for this comp	loint:			
 ☐ The valuation of property on t ☐ Determination whether good of the denial of the partial exemptor. 	on filed under RC 5713.32 or the conver	m to rei enewal inder F	main idle under RC 5713.3 application pursuant to RC 5 RC 323.16.	30(A)(4). 5713.351.
complete this line.				
Column A Parcel number Complainant's Opinion of Va (Full Market Value)		(Column B Current Value Full Market Value)	Column C Change in Value
		_		
		-		
complainant, R.C. 5715.19(A)(8 The complainant has complie		inal cor 5715.1	mplaint with respect to pro	ovided notice prior to the
edge and belief is true, correct, and	olainant or agent Scan Scignature	rui.	Title (if agent)	and to the best of my knowl- TRUSTEE year 2024

Clear Form

ours to Fa		Tax year 2024		_ BC	PR no		DTE 1 Rev. 12/22
LUROZIN COUNT Tax year 2024 BOARD OF REVISION Lorain Complaint Against					te received		
Answer all gues	tionsar	nd type or print all inf Attach add Il market value comp	formation. Read ditional pages if laints only. All complaint	instru nece other o ounter	complaints should use I complaint	completing form.	
Notices will be sent only to those named below. Name Street address, City, State, ZIP co			de				
Owner of property		Thomas and H	Thomas and Helen Falencki 37089 Butternut Ridge Rd.,N.Ridgeville		ille,OH		
Complainant if not owne	r						
Complainant's agent							
4. Telephone number and 6	email ad	dress of contact perso	_n 440-667-107	8 hfal	encki@gmail.com		
5. Complainant's relationsh	nip to pro	perty, if not owner					
	lf mo	re than one parcel is	included, see "	Multip	le Parcels" Instruction.		
6. Parcel numbers from tax bill			Address of property				
11-00-072-000-074		074	37089 Butternut Ridge Rd., North Ridgeville, OH 44039				39
7. Principal use of property							
8. The increase or decrease	e in marl	ket value sought. Coun	nter-complaints su	pporti	ng auditor's value may hav	ve -0- in Column C	e
Parcel number	Co	Column A omplainant's Opinion of Value (Full Market Value)		(Column B Current Value Full Market Value)	Column Change in \	
11-00-072-000-074		\$570,000			\$725,100	\$155,10	0
The requested change in Certified appraisal report		5		ompa	ired to county's market	value.	
10. Was property sold with	in the la	st three years?	es 🗹 No 🗌 U	Inknov	wn If yes, show date of sa	ale N/A	
					nstructions for Line 10" on		
11. If property was not sold							
12. If any improvements w	ere com	pleted in the last three	years, show date	e(r	none) and total	al cost \$	•
13. Do you intend to prese	nt the te	stimony or report of a	professional app	raiser′	? Yes No Ur	nknown	

14. If you have filed a prior complaint on this parcel since the last reapp for the valuation change requested must be one of those below. Please section 5715.19(A)(2) for a complete explanation.	check all that apply and explain on attached sheet. See R.C.
☐ The property was sold in an arm's length transaction. ☐ T	he property lost value due to a casualty.
	occupancy change of at least 15% had a substantial omic impact on my property.
15. If the complainant is a legislative authority and the complaint is an complainant, R.C. 5715.19(A)(8) requires this section to be completed.	riginal complaint with respect to property not owned by the
The complainant has complied with the requirements of R.C. se adoption of the resolution required by division (A)(6)(b) of that so	ction 5715.19(A)(6)(b) and (7) and provided notice prior to the ection as required by division (A)(7) of that section.
	JALENCICI
DateComplainant or agent (printed)	Title (if agent)
Complainant or agent (signature)	<u>. </u>
Sworn to and signed in my presence, this	day of January 2025
Notary Dollary (Date)	BETH ANN CUSON Notary Public, State of Ohio My Commission Expires November 15, 2027 COMMISSION: 2022-RE-856356

Tax year_	BOR no.			Rev. 12/22
BOARD GOUNTY		eived _		_
Use this form to file board of revis against market value should be file	the Assessment of Rea on complaints regarding assessment d on the DTE Form 1. Answer all que- back before completing form. Attach of Original complaint of Notices will be sent only to the	issues o stions a addition Counter	other than the market valund type or print all informal pages as necessary.	ue of property. Complaints
	Name		Street address,	City, State, ZIP code
1) Owner of property	Manus McCaffery/Kristen Brinke	Manus McCaffery/Kristen Brinker 18958 SR58, Wellington, OH, 440		ellington, OH, 44090
2) Complainant if not owner				
3) Complainant's agent				
4) Telephone number of contact per	son		(440) 336-7430	
5) Email address of complainant	0 99 99	manus	mccaffery@yahoo.com	
6) Complainant's relationship to prop		//B	* 10' 1 Pa 1 1 1 1 1	T _a
	han one parcel number is included # Acres, if applicable	1	ess of property	:K
7) Parcel number from tax bill 1400 136 00000 4	# Acres, ii applicable	Addre	18985 SR58,Wellin	aton, OH 44090
1400 1450000005	02	 	10000 01100,1101111	igion, orrivous
14001430000000		\vdash		
☐ The valuation of property on the ☐ Determination whether good ca ☐ Determination of whether good co ☐ The denial of the partial exem 9) If the complaint is seeking a change complete this line.	under RC 319.302. on filed under RC 5713.32 or the conve	m to ren enewal a under R e line 9.	nain idle under RC 5713.3 application pursuant to RC 5 C 323.16.	0(A)(4). 5713.351.
		1		
11) If the complainant is a legislative complainant, R.C. 5715.19(A)(8) The complainant has complied	authority and the complaint is an originating requires this section to be completed with the requirements of R.C. section quired by division (A)(6)(b) of that section	inal con 5715.1	nplaint with respect to pro 9(A)(6)(b) and (7) and pro	operty not owned by the
edge and belief is true, correct, and	lainant or agent	nents) h	Title (if agent) Title (if agent) Notary Public, State of My Commission Exp June 18, 2027	year <u>J025</u>