

Clear Form

Tax year 2024 BOR no. _____
 County Contra 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	<u>Thomas Paramore Jr</u>	<u>634 West Herrick Ave Wellington, OH 44090</u>	
2. Complainant if not owner			
3. Complainant's agent			
4. Telephone number and email address of contact person <u>440-225-7388</u> <u>440Paramore@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		
<u>18-00-028-101-009</u>	<u>634 West Herrick Ave Wellington OH 44090</u>		
7. Principal use of property <u>nothing storage</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
<u>18-00-028-101-009</u>	<u>99,220</u>	<u>127,390</u>	<u>28,170</u>
9. The requested change in value is justified for the following reasons: <u>everything needs fixed floors, doors, ceilings,</u> <u>roof, walls, cracks in walls / Blocks / gutters</u>			

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 0 and total cost \$ 0.

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.

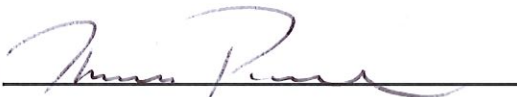
- ☐ The property was sold in an arm's length transaction. ☐ The property lost value due to a casualty.
- ☐ A substantial improvement was added to the property. ☐ Occupancy change of at least 15% had a substantial economic impact on my property.

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 3-27-2025 Complainant or agent (printed) Thomas Paramore Title (if agent) _____

Complainant or agent (signature) 

Sworn to and signed in my presence, this 27th day of march 2025
(Date) (Month) (Year)

Notary Rebecca L Johnson



REBECCA L JOHNSON
Notary Public
State of Ohio
My Comm. Expires
November 13, 2026

Clear Form

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Rev. 12/22

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Complaint Against the Valuation of Real Property

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☐ Original complaint ☐ Counter complaint

Notices will be sent only to those named below.

	Name	Street address, City, State, ZIP code
1. Owner of property	RUTH E. WATSON	52258 ST RT 113, AMHERST, OH 44001
2. Complainant if not owner		
3. Complainant's agent		
4. Telephone number and email address of contact person 440-965-7652 FRED-RUTH WATSON @ZOOMINTERNET.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
08-00-098-000-002	52258 ST. RT 113, AMHERST, OH 44001
08-00-098-000-038	" " "

7. Principal use of property PRIMARY RESIDENCE, STEER BARN, PASTURE, MAPLE SYRUP PRODUCTION

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
08-00-098-000-002	\$370,700	\$427,860	\$57,160
08-00-098-000-038	\$15,330	\$26,410	11,080

9. The requested change in value is justified for the following reasons: appraiser's valuation, 1965 bldg. has no bedroom or bath as noted on Auditor's website. 2 buildings are in very rough shape. Bldg have dirt floors. Second parcel is not a buildable lot because of township frontage requirement of 300' frontage per set floods in the spring has large hole from large underground pipe.

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 3/26/2025 Complainant or agent (printed) RUTH WATSON Title (if agent) _____

Complainant or agent (signature) Ruth Watson

State of Ohio, County of Erie

Sworn to and signed in my presence, this 26th day of March 2025
(Date) (Month) (Year)

Notary Chloe Browne



CHLOE BROWNE
Notary Public
State of Ohio
My Comm. Expires
January 4, 2028

Tax year _____ BOR no. _____

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Attach additional pages if necessary.

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☐ Original complaint ☐ Counter complaint

Notices will be sent only to those named below.

	Name	Street address, City, State, ZIP code	
1. Owner of property	DARLENE VUKELIC	3442 DAYTON AVENUE	
2. Complainant if not owner		LORAIN, OH 44055-1038	
3. Complainant's agent			
4. Telephone number and email address of contact person 440-541-4624			
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	
0201003231014		3442 DAYTON AVENUE	
		LORAIN, OH 44055-1038	
7. Principal use of property SINGLE FAMILY 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
0201003231014	65,000 65,000	45,460.00 DV	30,000 00 DV
9. The requested change in value is justified for the following reasons: THIS IS ONLY A 2 BEDROOM HOME OF 936 ^{sq} ft, 1 BATH. NEEDS DRIVEWAY AND SIDING. NEIGHBORING HOME IS A MESS. IS NOW CONSIDERED A TRANSITIONAL AREA WITH MANY RENTALS. ROAD IS IN POOR SHAPE. COMPS IN AREA, THIS AGE, 55-70,000 (2 BEDROOM).			

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 3-27-2025 Complainant or agent (printed) DARLENE VUKELIC Title (if agent) _____

Complainant or agent (signature) *Darlene Vukelic*

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

Notary _____

Clear Form

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☒ Original complaint ☐ Counter complaint

Notices will be sent only to those named below.

	Name	Street address, City, State, ZIP code	
1. Owner of property	Douglas Dumont	152 North Park Street	
2. Complainant if not owner	—	Oberlin, OH 44074	
3. Complainant's agent	—		
4. Telephone number and email address of contact person (612) 812-0612 DHD323@gmail.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		
0900076103056	152 North Park Street		
0900076103087	Oberlin Ohio 44074		
0900076103088			
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
090076103056	\$ 6,000	\$ 6,000	
090076103087	\$ 9,580	\$ 9,580	
090076103088	\$ 176,460.00	\$ 275,660	-\$ 100,000
9. The requested change in value is justified for the following reasons: Property was appraised prior to sale, at \$230,000. There were NO IMPROVEMENTS MADE since purchase → the increase of 64% valuation without any justification is highly suspicious, and uncalled for.			

10. Was property sold within the last three years? ☒ Yes ☐ No ☐ Unknown If yes, show date of sale 8/1/2023
 and sale price \$ 230,000 ; 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 NO IMPROVEMENTS 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.

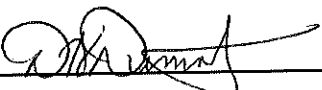
- ☐ The property was sold in an arm's length transaction. ☐ The property lost value due to a casualty.
- ☐ A substantial improvement was added to the property. ☐ Occupancy change of at least 15% had a substantial economic impact on my property.

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.

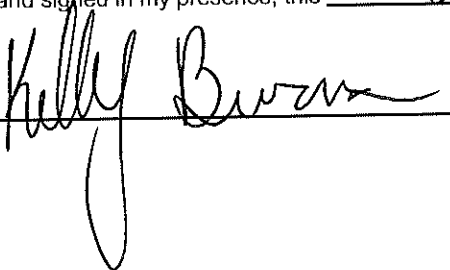
- ☐ The complainant has complied with the requirements of R.C. section 5715.19(A)(6)(b) and (7) and provided notice prior to the adoption of the resolution required by division (A)(6)(b) of that section as required by division (A)(7) of that section.

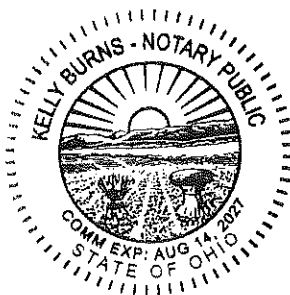
I declare under penalties of perjury that this complaint (including any attachments) has been examined by me and to the best of my knowledge and belief is true, correct and complete.

Date 3/26/2025 Complainant or agent (printed) Douglas H. Diamond Title (if agent) NA

Complainant or agent (signature) 

Sworn to and signed in my presence, this 26th day of March 2025
(Date) (Month) (Year)

Notary 



Tax year 2024

BOR no. _____

DTE 1
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Complaint Against the Valuation of Real Property

Answer all questions and type or print all information. Read instructions

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EXHIBIT**A**

T13669-24	Name	Street address, City, State, ZIP code	
1. Owner of property	WF Auto of Avon Realty LLC	Billy McVeigh Midwest Property Tax Associates 8598 Cotter Street Lewis Center, OH 43035	
2. Complainant if not owner	N/A		
3. Complainant's agent	Todd W. Sleggs Sleggs, Danzinger & Gill Co., LPA	820 W. Superior Ave., 7 th Floor Cleveland, OH 44113	
4. Telephone number and email address of contact person (216) 771-8990 jfisher@sdglegal.net			
5. Complainant's relationship to property, if not owner <u>N/A</u>			
If more than one parcel is included, see "Multiple Parcels" Instruction.			
6. Parcel numbers from tax bill	Address of property		
04-00-009-000-132	37995 Chester Rd		
	Avon		
7. Principal use of property auto dealership			
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
04-00-009-000-132	7,300,000	9,619,950	- 2,319,950
9. The requested change in value is justified for the following reasons: Recent sale(s) of comparable properties. Physical, economic, functional depreciation or obsolescence. Economic valuation based on gross or net income.			

10. Was property sold within the last three years? ☐ Yes ☒ No ☐ Unknown If yes, show date of sale N/Aand sale price \$ N/A ; 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. N/A

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

N/A

- ☐ 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.

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- ☐ 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 3/25/2025 Complainant or agent (printed) Todd W. Sleggs Title (if agent) Attorney

Complainant or agent (signature) [Signature]

Sworn to and signed in my presence, this 25th day of March 2025
(Date) (Month) (Year)

Notary Jennifer Fischer



JENNIFER FISCHER
Notary Public, State of Ohio
My Commission Expires:
October 13, 2025

Tax year _____ BOR no. _____

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☐ Original complaint ☐ Counter complaint

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	Name	Street address, City, State, ZIP code	
1. Owner of property	DENNIS R. ROSS	24019 EMMONS RD	
2. Complainant if not owner		COLUMBIA STATION	
3. Complainant's agent		OHIO 44028	
4. Telephone number and email address of contact person			
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	
12-00-029-000-044		24019 EMMONS RD	
		COLUMBIA STATION	
		OHIO 44028	
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
12-00-029-000-044	600,300	328,100	272,200
9. The requested change in value is justified for the following reasons: THE VALUE DID NOT GO UP AS THE APPRAISER SHOWS. 55% INCREASE			

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.

R. ROSS

Date 3/25/2025 Complainant or agent (printed) DENNIS Title (if agent) OWNER

Complainant or agent (signature) 

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

Notary _____

Tax year _____ BOR no. _____

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Notices will be sent only to those named below.

	Name	Street address, City, State, ZIP code	
1. Owner of property	NEENA NEWTON	5509 Lavender Ct N Ridgeville OH 44039	
2. Complainant if not owner			
3. Complainant's agent			
4. Telephone number and email address of contact person			
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		
07-00-043105-049	5509 Lavender Ct N Ridgeville OH 44039		
7. Principal use of property <u>Home</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
07-00-043105-049	\$ 300,000 - \$315,000	\$ 332,700	226,220
9. The requested change in value is justified for the following reasons:			

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 07/1/23 and total cost \$ 10,000.13. 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 03/20/2025
03/18/2025 Complainant or agent (printed) NEENA NEWTON Title (if agent) _____

Complainant or agent (signature) Neena Newton

Sworn to and signed in my presence, this 20th day of March 2025
(Date) (Month) (Year)

Notary Pamela R Dingus



PAMELA R DINGUS
NOTARY PUBLIC
FOR THE
STATE OF OHIO
My Commission Expires
June 03, 2025

Clear Form

Tax year _____ BOR no. _____
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Notices will be sent only to those named below.

	Name	Street address, City, State, ZIP code	
1. Owner of property	James J. & Betty A. Stock	48101 Rice Rd., Amherst, Oh 44001	
2. Complainant if not owner			
3. Complainant's agent			
4. Telephone number and email address of contact person 440-984-5735 bettystock222@gmail.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 (4 parcels)	Address of property		
05-00-094-103-067	48101 Rice Rd. Amherst, Oh 44001		
05-00-094-103-014			
05-00-094-103-002	→ 05-00-095-060-088		
7. Principal use of property Residence / Agriculture Farming			
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
05-00-094-103-067	\$292,540.00 Tax Value \$70,130	\$292,540.00	0
05-00-094-103-014	\$9,590.00 Tax Value \$3360.00	9,590.00	0
05-00-094-103-002	\$2,290.00 Tax Value \$800.00	2,290.00	0
05-00-095-103-008	\$1,040.00 Tax Value \$370.00	1,040.00	0
9. The requested change in value is justified for the following reasons: No improvements made			

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 3-21-2025 Complainant or agent (printed) Betty A. Stock Title (if agent) _____

Complainant or agent (signature) Betty A. Stock

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

Notary _____

Tax year 2024 BOR no. _____
County LORAIN 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	ROBERT & DEBORAH FELA	589 BRENNANS CT. AVON LAKE, OH 44012	
2. Complainant if not owner			
3. Complainant's agent			
4. Telephone number and email address of contact person ROBERT FELA, 440-787-3494, rfela@hotmail.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		
04-00-029-108-003	589 BRENNANS CT, 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
04-00-029-108-003	\$320,629	\$354,430	\$ (33,801)

9. The requested change in value is justified for the following reasons: PER THE ATTACHED SPREADSHEET COMPARING THE LCA APPRAISAL OF 4 NEIGHBORING PROPERTIES (1 PROPERTY NEXT DOOR & THE OTHER 3 DIRECTLY ACROSS THE STREET) SHOWS THE FELA APPRAISAL 13% HIGHER THAN THE AVG. OF THE SURROUNDING LIKE PROPERTIES. EVEN MORE CONCERNING, THE FELA FINISHED SQ FT. IS WELL BELOW THE OTHER LIKE PROPERTIES. GIVEN THIS ANALYSIS, A FAIR LCA APPRAISAL FOR THE FELA PROPERTY IS \$320,629 WHICH REPRESENTS A 28% INCREASE. THIS IS CONSISTENT WITH THE NEIGHBORING PROPERTIES.

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 3/25/25 Complainant or agent (printed) ROBERT FELA Title (if agent) _____

Complainant or agent (signature) Robert Fela

Sworn to and signed in my presence, this 3/25/25 day of March 25 2025
(Date) (Month) (Year)

Notary Carole Fischer



CAROLE FISCHLER
NOTARY PUBLIC
STATE OF OHIO
LORAIN COUNTY
MY COMMISSION EXPIRES
03/07/2028

Tax year 2024 BOR no. _____
County LORAIN Date received 2025

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	PAUL & LINDA SCHWEINBERG	6030 OBERLIN ROAD Amherst OH 44001	
2. Complainant if not owner			
3. Complainant's agent			
4. Telephone number and email address of contact person 440.452.2003 PSCHWEINBERG@CENTURYTEL.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		
0500062101088	6030 OBERLIN ROAD Amherst, OH 44001-1828		
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
0500062101088	\$ 110053	\$ 141270	\$ 31217
9. The requested change in value is justified for the following reasons:			

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 0 and total cost \$ 0.
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 3-20-2025 Complainant or agent (printed) Paul Schweinberg Title (if agent) OWNER

Complainant or agent (signature) Paul K. Schweinberg

Sworn to and signed in my presence, this 24th day of March 2025
(Date) (Month) (Year)

Notary 



GILBERTO R NAVARRO
Notary Public, State of Ohio
My Commission Expires
05-10-2025

Tax year _____ BOR no. _____

DTE 1
Rev. 12/22

County _____ 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.

	Name	Street address, City, State, ZIP code	
1. Owner of property	William J. and Amy E. Bracken	17030 East River Rd. Columbia Station, Ohio 44028	
2. Complainant if not owner			
3. Complainant's agent			
4. Telephone number and email address of contact person 440-537-3620. bill@brackenagency.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		
1200033000056	17030 East River Rd. Columbia Station, Ohio 44028		
7. Principal use of property residential			
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
1200033000056	265,000.00	327,830.00	62,830.00
9. The requested change in value is justified for the following reasons: The value of the property has not increased due to majority of property being on a steep hill and FLOOD PLAIN. The hill drops over 100ft and the remaining land is in a documented flood plain that unfortunately floods at times at the height of 4 feet. The property has always and continues to be situated directly on a state route which negatively impacts the value			

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.

- | | |
|--------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> The property was sold in an arm's length transaction. | <input type="checkbox"/> The property lost value due to a casualty. |
| <input type="checkbox"/> A substantial improvement was added to the property. | <input type="checkbox"/> 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 3-27-25 Complainant or agent (printed) Amy Bracken Title (if agent) _____

Complainant or agent (signature) Amy Bracken

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

Notary _____

Tax year 2025 BOR no. _____
 County Lorain 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	Kirk & Elizabeth Rattray	34595 Dye Rd. Columbia Station, OH (Eaton Twp) 44028	
2. Complainant if not owner			
3. Complainant's agent			
4. Telephone number and email address of contact person			
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		
11-00-028-000-053	34595 Dye Rd., Eaton Twp, OH 44028		
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
11-00-028-000-053	432,000 ^{KR SR} \$400,000		
9. The requested change in value is justified for the following reasons: <u>The age of the owners. The age of the home & condition of the home.</u> <u>Unusable front steps. Unusable out bldg due to ground water</u> <u>throughout property. Unusable areas of the lot due to ground water.</u>			

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 10/24 and total cost \$ 31,000.

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

→ new driveway

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.

- | | |
|--------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> The property was sold in an arm's length transaction. | <input type="checkbox"/> The property lost value due to a casualty. |
| <input type="checkbox"/> A substantial improvement was added to the property. | <input type="checkbox"/> 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 03-26-25 Complainant or agent (printed) Elizabeth J. Rattray
Kirk N. Rattray Title (if agent) _____

Complainant or agent (signature) Kirk N. Rattray / Elizabeth J. Rattray

Sworn to and signed in my presence, this 26 day of March 2025
(Date) (Month) (Year)

Notary [Signature]



MICHELLE KUNDROD
Notary Public
State of Ohio
My Comm. Expires
January 21, 2030

Tax year 2024

BOR no. _____

DTE 1
Rev. 12/22County 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.

	Name	Street address, City, State, ZIP code	
1. Owner of property	BROTHERS MANAGEMENT CO. LLC	5555 Colorado Ave, Sheffield Vlg OH 44054	
2. Complainant if not owner			
3. Complainant's agent	DEBORAH K BRUNNER	5522 Schueller Blvd Sheffield Vlg OH 44054	
4. Telephone number and email address of contact person 440-668-0902 ZEKEBRUNNER@GMAIL.COM			
5. Complainant's relationship to property, if not owner partner in the ownership of this property			
If more than one parcel is included, see "Multiple Parcels" instruction.			
6. Parcel numbers from tax bill		Address of property	
04-00-004-101-054		1220 Miller Road Avon, OH 44011	
7. Principal use of property Storage			
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
04-00-004-101-054	146,630	206,630	60,000
9. The requested change in value is justified for the following reasons: The house was removed in OCTOBER 2023. PERMIT WAS OBTAINED FROM CITY OF AVON PRIOR TO DEMOLITION IN SEPTEMBER 2023.			

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 3/22/25 Complainant or agent (printed) DEBORAH K BRUNNER Title (if agent) PARTNER

Complainant or agent (signature) Deborah K. Brunner

Sworn to and signed in my presence, this 22nd day of March 2025

(Date)

(Month)

(Year)

Notary George Elias Badran



Clear Form

Tax year 2024 BOR no. _____
County Lorain 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	Gina Otto	2460 Didrickson Dr, Lorain, Oh 44053	
2. Complainant if not owner			
3. Complainant's agent			
4. Telephone number and email address of contact person 440-334-6163 gincaprio@gmail.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	
02-02-020-104-015		2460 Didrickson Dr, Lorain, Oh 44053	
7. Principal use of property primary 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
0202020104015	\$104,500.00	\$123,450.00	-\$18,950.00
9. The requested change in value is justified for the following reasons: Please see attached.			

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

Attachment for Parcel 02-02-020-104-015

The requested change in value is justified for the following reasons:

I purchase the house on 09/11/2020. When I bought the home, the value of appraised improvement was listed as \$61,500. In 2021 it went up to \$74,970. In 2024 it went up to \$96,670. There have been two major tax hikes in the 4 years I have been in this house. I feel that I have been penalized by the county for overpaying on a house simply because I had to have a place to live while there was a hot market happening. The house looked like it hadn't been touched since the 1960's and is currently in need of repairs and updating which I will slowly address as funds allow.

My property, parcel 0202020104015 / current appraised \$123,450 land 64x180

ID	Yr Built	Fin SqFt	Total Rms	Bed Rm	Full Bath	½ Bath
2217514	1960	1052	5	3	1	1

NOTE: I question the designation of my house as having a ½ bath. There is a toilet in the unfinished basement that is out in the open, not in a separate room of its own. Is this really considered a ½ bath? Also, what is the definition of a framed porch? There is a cement slab with an aluminum awning over it that is being called a "framed porch" on the sketch. If I remove the awning (it is in poor repair) what is it called then?

If indeed every home is reassessed every 6 years, I would expect to see a more uniform valuation for all homes having similar square footage, bedrooms, baths, amenities and property size. I looked at comparable properties in my immediate neighborhood. Of the 6 compared, all but 1 (8' less) had higher finished SqFt and lower appraised value. All compared are similar in construction and year of build. I have highlighted differences that normally should affect a tax evaluation assessment and market price. The finished square footage of livable space is the main factor plus room size, needed updates and additional amenities (pool, fireplace, outbuildings, etc) These comparable homes support my request for a reduction of the 2024 appraised value of my property.

Comparable properties

Parcel 0202020104003 / current appraised \$121,100 land 50x158

ID	Yr Built	Fin SqFt	Total Rms	Bed Rm	Full Bath	½ Bath
2217503	1960	1734	8	5	2	0

Parcel 0202020104004 / current appraised \$88,790 land 60x155

ID	Yr Built	Fin SqFt	Total Rms	Bed Rm	Full Bath	½ Bath
2217504	1959	1064	5	3	1	0

Attachment for Parcel 02-02-020-104-015

Parcel 0202020104002/ current appraised \$105,180 land 60x158

ID	Yr Built	Fin SqFt	Total Rms	Bed Rm	Full Bath	½ Bath
2217502	1960	1202	7	3	1	0

*Parcel 0202020104011/ current appraised \$109,890 land 60 x 184

ID	Yr Built	Fin SqFt	Total Rms	Bed Rm	Full Bath	½ Bath
2217510	1961	1494	7	4	2	0

Parcel 0202020105213/ current appraised \$106,600 land 60 x 120

ID	Yr Built	Fin SqFt	Total Rms	Bed Rm	Full Bath	½ Bath
2217528	1959	1524	7	4	2	0

Parcel 0202020104010/ current appraised \$98,910 land 60 x 164

ID	Yr Built	Fin SqFt	Total Rms	Bed Rm	Full Bath	½ Bath
2217509	1959	1044	5	3	1	0

Thank you for the consideration.

Gina Otto

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.

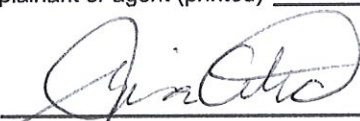
- | | |
|--------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> The property was sold in an arm's length transaction. | <input type="checkbox"/> The property lost value due to a casualty. |
| <input type="checkbox"/> A substantial improvement was added to the property. | <input type="checkbox"/> 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.

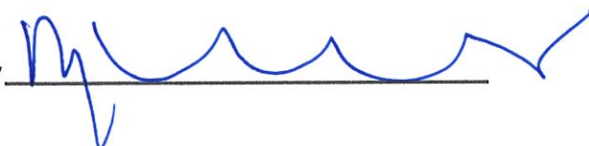
- ☐ The complainant has complied with the requirements of R.C. section 5715.19(A)(6)(b) and (7) and provided notice prior to the adoption of the resolution required by division (A)(6)(b) of that section as required by division (A)(7) of that section.

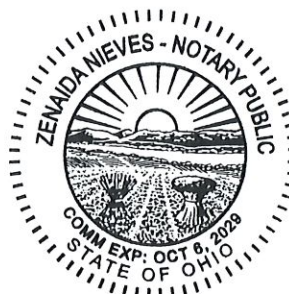
I declare under penalties of perjury that this complaint (including any attachments) has been examined by me and to the best of my knowledge and belief is true, correct and complete.

Date 03/24/25 Complainant or agent (printed) GINA OTTO Title (if agent) _____

Complainant or agent (signature) 

Sworn to and signed in my presence, this 24th day of March 2025
(Date) (Month) (Year)

Notary 



Clear Form

Tax year 2024 BOR no. _____
County LORAIN 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	Peggy A. Johnson	817 West 9th st. Lorain, Ohio 44052	
2. Complainant if not owner			
3. Complainant's agent			
4. Telephone number and email address of contact person (440) 989-6460 pj44055@gmail.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	
02-01-005-120-007		817 West 9th st. Lorain, Ohio 44052	
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
02-01-005-120-007	\$66,260	\$80,600	\$14,340
9. The requested change in value is justified for the following reasons:			

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 4/20 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 03-24-2025 Complainant or agent (printed) Peggy A. Johnson Title (if agent) _____

Complainant or agent (signature) Peggy A. Johnson

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

Notary _____

Clear Form

Tax year 2024 BOR no. _____
County Lorain 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	<u>Donald L + Connie R Hill</u>	<u>21142 State Route 301 Wellington OH</u>	
2. Complainant if not owner	_____	_____	
3. Complainant's agent	_____	_____	
4. Telephone number and email address of contact person <u>440-309-5759</u> <u>chillinohio@hotmail.com</u> <u>Connie</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		
<u>19-04-001-000-42</u>	<u>21142 State Route 301 Wellington OH 44090</u>		
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
<u>19-04-001-000-42</u>	<u>\$350,000[±]</u>	<u>\$400,910</u>	<u>\$50,910</u>
9. The requested change in value is justified for the following reasons: <u>House was built in 1972 and has had no renovations.</u> <u>In need of many updates.</u>			

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 N/A and total cost \$ N/A.

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 _____ Complainant or agent (printed) _____ Title (if agent) _____

Complainant or agent (signature) _____

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

Notary _____

Tax year _____ BOR no. _____

County _____ 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.

	Name	Street address, City, State, ZIP code	
1. Owner of property	RICHARD+DONNA SHLAPACK	3025 NORTH RIDGE ROAD	
2. Complainant if not owner		VERMILION OHIO 44089	
3. Complainant's agent			
4. Telephone number and email address of contact person			
440 522 2948		RD74@ROADRUNNER.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	
010004500021		3025 NORTH RIDGE RD VERMILION, OHIO 44089	
7. Principal use of property PRMT HOME / RESIDENTIAL			
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
010004500021	\$ 325,000	\$372,000	\$47,000
9. The requested change in value is justified for the following reasons: PLEASE SEE THE ATTACHED PAGE: "DEAR LORAIN COUNTY BOARD OF REVISION MEMBERS"			

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

3/24/2025

Dear Lorain County Board of Revision Members,

We respectfully request that you take a look at the increase you have made to our property valuation and the resulting increase to our property tax.

We have attached a chart to show the comparison of appraised value and the resulting property tax increase to our property as opposed to the other houses of similar size on our street. All houses are in the same tax district. There are some huge houses on our street that we did not include as they are obviously in a different classification.

As you will see, our property has the lowest square footage. A large part of the second floor of our house is unfinished attic space. Our house does not have hard wood floors. We have the least expensive type of counter tops, basic type of walk in shower tubs. Our basement is not finished off. We only have a gravel driveway and we only have one low square footage shed.

We have 5 acres, but the back two acres have been continuously farmed since we bought our property. We have a low frontage - with the angle of the street our frontage is 175 feet, but the actual measurement across our lot is 150 feet.

Please note that we have made no improvements to our property except for standard upkeep maintenance.

All of the other houses on our street have larger square footage. Most have pole barns or extra detached garages, more than one shed or very large sheds, and concrete driveways. Our house has one of the highest appraised values - with a resulting increase to our property tax of about 38%. The other houses have an approximate average tax increase of about 21%.

In the attached form, you have asked that we provide our opinion of the value of our home. Taking all of the above into consideration, in our opinion, our property value should be closer to \$325,000.

We appreciate your consideration and time with this matter.

Thank You,

Donna Shlapack

Richard Shlapack

Richard and Donna Shlapack

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 3/24/25 Complainant or agent (printed) RICHARD SHLAPACK Title (if agent) _____

Complainant or agent (signature) Richard Shlapack

Sworn to and signed in my presence, this 24th day of March 2025
(Date) (Month) (Year)

Notary Nicole Burns



NICOLE BURNS
Notary Public
State of Ohio
My Comm. Expires
March 27, 2027

Tax year _____ BOR no. _____

County _____ 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.

	Name	Street address, City, State, ZIP code	
1. Owner of property	DOUGLAS L. HARTSEL	144 TIMBER RIDGE DR. ELYRIA OH 44035	
2. Complainant if not owner			
3. Complainant's agent			
4. Telephone number and email address of contact person 440-320-7954 DHARTSEL144416@GMAIL.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	
10-00-005-107-709		144 TIMBER RIDGE DR. ELYRIA OH. 44035	
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
10-00-005-107-709	\$ 350,000.00	\$ 421,720.00	- \$ 71,720.00
9. The requested change in value is justified for the following reasons: THE PROPERTY WAS APPRAISED BY A CERTIFIED REAL ESTATE APPRAISER. IN HIS PROFESSIONAL OPINION THE PROPERTY IS VALUED AT \$ 350,000.00			

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 NONE 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 3-15-25 Complainant or agent (printed) DOUGLAS L. HARTZ Title (if agent) _____

Complainant or agent (signature) Douglas L. Hartz

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

Notary Sally H. Mealey



SALLY H MEALEY
Notary Public
State of Ohio
My Comm. Expires
March 23, 2028

Clear Form

Tax year 2024 BOR no. _____
County LORAIN 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.

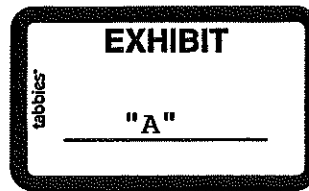
	Name	Street address, City, State, ZIP code	
1. Owner of property	VESTA WESTWAY LLC	175 Powder Forest Dr. Weatogue CT 06089	
2. Complainant if not owner			
3. Complainant's agent	KENNETH J. FISHER, ATTY.	50 Public Sq.#3301 Cleveland OH 44113	
4. Telephone number and email address of contact person (216) 696-7661 kfisher@fisher-lpa.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		
SEE ATTACHED EXHIBIT "A"			
7. Principal use of property Multi-Family Dwellings (Duplex); Office; Vacant Land			
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
SEE ATTACHED			
EXHIBIT "B"			
TOTAL:	\$7,863,040	\$12,523,420	(-)\$4,384,010
9. The requested change in value is justified for the following reasons: The Tax Year 2024 County FMV does not accurately reflect the true FMV of the Subject Property; economic obsolescence.			

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



Parcel Number	Address
0624007101002	1101-1103 Garden
0624007101003	1107-1109 Garden
0624007101004	1113-1115 Garden
0624007101005	1117-1119 Garden
0624007101006	1123-1125 Garden
0624007101007	1127-1129 Garden
0624007101008	1133-1135 Garden
0624007101009	1137-1139 Garden
0624007101010	1143-1145 Garden
0624007101011	1149-1151 Garden
0624007101012	1153-1155 Garden
0624007101013	1159-1161 Garden
0624007101014	1163-1165 Garden
0624007101015	1167-1169 Garden
0624007102001	1100-1102 Garden
0624007102002	1108-1110 Garden
0624007102003	1114-1116 Garden
0624007102004	1120-1122 Garden
0624007102005	1126-1128 Garden
0624007102006	1130-1132 Garden
0624007102007	1136-1138 Garden
0624007102008	1101-1103 Barbara
0624007102009	1107-1109 Barbara
0624007102010	1113-1115 Barbara
0624007102011	1121-1123 Barbara
0624007102012	1125-1127 Barbara
0624007102013	1131-1133 Barbara
0624007103001	1102-1104 Barbara
0624007103002	1106-1108 Barbara
0624007103003	1110-1112 Barbara
0624007103004	1116-1118 Barbara
0624007103005	1122-1124 Barbara
0624007103006	1126-1128 Barbara
0624007103007	1130-1132 Barbara
0624007103008	1134-1136 Barbara
0624007103009	1138-1140 Barbara
0624007103010	1144-1146 Barbara
0624007103011	1146-1148 Garden
0624007103012	1152-1154 Garden
0624007103013	1156-1158 Garden

0624007103014	1164-1166 Garden
0624007103015	1182-1184 Garden
0624007103016	834-836 Allen
0624007103017	830-832 Allen
0624007103018	824-826 Allen
0624007103019	820-822 Allen
0624007103020	816-818 Allen
0624007103021	810-812 Allen
0624007103022	806-808 Allen
0624007103023	800-802 Allen
0624008101003	1013-1015 Garden
0624008101004	1019-1021 Garden
0624008101005	1023-1025 Garden
0624008101006	1029-1031 Garden
0624008101007	1033-1035 Garden
0624008101008	1039-1041 Garden
0624008101009	1045-1047 Garden
0624008101010	1049-1051 Garden
0624008101011	1055-1057 Garden
0624008101012	1061-1063 Garden
0624008101013	1065-1067 Garden
0624008102001	1022-1024 Garden
0624008102002	1030-1032 Garden
0624008102003	1036-1036 Garden
0624008102004	1040-1042 Garden
0624008102005	1046-1048 Garden
0624008102006	1050-1052 Garden
0624008102007	1056-1058 Garden
0624008102008	1062-1064 Garden
0624008102009	1066-1068 Garden
0624008102010	1021-1023 Barbara
0624008102011	1029-1031 Barbara
0624008102012	1033-1035 Barbara
0624008102013	1039-1041 Barbara
0624008102014	1045-1047 Barbara
0624008102015	1049-1051 Barbara
0624008102016	1055-1057 Barbara
0624008102017	1063-1063 Barbara
0624008102018	1065-1067 Barbara
0624008103002	1020-1022 Barbara
0624008103003	1024-1026 Barbara
0624008103004	1030-1032 Barbara

0624008103005	1034-1036 Barbara
0624008103006	1040-1042 Barbara
0624008103007	1046-1048 Barbara
0624008103008	1050-1052 Barbara
0624008103009	1056-1058 Barbara
0624008103010	1062-1064 Barbara
0624008103011	1066-1068 Barbara
0624008103012	1104-1106 Melvyn
0624008103013	1112-1114 Melvyn
0624008103014	1118-1120 Melvyn
0624008103015	1122-1124 Melvyn
0624008103016	1128-1130 Melvyn
0624008103017	1132-1134 Melvyn
0624008103018	1138-1140 Melvyn
0624008103019	1144-1146 Melvyn
0624008103020	1150-1152 Melvyn
0624008103021	1156-1156 Melvyn
0624008103022	1160-1162 Melvyn
0624008103023	1164-1166 Melvyn
0624008103024	1168-1170 Melvyn
0624008103025	1172-1174 Melvyn
0624008103026	1176-1178 Melvyn
0624008103027	1067-1069 Melvyn
0624008103028	1063-1065 Melvyn
0624008103029	1059-1061 Melvyn
0624008103030	1055-1057 Melvyn
0624008103031	1049-1051 Melvyn
0624008103032	1043-1045 Melvyn
0624008103033	1039-1041 Melvyn
0624008103034	1033-1035 Melvyn
0624008103035	1029-1031 Melvyn
0624008103036	1023-1025 Melvyn
0624008103037	1019-1021 Melvyn
0624008103038	1013-1015 Melvyn
0624008103039	1007-1009 Melvyn
0624008103040	1001-1003 Melvyn
0624008103041	731 Infirmary
0624008103042	Infirmary Road
0624008103043	739-741 Infirmary
0624008103044	743-745 Infirmary
0624008103045	749-751 Infirmary
0624008103046	753-755 Infirmary

0624008103047	759-761 Infirmary
0624008103048	763-765 Infirmary
0624008103049	769-771 Infirmary
0624008103050	801-803 Allen
0624008103051	Infirmary Road
0624008104001	1163-1165 Melvyn
0624008104002	1056-1058 Melvyn
0624008104003	1052-1054 Melvyn
0624008104004	1155-1157 Melvyn
0624008104005	1151-1153 Melvyn
0624008104006	1145-1147 Melvyn
0624008104007	1141-1143 Melvyn
0624008104008	1137-1139 Melvyn
0624008104009	1133-1135 Melvyn
0624008104010	1127-1129 Melvyn
0624008104011	1121-1123 Melvyn
0624008104012	1117-1119 Melvyn
0624008104013	1109-1111 Melvyn
0624008104014	1101-1103 Melvyn
0624008104015	1042-1044 Melvyn
0624008104016	1038-1040 Melvyn
0624008104017	1032-1034 Melvyn
0624008104018	1028-1030 Melvyn
0624008104019	1024-1026 Melvyn
0624008104020	1018-1020 Melvyn
0624008104021	1012-1014 Melvyn
0624008104022	1008-1010 Melvyn
0624008104023	1004-1006 Melvyn
0624008104024	1000-1002 Melvyn

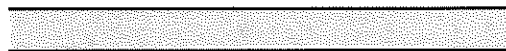
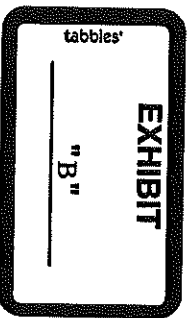


EXHIBIT "B" - VESTA WESTWAY LLC

Parcel Number	COMPLAINANT'S OPINION		CHANGE IN VALUE	
	OF VALUE	CURRENT VALUE	COLUMN B	COLUMN C
0624007101002	55,300	87,540	30,640	
0624007101003	55,300	87,540	30,640	
0624007101004	55,300	87,540	30,640	
0624007101005	55,300	87,540	30,640	
0624007101006	55,300	87,540	30,640	
0624007101007	55,300	87,540	30,640	
0624007101008	55,300	87,540	30,640	
0624007101009	55,300	87,540	30,640	
0624007101010	55,300	87,540	30,640	
0624007101011	55,300	87,540	30,640	
0624007101012	48,330	77,650	27,180	
0624007101013	48,470	78,370	27,430	
0624007101014	52,960	85,870	30,050	
0624007101015	53,310	87,030	30,460	
0624007102001	48,440	77,880	27,260	
0624007102002	48,440	77,880	27,260	
0624007102003	48,440	77,880	27,260	
0624007102004	48,440	77,880	27,260	
0624007102005	48,440	77,880	27,260	
0624007102006	48,440	77,880	27,260	
0624007102007	48,440	77,880	27,260	
0624007102008	48,440	77,880	27,260	
0624007102009	48,440	77,880	27,260	
0624007102010	48,440	77,880	27,260	
0624007102011	48,440	77,880	27,260	
0624007102012	48,440	77,880	27,260	
0624007102013	49,730	83,730	29,310	
0624007103001	48,100	76,910	26,920	
0624007103002	48,100	76,910	26,920	



0624007103003	55,510	88,520	30,980
0624007103004	55,510	88,520	30,980
0624007103005	55,510	88,520	30,980
0624007103006	55,680	89,150	31,200
0624007103007	55,940	89,830	31,440
0624007103008	55,910	89,660	31,380
0624007103009	55,910	89,660	31,380
0624007103010	56,680	93,130	32,590
0624007103011	55,560	88,690	31,040
0624007103012	55,470	88,360	30,920
0624007103013	48,060	76,760	26,870
0624007103014	48,250	77,600	27,160
0624007103015	50,530	82,790	28,980
0624007103016	47,940	76,260	26,690
0624007103017	49,280	77,750	27,210
0624007103018	47,940	76,260	26,690
0624007103019	47,940	76,260	26,690
0624007103020	47,670	74,990	26,250
0624007103021	68,820	94,070	32,920
0624007103022	47,940	76,260	26,690
0624007103023	48,790	79,420	27,800
0624008101003	48,650	78,960	27,640
0624008101004	48,650	78,960	27,640
0624008101005	48,590	78,570	27,500
0624008101006	49,200	71,630	25,070
0624008101007	48,180	77,300	27,060
0624008101008	48,180	77,300	27,060
0624008101009	55,300	87,540	30,640
0624008101010	55,090	87,240	30,540
0624008101011	55,300	87,540	30,640
0624008101012	55,300	87,540	30,640

0624008101013	55,300	87,540	30,640
0624008102001	49,620	83,210	29,120
0624008102002	48,180	77,300	27,060
0624008102003	48,180	77,300	27,060
0624008102004	48,180	77,300	27,060
0624008102005	48,180	77,300	27,060
0624008102006	48,180	77,300	27,060
0624008102007	48,180	77,300	27,060
0624008102008	48,180	77,300	27,060
0624008102009	48,180	77,300	27,060
0624008102010	49,620	83,210	29,120
0624008102011	48,180	77,300	27,060
0624008102012	46,530	74,100	25,940
0624008102013	48,180	77,300	27,060
0624008102014	48,180	77,300	27,060
0624008102015	48,180	77,300	27,060
0624008102016	48,180	77,300	27,060
0624008102017	48,180	77,300	27,060
0624008102018	48,180	77,300	27,060
0624008103002	47,920	76,150	26,650
0624008103003	48,330	77,650	27,180
0624008103004	48,180	77,300	27,060
0624008103005	48,180	77,300	27,060
0624008103006	48,180	77,300	27,060
0624008103007	68,590	136,400	47,740
0624008103008	48,180	77,300	27,060
0624008103009	48,180	77,300	27,060
0624008103010	48,180	77,300	27,060
0624008103011	48,180	77,300	27,060
0624008103012	56,040	89,740	31,410
0624008103013	56,760	93,490	32,720

0624008103014	56,190	91,060	31,870
0624008103015	56,020	90,830	31,790
0624008103016	49,930	67,770	23,720
0624008103017	49,040	81,260	28,440
0624008103018	49,080	81,420	28,500
0624008103019	48,860	80,380	28,130
0624008103020	48,870	80,430	28,150
0624008103021	48,910	80,370	28,130
0624008103022	49,060	81,040	28,370
0624008103023	48,790	79,900	27,970
0624008103024	55,790	89,650	31,370
0624008103025	79,790	90,890	31,810
0624008103026	56,350	91,740	32,110
0624008103027	55,870	89,490	31,320
0624008103028	55,060	86,510	30,280
0624008103029	55,100	86,670	30,330
0624008103030	55,930	89,810	31,430
0624008103031	55,450	88,210	30,870
0624008103032	55,300	87,540	30,640
0624008103033	55,300	87,540	30,640
0624008103034	55,300	87,540	30,640
0624008103035	55,300	87,540	30,640
0624008103036	55,300	87,540	30,640
0624008103037	55,300	87,540	30,640
0624008103038	55,300	87,540	30,640
0624008103039	55,790	89,650	31,370
0624008103040	55,710	88,810	31,080
0624008103041	170,390	234,880	82,210
0624008103042	4,880	6,100	2,140
0624008103043	48,030	76,610	26,810
0624008103044	48,030	76,610	26,810

0624008103045	48,030	76,610	26,810
0624008103046	48,030	76,610	26,810
0624008103047	48,030	76,610	26,810
0624008103048	48,030	76,610	26,810
0624008103049	48,030	76,610	26,810
0624008103050	48,580	79,120	27,690
0624008103051	550	3,430	1,200
0624008104001	49,230	81,520	28,530
0624008104002	48,120	77,060	26,970
0624008104003	48,750	79,300	27,760
0624008104004	48,620	79,340	27,770
0624008104005	48,530	78,890	27,610
0624008104006	48,310	77,870	27,260
0624008104007	55,240	87,240	30,530
0624008104008	55,200	87,080	30,480
0624008104009	55,200	87,080	30,480
0624008104010	55,200	87,080	30,480
0624008104011	47,980	76,380	26,730
0624008104012	47,900	75,990	26,600
0624008104013	48,000	76,520	26,780
0624008104014	48,140	77,160	27,010
0624008104015	47,920	76,150	26,650
0624008104016	47,920	76,150	26,650
0624008104017	47,920	76,150	26,650
0624008104018	47,920	76,150	26,650
0624008104019	47,920	76,150	26,650
0624008104020	47,920	76,150	26,650
0624008104021	47,920	76,150	26,650
0624008104022	47,990	76,460	26,760
0624008104023	48,610	76,680	27,540
0624008104024	48,050	76,690	26,840

COMPLAINANT'S OPINION OF VALUE	COLUMN A		COLUMN B		COLUMN C	
	CURRENT VALUE		CHANGE IN VALUE			
TOTAL:	7,863,040	-	12,523,420	4,384,010		

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 3/26/2025 Complainant or agent (printed) Kenneth J. Fisher Title (if agent) Atty. at Law

Complainant or agent (signature) 

Sworn to and signed in my presence, this 26th day of March 2025
(Date) (Month) (Year)

Notary 



KIMBERLY A LYNCH
Notary Public
State of Ohio
My Comm. Expires
March 10, 2026

Tax year _____ BOR no. _____

County _____ 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.

	Name	Street address, City, State, ZIP code	
1. Owner of property	Diong.mei Ngo	35260 Schoolhouse Ln	
2. Complainant if not owner			
3. Complainant's agent			
4. Telephone number and email address of contact person (440) 539-6285 ngomei@gmail.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	
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
0700019000450	\$ 200,000	\$ 247,320	\$ 47,320
9. The requested change in value is justified for the following reasons: basement water leakage, foundation shift, please see letter attached with 10 photos and 1 quote.			

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 3/27/25 Complainant or agent (printed) Qiongmei Ngo Title (if agent) _____

Complainant or agent (signature) 

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

Notary _____

Tax year _____ BOR no. _____

County _____ 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.

	Name	Street address, City, State, ZIP code	
1. Owner of property	Perry Joseph Garsky Laura Ann Garsky	318 Greenvue Dr Elyria OH 44035	
2. Complainant if not owner			
3. Complainant's agent			
4. Telephone number and email address of contact person			
440-315-5060 pjgarsky@gmail.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	
10.00.008.110.028		Greenvue Dr	
7. Principal use of property Non Buildable flooded land			
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
10.00.008.110.028	12,770.00	14,520.00	1,750.00
9. The requested change in value is justified for the following reasons:			
no electric no water no heat no insulation. swampy Area flooding 3-4 ft. no street lights no fire hydrants			

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

Tax year _____ BOR no. _____

County _____ 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.

	Name	Street address, City, State, ZIP code	
1. Owner of property	Perry Joseph Garsky-Laura Ann Garsky	318 Greenview Dr Elyria OH 44035	
2. Complainant if not owner			
3. Complainant's agent			
4. Telephone number and email address of contact person			
440-315-5060 pjgarsky@gmail.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		
10.000.008-110-030	Greenview DR		
10.000.008-110-049	Greenview DR		
7. Principal use of property Non Buildable Flooded Land			
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
10-00-008-110-030	1.250.00	6.610.00	5.360.00
10-00-008-110-049	780.00	2.050.00	777.00
			1,270.00
9. The requested change in value is justified for the following reasons: Non Buildable Land. Floods, Swampy, No fire hydrants nor street lights. one LANE RD And only one way out Flood has gotten to 3-4 ft			

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

Tax year _____ BOR no. _____

County _____ 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.

	Name	Street address, City, State, ZIP code	
1. Owner of property	Perry J Garsky	318 Greenview Dr Elyria OH 44035	
2. Complainant if not owner			
3. Complainant's agent			
4. Telephone number and email address of contact person 440-315-5060 p.j.garsky@gmail.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	
10.00.008-110-046		Greenview Dr	
7. Principal use of property Non Buildable Flooded Land			
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
10.00.008-110.046	4,910.00	5,380.00	470.00
9. The requested change in value is justified for the following reasons: Non Buildable Land, Floods, Swampy. NO fire hydrants nor street lights. one Lane Road And only one way out flood has gotten to 3-4 ft.			

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

Tax year _____ BOR no. _____
County _____ 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.

	Name	Street address, City, State, ZIP code	
1. Owner of property	Perry J Garsky	318 Greenview Dr. Elyria OH 44035	
2. Complainant if not owner			
3. Complainant's agent			
4. Telephone number and email address of contact person 440-315-5060 p.jgarsky@gmail.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		
10-00-008-110-047	318 Greenview Dr Elyria Ohio 44035		
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
10-00-008-110-047	45,940.00	49,840.00	45,600.00
9. The requested change in value is justified for the following reasons: Siding & trim need replaced Deck need replaced & stairs. Under Skirting needs replaced. Floods 3-4 ft. No fire hydrants, street lights. one lane rd out. only way out. Swampy land. 1 Bed room 1 Bath cabin House is 28' x 40' Attic is a room			

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

Tax year _____ BOR no. _____

County _____ 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.

	Name	Street address, City, State, ZIP code	
1. Owner of property	Perry Joseph Garsky-Laura Ann Garsky	318 Greenview Dr Elyria Oh 44035	
2. Complainant if not owner			
3. Complainant's agent			
4. Telephone number and email address of contact person 440-315-5060 pjgarsky@gmail.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	
10-00-008-110-033		Greenview Dr	
10-00-008-110-031		Greenview Dr	
10-00-008-110-032		Greenview Dr	
7. Principal use of property NON Buildable flooded Land			
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
10-00-008-110-033	1.330.00	7.020.00	5.690.00
10-00-008-110-032	1.290.00	6.820.00	5.530.00
10-00-008-110-031	1.260.00	6.680.00	5.420.00
9. The requested change in value is justified for the following reasons: Non Buildable Land, floods, swampy. No fire hydrants Nor street lights. One Lane Road And only one way out. Flooding has gotten to 3-4 ft.			

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.


- | | |
|--------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> The property was sold in an arm's length transaction. | <input type="checkbox"/> The property lost value due to a casualty. |
| <input type="checkbox"/> A substantial improvement was added to the property. | <input type="checkbox"/> 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 3/27/25 Complainant or agent (printed) Perry Garsky Title (if agent) _____

Complainant or agent (signature) 

Sworn to and signed in my presence, this 27 day of March 2025
(Date) (Month) (Year)

Notary Kristin Clark



KRISTIN CLARK
Notary Public, State of Ohio
My Comm. Expires Feb. 25, 2029

Clear Form

Tax year 2024 BOR no. _____
County Lorain 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	Christian Hayes	3925 Courtyard Drive, Lorain, Ohio 44053	
2. Complainant if not owner			
3. Complainant's agent			
4. Telephone number and email address of contact person 330-281-1013 CH184963@gmail.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		
02-02-009-103-004	3925 Courtyard Drive, Lorain, Ohio 44053		
7. Principal use of property Private Individual			
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
02-02-009-103-004	\$375,000	\$405,250	-\$35,250
9. The requested change in value is justified for the following reasons: The home was purchased in July 2023, appraised for \$375,000. No major changes have been made to the property since purchase.			

10. Was property sold within the last three years? ☒ Yes ☐ No ☐ Unknown If yes, show date of sale July 27, 2023
and sale price \$ 375,000 ; 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

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 03/17/2025 Complainant or agent (printed) Christian Hayes Title (if agent) _____

Complainant or agent (signature) 

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

Notary _____

Tax year _____ BOR no. _____

County _____ 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.

2025 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	DUBENA DOUGLAS & BARBARA	133 CRESTVIEW DRIVE	
2. Complainant if not owner			
3. Complainant's agent			
4. Telephone number and email address of contact person 216 410 1640 DAB@44035@YAHOO.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	
0623025104037		133 CRESTVIEW DR ELYRIA OH	
7. Principal use of property RES.			
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
0623025104037	270,000. ⁰⁰	354,210. ⁰⁰	
9. The requested change in value is justified for the following reasons: ATTACHED EST. FOR REPAIRS ROOF, SIDING, WINDOWS PLUS INTERIOR REPAIRS AND PAINT, BRICK REPAIR, BASEMT. CRACKING			

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 3-25-25 Complainant or agent (printed) DAUGLAS C. DuBONA Title (if agent) _____

Complainant or agent (signature) *DAUGLAS C. DuBONA*

Sworn to and signed in my presence, this 3/25/25 ^{25th} day of March 2025
(Date) (Month) (Year)

Notary *David Thomas Jr.*



Tax year 2024

BOR no. _____

DTE 1
Rev. 12/22County 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.

	Name	Street address, City, State, ZIP code	
1. Owner of property	Brittany Jones	24701 Eagle Pointe Columbia Station, 44028	
2. Complainant if not owner	NA		
3. Complainant's agent			
4. Telephone number and email address of contact person 330-697-3022 brittanylajones@gmail.com			
5. Complainant's relationship to property, if not owner NA			
If more than one parcel is included, see "Multiple Parcels" Instruction.			
6. Parcel numbers from tax bill		Address of property	
1200024000039		24701 Eagle Pointe Columbia Station, OH 44028	
7. Principal use of property Main 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
1200024000039	565,000	767,570	202,570
9. The requested change in value is justified for the following reasons: There have been no improvements to the home since purchased. Homes on the same street valuations increased at differing percentages, some even decreased. Our home increased by a large percentage in comparison to our street (some only increased by 2% while ours increased by more than 25%. The latest home that was sold on our street sold for less per sq foot than what we paid for our home \$148 vs \$173). I would like to request a hearing to discuss more.			

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 3/27/25 Complainant or agent (printed) Brittany Jones Title (if agent) _____

Complainant or agent (signature) 

Sworn to and signed in my presence, this 27 day of March 2025
(Date) (Month) (Year)

Notary 



SARAH REINHARDT
Notary Public, State of Ohio
My Commission Expires
January 24, 2026
COMMISSION: 2021-RE-825625

Clear Form

Tax year 2024 BOR no. _____
 County Lorain 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	William & Diane Nahorn	46900 Cooper Foster Pk Rd, Amherst, OH 44001	
2. Complainant if not owner			
3. Complainant's agent			
4. Telephone number and email address of contact person 440 506 8101 dknahorn@gmail.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		
0500021101001	46900 Cooper Foster Pk Rd, Amherst, OH 44001		
0500020000124	vacant land		
0202001101020	vacant land		
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
0500021101001	\$ 225,000.00	\$ 372,400.00	\$ 147,400.00
0500020000124	3,440.00	4,450.00	1,010.00
0202001101020	4,710.00	7,620.00	2,910.00
9. The requested change in value is justified for the following reasons: ① CONSERVATION EASEMENT ② ONLY 1 1/2 BATHROOMS SEE 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 N/A and total cost \$ _____

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

Attachment to Nahorn complaint

1. There are only 1 ½ bathrooms; the upstairs bathroom only has a toilet and sink.
2. The property is encumbered by a recorded land conservation easement (RN 2008-0269585). The easement has a number of very severe restrictions for the property's use, including that the property may not be developed.
5. Use Restrictions. (a) (i) Specifically, no residential, commercial, governmental or industrial structures, including but not limited to, buildings, outbuildings, asphalt, concrete or other impermeable surfaces, camping accommodations, mobile homes, and fences, shall be hereafter erected or placed on the Protected Property.

(k) Subdivision. The three parcels presently constituting the Protected Property shall not be divided, subdivided, or partitioned, and shall only be conveyed in their entirety in any single transaction.

(See attached relevant pages)

This dramatically reduces the Fair Market Value of the property. In addition, the property is partially located in a floodplain and contains significant wetlands.

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 3/24/25 Complainant or agent (printed) William Nahorn Title (if agent) Drane Nahorn

Complainant or agent (signature) William Nahorn
Drane Nahorn

Sworn to and signed in my presence, this 24 day of MARCH 2025
(Date) (Month) (Year)

Notary W. Zack Dolyk



W. ZACK DOLYK
Attorney at Law
NOTARY PUBLIC
STATE OF OHIO
My Commission Has
No Expiration Date
Section 147.03 O.R.C.

Clear Form

Tax year 2024

BOR no. _____

DTE 1
Rev. 12/22County Lorain

Date received _____

Complaint Against the Valuation of Real Property

Answer all questions and type or print all information. Read instructions on back be

Attach additional pages if necessary.

This form is for full market value complaints only. All other complaints should

☒ Original complaint ☐ Counter complaint

Notices will be sent only to those named below.

EXHIBIT

A

	Name	Street address, City, State, ZIP code	
1. Owner of property	Randy and Judith Nix	36494 Appian Way, N. Ridgeville, Ohio 44039	
2. Complainant if not owner			
3. Complainant's agent			
4. Telephone number and email address of contact person		216-905-3712 RandyDNix@gmail.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		
07-00-029-000-421	36494 Appian Way, N. Ridgeville, Ohio		
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
07-00-029-000-421	\$517500	\$559270	-41770
9. The requested change in value is justified for the following reasons: <i>Similar Home 3 houses down on same side of street same builder, better lot with fenced backyard sold 10/26/2024 for \$485,000. P/N 07-00-029-000-424</i>			

10. Was property sold within the last three years? ☒ Yes ☐ No ☐ Unknown If yes, show date of sale 2/27/2023
and sale price \$ 511,000.511,663 ; 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 6/1/2023 and total cost \$ 6100.00.

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.

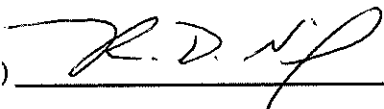
- ☒ The property was sold in an arm's length transaction. ☐ The property lost value due to a casualty.
☒ A substantial improvement was added to the property. ☐ Occupancy change of at least 15% had a substantial economic impact on my property.

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 03/21/2022 Complainant or agent (printed) Randy D. Nix Title (if agent) _____

Complainant or agent (signature) 

Sworn to and signed in my presence, this 26 day of MARCH 2025
(Date) (Month) (Year)

Notary 



BRENDA L TAYLOR
Notary Public
State of Ohio
My Comm. Expires
August 12, 2025

Tax year _____ 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.

	Name	Street address, City, State, ZIP code	
1. Owner of property	Adam Shaw & Brittany Dakters	165 Pembridge Ct, Sheffield Lake, Ohio 44054	
2. Complainant if not owner			
3. Complainant's agent			
4. Telephone number and email address of contact person 419-577-1591 adam.shaw13@icloud.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		
0300045102110	165 Pembridge Ct, Sheffield Lake, Ohio 44054		
7. Principal use of property Primary 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
0300045102110	\$315,000	\$417,350	\$102,350
9. The requested change in value is justified for the following reasons: Professional appraisal and research of comparable neighboring properties are vastly disproportionate to valuation. Comparable homes in the area of similar size and lot size, with better improvements are valued less. 2nd highest value in the neighborhood with the third highest being \$68,000 less and only going down from that point.			

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 3/23/2025
02/24/202 Complainant or agent (printed) Adam Shaw Title (if agent) _____

Complainant or agent (signature) AS

Sworn to and signed in my presence, this 23 day of march 2025
(Date) (Month) (Year)

Notary Kyle Lobada

my commission expires 6-24-29

Clear Form

DTE 1
Rev. 12/22

Tax year _____ BOR no. _____

County _____ 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.

	Name	Street address, City, State, ZIP code	
1. Owner of property	Driver Steven R Trustee	255 Cooper Foster Park Rd E	
2. Complainant if not owner		Lorain, OH 44053	
3. Complainant's agent			
4. Telephone number and email address of contact person (440) 925-8466 bizman49@hotmail.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		
03-00-113-104-021	255 Cooper Foster Park Rd E		
	Lorain OH 44053		
7. Principal use of property 3 unit rental			
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
03-00-113-104-021	\$196,310	\$308,820	<112,510>
9. The requested change in value is justified for the following reasons: 3 unit converted home - cash flow does not justify increased values			

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.

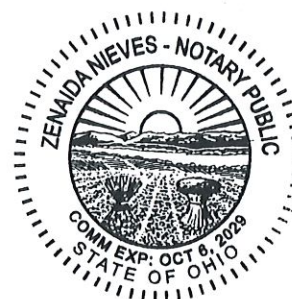
I declare under penalties of perjury that this complaint (including any attachments) has been examined by me and to the best of my knowledge and belief is true, correct and complete.

Date 3-27-2025 Complainant or agent (printed) Steven R. Drner Title (if agent) Trustee

Complainant or agent (signature) Steven R. Drner, Trustee

Sworn to and signed in my presence, this 27th day of March 2025
(Date) (Month) (Year)

Notary [Signature]



Tax year _____ BOR no. _____

DTE 1
Rev. 12/22

County _____ 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.

	Name	Street address, City, State, ZIP code 44011	
1. Owner of property	Hazel Scarbro	3650 Williams Ct. Avon, Oh 44129	
2. Complainant if not owner	Angela Ans	5803 Sunderland Dr. Parma, Oh 44129	
3. Complainant's agent			
4. Telephone number and email address of contact person 440-884-5144 Angieans@hotmail.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	
0400026109053		3650 Williams Ct Avon, Oh 1044011	
7. Principal use of property Residential			
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
0400026109053	100,000	258,030	158,030
9. The requested change in value is justified for the following reasons: We've had property listed since summer only receiving extreme low offers. After talking to Emily Hanson (Avon Building FEMA Dept.) we decided it's too costly to bring this house to FEMA codes. So property needs to be sold as a tear down/rebuild. So the land is the only value over			

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 N/A and total cost \$ N/A13. 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.

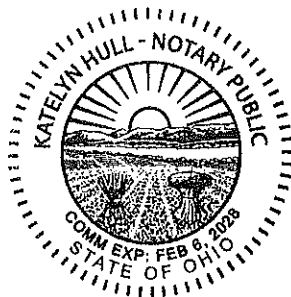
I declare under penalties of perjury that this complaint (including any attachments) has been examined by me and to the best of my knowledge and belief is true, correct and complete.

Date 3-27-25 Complainant or agent (printed) Angela Ans Title (if agent) _____

Complainant or agent (signature) Angela M. Ans

Sworn to and signed in my presence, this 27th day of March 2025
(Date) (Month) (Year)

Notary Katelyn Ann



Clear Form

Tax year 2024-2025 BOR no. _____
 County LORAIN 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

Attach additional pages if necessary.

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

☒ Original complaint ☐ Counter complaint

Notices will be sent only to those named below.

EXHIBIT

A

	Name	Street address, City, State, ZIP code	
1. Owner of property	Charles Hershberger	44198 Oberlin Elyria Rd 44014	
2. Complainant if not owner			
3. Complainant's agent			
4. Telephone number and email address of contact person			
1-216-905-9634 email: cjherhberger@gmail.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	
0624037104017		41881 Adelbert St. Elyria OH 44035	
7. Principal use of property fixer upper			
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
0624037104017	\$ 20,000.00	\$ 90,000	\$ 70,000
9. The requested change in value is justified for the following reasons:			
RUN DOWN Home, bought as fixerupper Needs tons of repairs to make habitable. Inside & out.			

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 N/A and total cost \$ 0

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 3/24/25 Complainant or agent (printed) Charles Hershberger (if agent) _____
(OWNER)

Complainant or agent (signature) Charles Hershberger

Sworn to and signed in my presence, this 27th day of March 2025
(Date) (Month) (Year)

Notary Rebecca L Johnson



REBECCA L JOHNSON
Notary Public
State of Ohio
My Comm. Expires
November 13, 2026

Tax year 2025 BOR no. _____
 County Lorian 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 filing.

Attach additional pages if necessary.

This form is for full market value complaints only. All other complaints should use Form DTE 1.

☐ Original complaint ☐ Counter complaint

Notices will be sent only to those named below.

EXHIBIT

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	Name	Street address, City, State, ZIP code	
1. Owner of property	Judy Surber & Larry E. Surber Jr.	37320 Royalton Rd. Grafton, Ohio 44044	
2. Complainant if not owner			
3. Complainant's agent			
4. Telephone number and email address of contact person <u>440-748-2596</u> <u>lesurber@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		
1100075000023	37320 Royalton Rd. Grafton, Ohio 44044 (rear land)		
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
1100075000023	too high for 0.13 acers	\$8,070	
9. The requested change in value is justified for the following reasons: cost seems high for 0.13 acres compared to the value of my other lot next door which is valued at \$6,440 for 0.63 acers (1100075000014)			

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 3/27/25 Complainant or agent (printed) LARRY E. SUPPER JR. Title (if agent) CO-OWNER

Complainant or agent (signature) [Signature]

Sworn to and signed in my presence, this 27th day of March 2025
(Date) (Month) (Year)

Notary Lisa Ciofani



LISA CIOFANI
Notary Public
State of Ohio
My Comm. Expires
September 27, 2025

Clear Form

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
Attach additional pages if necessary.

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

☒ Original complaint ☐ Counter complaint

Notices will be sent only to those named below.

EXHIBIT

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Name		Street address, City, State, ZIP code	
1. Owner of property	Mary Cusick	27221 Osborne Rd, Columbia Stat., OH 44028	
2. Complainant if not owner			
3. Complainant's agent			
4. Telephone number and email address of contact person 440-236-9112			
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	
12-00-083-000-032		27221 Osborne Rd, Columbia Station, OH 44028	
7. Principal use of property Residential			
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
12-00-083-000-032	177940	355880	177940
9. The requested change in value is justified for the following reasons: Depreciated value of property due to nuisance firing range (Columbia War Machine) and resulting detriment to quality of life, health, safety, and enjoyment of residential home and property. See 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 NA 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.

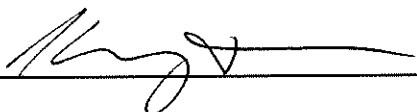
- ☐ The complainant has complied with the requirements of R.C. section 5715.19(A)(6)(b) and (7) and provided notice prior to the adoption of the resolution required by division (A)(6)(b) of that section as required by division (A)(7) of that section.

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 03/26/2025 Complainant or agent (printed) Mary Cusick Title (if agent) _____

Complainant or agent (signature) 

Sworn to and signed in my presence, this 26th day of March 2025
(Date) (Month) (Year)

Notary 



KOURTNEY THOMAS
NOTARY PUBLIC - OHIO
MY COMMISSION EXPIRES
03-11-29

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

Complaint Against the Assessment of Real Property Other

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

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



	Name	Street address, City, State, ZIP code	
1) Owner of property			
2) Complainant if not owner	<u>HARRY CALVIN HOWELL III</u>	<u>6327 Dogwood Ln. North</u>	
3) Complainant's agent	<u>—</u>	<u>Ridgeville OH 44</u>	
4) Telephone number of contact person	<u>(440) 725-3822</u>		
5) Email address of complainant	<u>hchowell3@gmail.com</u>		
6) Complainant's relationship to property, if not owner	<u>Previous owner</u>		
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>1500018000013</u>	<u>33.72</u>	<u>15000 Whitehead Rd.</u>	
		<u>LaGrange OH 44050</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 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 checked="" 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: property was used for agricultural purposes per CAUV regulations. Renewal application was not filed for 2024 (see attachment)

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 3/27/25 Complainant or agent Harry Calvin Howell III Signature _____ Title (if agent) _____

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

Notary _____ Signature _____

Clear Form

DTE 1
Rev. 12/22

Tax year _____ BOR no. _____

County Lorain Date received _____

Complaint Against the Valuation of Real Property

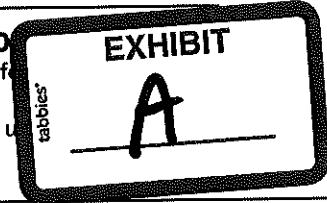
Answer all questions and type or print all information. Read instructions on back before filing.

Attach additional pages if necessary.

This form is for full market value complaints only. All other complaints should use Form 100.

☒ Original complaint ☐ Counter complaint

Notices will be sent only to those named below.



	Name	Street address, City, State, ZIP code	
1. Owner of property	Donald Ortner	14151 State Route 511 Oberlin, Ohio 44074	
2. Complainant if not owner			
3. Complainant's agent			
4. Telephone number and email address of contact person (216) 469-9197			
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		
0812016000012	14151 St. Rt. 511 Oberlin, Oh 44074		
0812016000022	14337 State Route 511 Oberlin Oh 44074		
0812016000020	14151 St. Rt. 511 Oberlin, Oh 44074		
7. Principal use of property residence & Farm			
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
0812016000012	668,140.00	818,140.00	\$150,000.00
0812016000022	524,160.00	699,160.00	175,000.00
0812016000020	71,125.00	95,340.00	24,215.00
9. The requested change in value is justified for the following reasons: See attached Sheet for each parcel			

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

To The Board of Revision

Thank you for the opportunity to plead my case for a lower improvement evaluation.

Parcel 0812016000012 14151 State Route 511

This Home was built in 2003 for a cost of \$172,000.00 by a builder who has since went out of business. First Item is we have numerous cracks in the foundation and drywall which was created by not checking the soil prior to construction, which the solution for is to excavate under the existing footer through the fatty clay and pour a new concrete footer under the existing footer which is cost prohibited. Second 2 years ago we found out through Lorain County planning commission we cannot sell this house as we have no frontage to the parcel it sits on. We have been working on correcting this through various county offices and a surveyor to get this done. Third we were supposed to have 35-year shingles on the roof, but the shingles were recalled which we were never notified of which will cost us \$38,750.00 dollars. Also, all the windows need to be replaced as they were installed improperly at a cost of over \$80,000.00. Also our old evaluation was \$287,500 vs \$476,850 or 65% increase is excessive. So as you can see our Retirement home has turned into a nightmare.

Parcel 0812016000022, 14337 State Route 511 is a farm house and buildings that was constructed sometime in the late 1800s which is a barn frame that we have resided with a new roof and with the old sandstone basement which needs to be replaced and old barns needing repairs and the new evaluation being \$367,920 and the old evaluation of \$134,470 which is a \$233,450.00 increase or 178% increase in value is excessive .

Parcel 0812016000020 is a Pole barn built in 1960 with an addition built in 2002 valued at old \$41,950.00 and new \$78,750.00 or a 90% increase again is excessive.

In closing thank you for your time and I will provide Photos and estimated under separate cover. Thank You Donald Otner

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 03/20/2025 Complainant or agent (printed) Donald Ortner Title (if agent) _____

Complainant or agent (signature) 

Sworn to and signed in my presence, this MARCH 20 day of MARCH 2025
(Date) (Month) (Year)

Notary 



DAMIEN A TYREE
Notary Public
State of Ohio
My Comm. Expires
March 24, 2025

Clear Form

DTE 1
Rev. 12/22

Tax year _____ BOR no. _____

County _____ Date received _____

Complaint Against the Valuation of Real Property

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

Attach additional pages if necessary.

This form is for full market value complaints only. All other complaints show

☐ Original complaint ☐ Counter complaint

Notices will be sent only to those named below.

EXHIBIT

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	Name	Street address, City, State, ZIP code	
1. Owner of property	Andrea & Mark Heinrich	26776 Springfield circle, Col. Station, 44028	
2. Complainant if not owner			
3. Complainant's agent			
4. Telephone number and email address of contact person 216-246-3809 anheinrich10@gmail.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		
1200080000062	26776 Springfield circle, Col. Station, 44028		
7. Principal use of property Single Family 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
1200080000062	300,000	489,130	-38%
9. The requested change in value is justified for the following reasons: I live by a shooting range. The shooting range has active shooting from 9am to 5pm every day. The noise is constant. It takes away my right to peace and quiet. Also, there is shooting 7 days per week. There have been bullets found in my yard, as well as my neighbors yards. There is very little quiet.			

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 3/24/25 Complainant or agent (printed) _____ Title (if agent) _____

Complainant or agent (signature) 

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

Notary _____

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

DTE 1
Rev. 08/21

Complaint Against the Valuation of Real Property

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

Attach additional pages if necessary.

This form is for full market value complaints only. All other complaints should use Form 100.

☐ Original complaint ☒ Counter complaint

Notices will be sent only to those named below.

EXHIBIT

A

Name		Street address, City, State, ZIP code	
1. Owner of property	PHILIP J & ANGELA M OBBISH	34285 LAW RD GRAFTON OH 44044	
2. Complainant if not owner			
3. Complainant's agent			
4. Telephone number of contact person 330 592-7078			
5. Email address of complainant			
6. Complainant's relationship to property, if not owner			
If more than one parcel is included, see "Multiple Parcels" on back.			
7. Parcel numbers from tax bill		Address of property	
16-00-072-000-027		34285 LAW RD GRAFTON OH. 44044	
8. Principal use of property			
9. 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
16-00-072-000-027	375,000	390,000	15,000
10. The requested change in value is justified for the following reasons: COUNTY HAS ROOM FINISH APPRAISAL DONE IN SEPT. 2024. UNFINISHED ROOM ADDITION			

11. 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 11" on back.
12. 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.
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 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.

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 3-27-25 Complainant or agent Philip J Obbish Title (if agent) _____
Signature

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

Notary _____
Signature

Tax year _____ BOR no. _____

DTE 1
Rev. 12/22

County _____ Date received _____

Complaint Against the Valuation of Real Property

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

Attach additional pages if necessary.

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

2025-03-27 10:24:19

☐ Original complaint ☐ Counter complaint

Notices will be sent only to those named below.

EXHIBIT**A**

	Name	Street address, City, State, ZIP code	
1. Owner of property	Joana Berlovian	6082 Avon Belden Rd	
2. Complainant if not owner		N. Ridgeville Oh. 44039	
3. Complainant's agent			
4. Telephone number and email address of contact person 440-322-6951			
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	
07-00-029-000 -202		6082 Avon Belden Rd	
		N. Ridgeville Ohio	
		44039	
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
07-00-029-000	\$ 82,500	\$ 121,190	
-202			
9. The requested change in value is justified for the following reasons:			

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 NONE and total cost \$ _____13. Do you intend to present the testimony or report of a professional appraiser? ☐ Yes ☐ No ☒ Unknown

- 1) Gutters need Replacing are Falling
- 2) Windows are barricated with plywood
- 3) Some windows don't Regular glass only storm glass windows
- 4) Tree roots plug sewer
- 5) Basement Floods 3 feet 3 times year
- 6) Needs Electrical updated
- 7) Carpet is 30 yrs old
- 8) Old Kitchen & Bathroom
- 9) No-heat Vents in upstairs
Both Bedrooms
- 10) house is in Poor Condition
- 11) Needs Painting inside & outside

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 3-27-25 Complainant or agent (printed) Joana Berlován Title (if agent) _____

Complainant or agent (signature) Joana Berlován

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

Notary _____

Tax year 2024 BOR no. _____
 County LORAIN 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 of form.

Attach additional pages if necessary.

This form is for full market value complaints only. All other complaints should be filed on a different form.

☒ Original complaint ☐ Counter complaint

Notices will be sent only to those named below.

EXHIBIT

A

	Name	Street address, City, State, ZIP code	
1. Owner of property	TRACEY M. SPRENGER	33844 LAKE ROAD AVON LAKE OH 44012	
2. Complainant if not owner			
3. Complainant's agent	FRANCIS X. GARDNER, ESQ	3885 OBERLIN RD LORAIN OH 44053	
4. Telephone number and email address of contact person 440-989-5222 fgardner@sprengerhealthcare.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	
04-00-006-101-004		33844 LAKE ROAD AVON LAKE OH 44012	
7. Principal use of property RESIDENTIAL			
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
04-00-006-101-004	\$1,575,100	\$1,985,680	(\$410,580)
9. The requested change in value is justified for the following reasons: Sales Comparison approach developed during appraisal of the subject property reflects a truer value of the property when compared with comparables weighted for their compatibility with the subject property. Comparables based on neighborhood sales alone, as the County Auditor has done, are not true comparables to the subject 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 _____ 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.

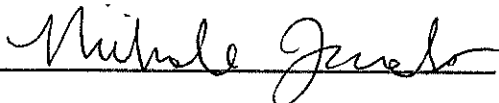
- ☐ The complainant has complied with the requirements of R.C. section 5715.19(A)(6)(b) and (7) and provided notice prior to the adoption of the resolution required by division (A)(6)(b) of that section as required by division (A)(7) of that section.

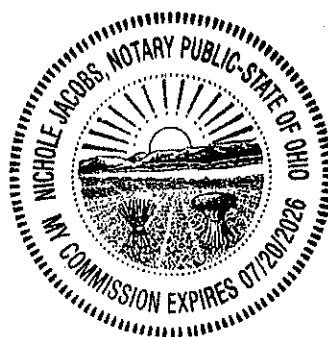
I declare under penalties of perjury that this complaint (including any attachments) has been examined by me and to the best of my knowledge and belief is true, correct and complete.

Date 03/19/2025 Complainant or agent (printed) Francis X. Gardner Title (if agent) Attorney For Complainant

Complainant or agent (signature) 

Sworn to and signed in my presence, this 19th day of March 2025
(Date) (Month) (Year)

Notary 



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

Complaint Against the Assessment of Real Property Other

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

☒ Original complaint ☐ Counter complaint

Notices will be sent only to those named below.



	Name	Street address, City, State, ZIP code	
1) Owner of property	Karen Bean /Dolores I Bean, Trustee	Dolores Bean resides in a memory care unit	
2) Complainant if not owner	Karen Bean, Successor Trustee	390 W Twinsburg Rd, Northfield, OH 44067	
3) Complainant's agent			
4) Telephone number of contact person		(216) 310-6560	
5) Email address of complainant		blewiskbean@gmail.com	
6) Complainant's relationship to property, if not owner		Daughter/ POA/Successor Trustee	
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	
09-00-045-000-011	17.88	11534 State Route 58 N, Oberlin, OH 44074	
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 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 checked="" 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
09-00-045-000-011			

10) The requested change is justified for the following reasons:

See attached justification

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.



Gene M. Lim, Atty.
 Notary Public, State of Ohio
 My Commission Expires
 No Expiration Date
 Section 147.04 Notice

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 03/26/2025 Complainant or agent Karen A Bean Title (if agent) Successor Trustee

Sworn to and signed in my presence, this 27th day of March year 2025

Notary [Signature] Signature

Justification for Parcel Number – 09-00-045-000-011

I am requesting a redetermination for the failure to file a CAUV renewal application for 2024 tax year and the elimination of the 3 previous years recoupment of \$2,192.74

My mom, Dolores Bean, unfortunately had to be placed in memory care. As a result, the farm had to be sold to afford her care. Because the farm was in Dolores I Bean, Amended and Restated Revocable Trust Dated September 11, 1998 and Dolores as the Trustee of that Trust and was no longer able to handle her financial affairs, I became the Successor Trust according to the Trust as of 9/28/23. (see attached affidavit of Successor Trustee)

The farm was sold in 3 different transactions. Tim Abraham, the buyer, agreed to purchase most of the farm. But because I needed money quickly for mom's care Tim agreed to purchase the back 36.35 acres first. We completed that sale on the back field at the end of October 2023. Due to the amount of stuff in the house, garage and barn, Tim and I agreed that he would purchase the remaining acreage including the buildings early part of January 2024.

I did receive a CAUV application in the mail for 2024. I did not file the application for 2024. Why? I didn't understand that it needed to be filed when I became Successor Trustee at the end of September 2023. The farm was in the Trust, so ownership didn't change just who the Trustee was. (from mom to me). Plus, the form said for the year 2024, mom wasn't going to own the farm so stupidly I didn't think it made a difference for the few weeks in 2024 that she would still have ownership. I've never dealt with the farming part of my mom's property. My brother Francis Bean was farming the land and handling the paperwork for the farm. Once I told Francis I was selling the farm he would no longer talk to me. Him and one of my sisters got an attorney to see if they could stop me from selling the farm because they said it's their inheritance. My parents gave Francis 4 acres on the corner of farm years

ago and he wanted to purchase an additional 6 acres, so I sold him the acres he wanted. Francis is currently in default on a loan that the Trust gave him.

I was overwhelmed and emotionally a mess with cleaning out the house and garage. Very little family support, a few nieces helped. My oldest brother from Washington state came for a week and helped. I can't go back and change what I failed to do with the CAUV application. My parents bought the farm in the fall of 1970. My dad farmed the land starting when we moved in and when my dad was physically no longer able to farm my parents leased it out to Tim Abraham to farm it. In 2011 my brother Francis took over farming it. 11534 State Route 58, Oberlin and all the land around it, continues to this day to be farmed.

Mom can't afford to pay the \$8,096.53 in property taxes. How can 17.88 acres and buildings be \$8,096.53 for one month, but 53.64 acres of the same land and buildings be \$3,865.32 for a whole year. I was advised to pay what I thought property taxes might be for one month. My guess was \$700 which was paid on February 14, 2025. How can it be that much for the one month in 2024? Please don't punish her, for me not knowing how to file the CAUV application. The property has always been farmland and hopefully it will continue to be farmland for years to come.

Attached are copies of:

Affidavit of Successor Trustee

Receipt for the \$700 paid towards 2024 property taxes

2024 Real Estate Tax Bill

Denial application for the valuation of land in accordance with its current agricultural use letter

Sale summary of 11534 State Route 58 N, Oberlin, OH and 2020 – 2023 real estate tax bills

Supporting documents for the sale of the farm and the current tax records online for each parcel

Tax year 2024

BOR no. _____

DTE 1
Rev. 12/22County Lorain

Date received _____

Complaint Against the Valuation of Real Property

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

Attach additional pages if necessary.

This form is for full market value complaints only. All other complaints should use Form DTE 1.

☒ Original complaint ☐ Counter complaint

Notices will be sent only to those named below.

EXHIBIT**A**

	Name	Street address, City, State, ZIP code	
1. Owner of property	Robert J Corna Sr, Trustee	280 Buckeye Dr. #7 Sheffield Lake, OH 44054	
2. Complainant if not owner			
3. Complainant's agent			
4. Telephone number and email address of contact person 440-346-7425 cornaarchitect@gmail.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	
0300035701007		280 Buckeye Dr. #7 Sheffield Lake, OH 44054	
7. Principal use of property Residential			
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
0300035701007	\$568,102.00	\$829,420.00	\$261,318.00
9. The requested change in value is justified for the following reasons: Current value does not reflect the neighboring properties, including the recorded sale prices and costs to construct.			

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 3-27-25 Complainant or agent (printed) Robert J Corna Sr Title (if agent) Trustee

Complainant or agent (signature) 

Sworn to and signed in my presence, this 27th day of March 2025
(Date) (Month) (Year)

Notary Pamela R Dingus



PAMELA R DINGUS
NOTARY PUBLIC
FOR THE
STATE OF OHIO
My Commission Expires
June 03, 2025

Clear Form

DTE 1
Rev. 12/22

Tax year _____ BOR no. _____

County _____ 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.

Name		Street address, City, State, ZIP code	
1. Owner of property	THOMAS D. ADEN	406 West Ave Elyria	44035
2. Complainant if not owner			
3. Complainant's agent			
4. Telephone number and email address of contact person 440-777-9439 Tom aden 19 @ G mail . 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		
0626046000026	406 West Ave Elyria		
0626046000027	410 West Ave Elyria		
1	i		
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
0626046000026	133,800	179,680	30,760
0626046000027	35,000	81,730	46,730
0006		105,240	
9. The requested change in value is justified for the following reasons:			

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 3/27/25 Complainant or agent (printed) owner Title (if agent) Thomas D. Aden

Complainant or agent (signature) Thomas D. Aden

Sworn to and signed in my presence, this March 27 day of March 2025
(Date) (Month) (Year)

Notary Barbara A. White



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

DTE 1
Rev. 12/22

LORAIN COUNTY
BOARD OF REVISION

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.

2025 MAR 27 PM 3:17

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	DR. DOROTHY L.S. MARTIN	32917 MILLS ROAD
2. Complainant if not owner		NORTH RIDGEVILLE, OH 44039
3. Complainant's agent		
4. Telephone number and email address of contact person	(216) 319-8899	

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

06-24-010-104-050

165 IRONDALE ST., ELYRIA, OH 44035

06-24-010-104-019

165 IRONDALE ST., ELYRIA, OH 44035

7. Principal use of property SINGLE FAMILY HOUSE - RESIDENTIAL

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
06-24-010-104-049	\$41,000.00	\$96,830.00	\$55,830.00

9. The requested change in value is justified for the following reasons: HOUSE UNINHABITABLE: NO FURNACE, HOT WATER TANK, BATHROOM OR KITCHEN. CEILINGS DAMAGE IN KITCHEN, LIVINGROOM, & MASTER BATH DUE TO ROOF LEAK IN THE PAST. FOUNDATION REBUILT IN 2022 FOR \$23,000. NO GAS OR WATER SERVICE.

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 JULY 2022 and total cost \$ 23,000.00

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.

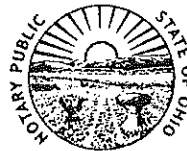
I declare under penalties of perjury that this complaint (including any attachments) has been examined by me and to the best of my knowledge and belief is true, correct and complete.

Date 03/26/2025 Complainant or agent (printed) DR. DOROTHY L.S. MARTIN Title (if agent) _____

Complainant or agent (signature) *Dr. Dorothy Martin*

Sworn to and signed in my presence, this 26 day of March 2025
(Date) (Month) (Year)

Notary April DiFrancisco



APRIL DIFRANCISCO
Notary Public
State of Ohio
My Comm. Expires
October 13, 2026

Tax year _____ BOR no. _____
County _____ 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.

1. Owner of property		Name	Street address, City, State, ZIP code
2. Complainant if not owner		DR. DOROTHY L.S. MARTIN	32917 MILLS ROAD
3. Complainant's agent			NORTH RIDGEVILLE, OH 44039
4. Telephone number and email address of contact person (216) 319-8899			
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	
06-24-010-104-035			
7. Principal use of property RESIDENTIAL SINGLE FAMILY HOUSE			
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
06-24-010-104-035	\$34,000.00	\$89,550.00	\$55,550.00
9. The requested change in value is justified for the following reasons:			

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.

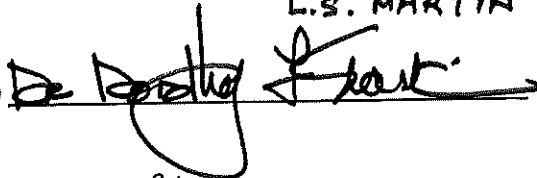
- ☐ The property was sold in an arm's length transaction. ☐ The property lost value due to a casualty.
- ☐ A substantial improvement was added to the property. ☐ Occupancy change of at least 15% had a substantial economic impact on my property.

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 03/26/2025 Complainant or agent (printed) DR. DOROTHY L.S. MARTIN Title (if agent) _____

Complainant or agent (signature) 

Sworn to and signed in my presence, this 26 day of March 2025
(Date) (Month) (Year)

Notary April DiFrancisco



APRIL DIFRANCISCO
Notary Public
State of Ohio
My Comm. Expires
October 13, 2026

Tax year _____ BOR no. _____
County _____ 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	DR. DOROTHY L.S. MARTIN	32917 MILLS RD. N. RIDGEVILLE	
2. Complainant if not owner		OH 44039	
3. Complainant's agent			
4. Telephone number and email address of contact person (216) 319-8899			
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		
07-00-006-701-024	7656 AYON-BELDEN RD.		
	N. RIDGEVILLE, OH 44039		
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
07-00-006-701-024	\$ 53,000.00	\$ 173,740.00	\$ 120,740.00
9. The requested change in value is justified for the following reasons: HOUSE STILL UNDER TOTAL RENOVATION/REHABILITATION. NO FURNACE, HOT WATER TANK, BATH ROOM(S) OR KITCHEN. THE PREMISES IS UNINHABITABLE.			

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 03/13/2025 and total cost \$ 3,000.00.

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 03/26/2025 Complainant or agent (printed) DR. DOROTHY L.S. MARTIN Title (if agent) _____

Complainant or agent (signature) *Dr. Dorothy L.S. Martin*

Sworn to and signed in my presence, this 26 day of March 2025
(Date) (Month) (Year)

Notary April DiFrancisco



APRIL DIFRANCISCO
Notary Public
State of Ohio
My Comm. Expires
October 13, 2026

Clear Form

Tax year 2024 BOR no. _____
 County Lorain 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	Robert W. and Carolyn R. Sorrell	41901 Parsons Road, Lagrange, OH 44050	
2. Complainant if not owner			
3. Complainant's agent			
4. Telephone number and email address of contact person (440) 452-7576 carol_sorrell55@hotmail.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		
15-00-003-000-030	41901 Parsons Road, Lagrange, OH 44050		
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
15-00-003-00-030	\$275,000.00	\$ 307,000.00	\$ 32,000.00
9. The requested change in value is justified for the following reasons: Appraised FMV is less than Auditor's value. See attached appraisal.			

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 Oct. 2022 and total cost \$ 17,000.00

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 3/27/25 Complainant or agent (printed) CAROLYN R. SORRELL Robert Sorrell Title (if agent) _____

Complainant or agent (signature) Robert Sorrell Carolyn R Sorrell

Sworn to and signed in my presence, this 27 day of March 2025
(Date) (Month) (Year)

Notary Terry S. Shilling



TERRY S. SHILLING
Attorney at Law
Notary Public, State of Ohio
My Commission Has No Expiration Date
Sec 147.03 O.R.C.

Clear Form

Tax year 2024

BOR no. _____

DTE 1
Rev. 12/22County Lorain

Date received _____

Complaint Against the Valuation of Real Property

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

Attach additional pages if necessary.

This form is for full market value complaints only. All other complaints shall be handled differently.

☒ Original complaint ☐ Counter complaint

Notices will be sent only to those named below.

EXHIBIT**A**

	Name	Street address, City, State, ZIP code	
1. Owner of property	Michael Alter and Madison Alter	826 Lafayette Blvd Sheffield Lake, OH 44054	
2. Complainant if not owner			
3. Complainant's agent			
4. Telephone number and email address of contact person	440-522-5258 calvertmadison98@gmail.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		
0300037116009	826 Lafayette Blvd Sheffield Lake, OH 44054		
0300037116008	826 Lafayette Blvd Sheffield Lake, OH 44054		
7. Principal use of property	primary 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
0300037116009	155,000	177,790	22,790
0300037116008	7,670	9,080	1,410
9. The requested change in value is justified for the following reasons: Roof is in need of replacement- leaking in bathroom and garage. No changes to side yard property parcel ending in 008, cannot do anything with this space.			

10. Was property sold within the last three years? ☒ Yes ☐ No ☐ Unknown If yes, show date of sale 9/24/2023and sale price \$ 192,000 ; 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

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 03/25/2025 Complainant or agent (printed) Madison Alter Title (if agent) _____

Complainant or agent (signature) Madison Alter

Sworn to and signed in my presence, this 27 day of March 2025
(Date) (Month) (Year)

Notary Annie Carstarphen Cheeseboro



Annie Carstarphen Cheeseboro
Notary Public - State of Ohio
My Commission Expires June 30, 2029
Sec. 147.01 R.C.