Received By:

DTE 1 Rev. 12/22

FEB 2 7 2023

Date received

Complaint Against the Valuation of Real Property

Hancocknswer all ovestions 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

Notices will be sent only to those named below.

| | | Name | | Stre | Street address, City, State, ZIP code | | |
|---|------------|---|-------------------|--|---------------------------------------|-----------------------|--------|
| 1. Owner of property | | Veranco | Wester | 1010 | Leisen | Frey | ONO |
| 2. Complainant if not owner | er | | | | | | |
| 3. Complainant's agent | | | | | | | |
| 4. Telephone number and | email add | | n h | Dester- | Rossi | ay yph | 100.6 |
| 5. Complainant's relationsh | nip to pro | perty, if not owner | | | | | |
| | If mor | e than one parcel is | included, see "l | Multiple Parcels" | Instruction. | | |
| 6. Parcel numbers from tax bill | | Address of property | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | ~ ~ | | | |
| 7. Principal use of property | 15 | ought w | hen m | y tathe | ~ VieD | Wait. | g on R |
| 8. The increase or decrease | in marke | et value sought. Counte | er-complaints sup | porting auditor's va | alue may have - | 0- in Column C | |
| Parcel number | Con | Column A Complainant's Opinion of Value (Full Market Value) | | Column Current Va (Full Market \ | lue | Column Change in ' | - 1 |
| 00000 300600 | 1 | 25000. | 90 | 1530 | 20.00 | | |
| | | | | | | | |
| | | | | | | | |
| The requested change in The house Recitor Sud 112 Eben | value is j | ustified for the following | g reasons: | repairs | EUGn | Repa | red |
| 112 Eben | Sam | e bulder | almost | Idealed | hose | -Farl | ess Ap |
| 0. Was property sold within | | | . / | | | | |

| 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

No

when I was going 70 sell after my father Passed Sund I d be vidy To get 125000 because it Weeded Reports and was dated

| 14. If you have filed a prior complaint on this parcel since the last for the valuation change requested must be one of those below. I section 5715.19(A)(2) for a complete explanation. | t reappraisal or update of property values in the county, the reason Please check all that apply and explain on attached sheet. See R.C. | | | |
|--|--|--|--|--|
| ☐ 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 complainant, R.C. 5715.19(A)(8) requires this section to be comp | Heted. | | | |
| The complainant has complied with the requirements of R 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 a knowledge and belief is true, correct and complete. | any attachments) has been examined by me and to the best of my | | | |
| Date 2/27/23 Complainant or agent (printed) | Zonis D Wor Title (if agent) Quer Gense DD Dis | | | |
| Complainant or agent (signature) | | | | |
| Swom to and signed in my presence, this(Date) | day of February 2023 (Month) (Year) | | | |
| Notary Comments | | | | |
| | F. 3 | | | |

DEVEN MORRIS
Notary Public State of (

Notary Public, State of Ohio My Comm. Exp. Aug. 31, 20 2 U

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