

RECEIVED
HARRISON COUNTY

FEB 20 2024

Tax year 2024 BOR no. 3402-2341
County Harrison Date received Feb 20 2024

DTE 1
Rev. 12/22

Complaint Against the Valuation of Real Property

ALLISON W. ANDERSON
AUDITOR
Answer 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		Aden R + Naomi J Yoder 11430 Saltcreek Rd Fred OH 44627	
2. Complainant if not owner			
3. Complainant's agent			
4. Telephone number and email address of contact person			
330-695-2240			
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	
130000106006		Dump Rd Cadiz OH 43907	
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
130000106006	\$ 2200	\$ 8140	\$ 5940.00
9. The requested change in value is justified for the following reasons:			
I was always told if building is on skids it does not comply to realestate tax.			

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.
- A substantial improvement was added to the property.
- The property lost value due to a casualty.
- 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 2-15-24 Complainant or agent (printed) Aden Yoder Title (if agent) owner

Complainant or agent (signature) Aden R. Yoder

Sworn to and signed in my presence, this 15th day of FEBRUARY 2024
(Date) (Month) (Year)

Notary Brenda A Stutzman



BRENDA A STUTZMAN
Notary Public
State of Ohio
My Comm. Expires
July 30, 2027

RECEIVED
HARRISON COUNTY

Tax year 2023 BOR no. 2402-2342
County HARRISON Date received Feb 20 2024

DTE 1
Rev. 12/22

FEB 20 2024 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.

ALLISON M. ANDERSON
AUDITOR

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>Eugene + JOHNN KONDIK</u>	<u>15874 ValleyVIEW Rd Doylestown</u>	<u>Oh 44230</u>
2. Complainant if not owner			
3. Complainant's agent			
4. Telephone number and email address of contact person <u>330-658-3369</u> <u>JAK6583369@yahoo.com</u>			
5. Complainant's relationship to property, if not owner <u>a</u>			
If more than one parcel is included, see "Multiple Parcels" Instruction.			
6. Parcel numbers from tax bill		Address of property	
<u>290000799005</u>		<u>Beagle Club Rd Scio, Ohio</u>	
7. Principal use of property <u>Hunting</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>290000799005</u>	<u>44510</u>	<u>23,000</u>	<u>+ 21,510</u>
9. The requested change in value is justified for the following reasons: <u>(NO ROAD MAINTENANCE PROPERTY OWNERS MAINTAIN) NO MAIL DELIVERY</u> <u>NO STRUCTURE BEING BUILT NOW - Field ONLY CUT NOT BAILED</u> <u>TWSP DOES NOT MAINTAIN - TAX INCREASE MORE THEN PROSECTIVE</u> <u>HOME SITE</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 _____ and total cost \$ _____.

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

See attached tax bills 2023 & 2024

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.

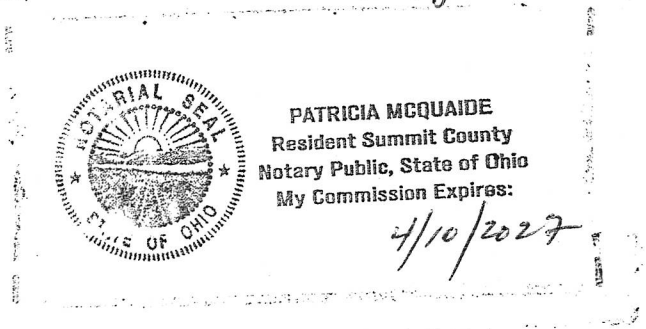
I declare under penalties of perjury that this complaint (including any attachments) has been examined by me and to the best of my knowledge and belief is true, correct and complete.

Date 2/15/2024 EUGENE PETER KONDIK
JOANN KONDIK
Complainant or agent (printed) TRUST Title (if agent) _____

Complainant or agent (signature) Eugene P. Kondik
Joann M. Kondik Trust

Sworn to and signed in my presence, this 2/15/2024 day of February 2024
(Date) (Month) (Year)

Notary Patricia McQuaide



FEB 20 2024

Tax year 2023 BOR no. 3402-2343

DTE 1
Rev. 12/22

County Harrison Date received ARLSON M. ANDERSON

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	CARSON Family Properties	365 Foxbury Dr SW, CARROLLTON, OH 44615	
2. Complainant if not owner			
3. Complainant's agent			
4. Telephone number and email address of contact person			
330-323-2892 drogerson@frontier.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	
13-0027.999999		8520 Rose Valley Rd. Hopedale, OH 43016	
7. Principal use of property Residential 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
13-0027.999999	- 0 -	43,710	-43,710
9. The requested change in value is justified for the following reasons:			
Mobile home is junk and 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 _____ 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 2/12/2024 Complainant or agent (printed) DAWN ROGERSON Title (if agent) _____

Complainant or agent (signature) *Dawn Rogerson*

Sworn to and signed in my presence, this 2/12/24 day of February 2024
(Date) (Month) (Year)

Notary *Karlee Rogerson*



Karlee Rogerson
Notary Public, State of Ohio
My Commission Expires 07-02-2027

RECEIVED
HARRISON COUNTY

FEB 16 2024

Tax year 2023

BOR no. 3402
~~3402~~ 2344

DTE 1
Rev. 12/22

ALLISON M. ANDERSON
AUDITOR
County HARRISON

Date received Feb 16 2024

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>RALPH F. & PHYLLIS LUCARIELLI</u>	<u>90635 CONOTTON - BOWERSTON</u> <u>44695</u>	
2. Complainant if not owner			
3. Complainant's agent			
4. Telephone number and email address of contact person <u>740 269 2314</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>200000652000</u>		<u>90635 CONOTTON Rd. BOWERSTON OH 44695</u>	
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
<u>200000652000</u>	<u>190,000</u>	<u>134,260</u>	<u>-44,260</u>
9. The requested change in value is justified for the following reasons: <u>NO IMPROVEMENTS</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 \$ NONE

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.
- A substantial improvement was added to the property.
- The property lost value due to a casualty.
- 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 2/16/24 Complainant or agent (printed) RALPH F LUCHARIELLO JR Title (if agent) _____

Complainant or agent (signature) [Signature]

Sworn to and signed in my presence, this 16th day of Feb 2024
(Date) (Month) (Year)

Notary [Signature]



RECEIVED
HARRISON COUNTY

Tax year 2024 BOR no. 3402-2345
County HARRISON Date received FEB 15 2024

DTE 1
Rev. 12/22

FEB 15 2024

Complaint Against the Valuation of Real Property

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

ALLISON M. ANDERSON
AUDITOR

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	JUDITH L GABA	81562 UNIONVALE RENWOOD RD	
2. Complainant if not owner			
3. Complainant's agent			
4. Telephone number and email address of contact person			
740 942 -827-2693 ^{cell phone}			
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	
1300000172000			
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
	128.94 TRAILER TAX	219.08	TAX TRAILER FROM 128.94 TO 219.08

9. The requested change in value is justified for the following reasons: Looking at last years tax statement vs this yrs tax statement, nothing has changed. Now it has just about doubled. Looking at properties on both sides of me should decrease my value, not increase it. This tax value is unfair

10. Was property sold within the last three years? Yes No Unknown If yes, show date of sale just wrong 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 2/15/2024 Complainant or agent (printed) JUDY GABA Title (if agent) Owner

Complainant or agent (signature) Judy Gaba

Sworn to and signed in my presence, this 15th day of Feb 2024
(Date) (Month) (Year)

Notary M. J. Blake



RECEIVED
HARRISON COUNTY

Tax year 2023

BOR no. 3402-2340

DTE 1
Rev. 12/22

County Harrison

Date received Feb 15 2024

FEB 15 2024

Complaint Against the Valuation of Real Property

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

ALLISON M. ANDERSON
AUDITOR

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	Judith F Workley	75440 Skullfork Freepoint	43973
2. Complainant if not owner			
3. Complainant's agent			
4. Telephone number and email address of contact person 740-658-3891			
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
12156			
09060027000	No Idea	2400 per acre	
09000027600	NO Idea	2400 per acre	
9. The requested change in value is justified for the following reasons: The ground floods & the hillside is all rocks no more building sites			

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 Feb 15 2024 Complainant or agent (printed) Judy Workley Title (if agent) _____

Complainant or agent (signature) Judy Workley

Sworn to and signed in my presence, this 15th day of Feb 2024
(Date) (Month) (Year)

Notary Mary Jane Blake



RECEIVED DTE 1

Tax year 2023

BOR no. 3402-2347 HARRISON COUNTY

County Harrison

Date received Feb 22 2024 FEB 22 2024

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.

ALLISON M. ANDERSON
AUDITOR

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 L White	8500 micken RD	
2. Complainant if not owner		hope dale OHIO 43976	
3. Complainant's agent			
4. Telephone number and email address of contact person			
1-740-457-2310 white richard 334 @ 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	
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
11-40000299001	5,000.00	69189	- 64160
11-40000299000	100,000.00	113,150.00	- 13,150.00
9. The requested change in value is justified for the following reasons:			
Barn Not a house			

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.
- A substantial improvement was added to the property.
- The property lost value due to a casualty.
- 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 2-22-24 Complainant or agent (printed) Richard White Title (if agent) owner

Complainant or agent (signature) *Richard White*

Sworn to and signed in my presence, this 22nd day of Feb 2024
(Date) (Month) (Year)

Notary *M. J. Blake*



RECEIVED
HARRISON COUNTY

FEB 14 2024

Tax year 2023 BOR no. 3402-2348
County Harrison Date received Feb 14 2024

DTE 1
Rev. 12/22

Complaint Against the Valuation of Real Property

ALLISON M. ANDERSON
AUDITOR

Fill in all spaces. 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 <i>Susan C. Frew WLC Legacy Farms, LLC</i>		Street address, City, State, ZIP code <i>2200 Seio Rd SW Carrollton, Ohio 44615</i>	
2. Complainant if not owner					
3. Complainant's agent					
4. Telephone number and email address of contact person				<i>330.627.4723</i>	
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		
<i>20-0000070.000</i>	<i>0</i>	<i>9990</i>	<i>-\$9990.00</i>		
<i>20-0000070.000</i>	<i>Other existing buildings. \$3,750.00</i>	<i>\$7,190.00</i>	<i>-\$3,440.00</i>		
9. The requested change in value is justified for the following reasons: <i>I Paid real estates for the second half of 2022 on a destroyed barn from February 2022 DTE 26 on file. Request re-appraisal of existing buildings.</i>					

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.
- A substantial improvement was added to the property.
- The property lost value due to a casualty.
- 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 02.14.2024 Complainant or agent (printed) Susan C. Frew Title (if agent) Statorary agent

Complainant or agent (signature) Susan C. Frew

Sworn to and signed in my presence, this 14th day of Feb 2024

Notary M. J. Blake



RECEIVED
HARRISON COUNTY

FEB 13 2024

Tax year 2023 BOR no. 3402-2349
County Harrison Date received Feb 13 2024

DTE 1
Rev. 12/22

Complaint Against the Valuation of Real Property

ALLISON M. ANDERSON
AUDITOR

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 A Cooney		
2. Complainant if not owner	Brian C Cooney	86418 N. Bay Rd. Scio O. 43988	
3. Complainant's agent			
4. Telephone number and email address of contact person 734-755-9021			
5. Complainant's relationship to property, if not owner <u>Son</u>			
If more than one parcel is included, see "Multiple Parcels" Instruction.			
6. Parcel numbers from tax bill		Address of property	
320000074000		86418 N. Bay Rd. Scio Ohio 43988	
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
320000074000	237,140	737,140	105,000
9. The requested change in value is justified for the following reasons: <u>No to High</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 _____ 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.
- A substantial improvement was added to the property.
- The property lost value due to a casualty.
- 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 2/13/24 Complainant or agent (printed) Brian Cooney Title (if agent) _____

Complainant or agent (signature) Brian Cooney

Sworn to and signed in my presence, this 13th day of Feb 2024
(Date) (Month) (Year)

Notary Mary Jane Blake



RECEIVED
HARRISON COUNTY
DTE 1
Rev. 12/22

4102-2350

Tax year 2023 BOR no. 4102-2350
County Harrison Date received FEB 13 2024

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.

ALLISON M. ANDERSON
AUDITOR

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	<i>Margaret M. Cline</i>	<i>49824 Annapolis Rd. Bloomingsdale, Oh</i>	
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		
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
<i>120000015-000</i>	<i>NO title - use Storage?</i>		
	<i>falling apart - to be torn down - NO information on trailer</i>		
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.
- A substantial improvement was added to the property.
- The property lost value due to a casualty.
- 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 2-13-2024 Complainant or agent (printed) Margaret M. Cline Title (if agent) _____

Complainant or agent (signature) Margaret M. Cline

Sworn to and signed in my presence, this 13th day of Feb 2024
(Date) (Month) (Year)

Notary Mary Jane Blake



Tax year 2023 BOR no. 3402-23-51 DTE 1 FEB 12/22
 County Harrison Date received HARRISON COUNTY

Complaint Against the Valuation of Real Property

Answer all questions and type or print all information. Read instructions on back before completing form. FEB 28 2024
 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. ALLISON M. ANDERSON
AUDITOR

	Name	Street address, City, State, ZIP code	
1. Owner of property	Averill R Simon JR	2985 Oak St North OHIO 44203	
2. Complainant if not owner			
3. Complainant's agent			
4. Telephone number and email address of contact person			
330 612-3545 a.simon.trc@go1.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	
220000655061		R6 T11 S261.00A Lot Middle Hill Rd 78575 Middle Hill Rd	
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
220000655061	(put value back to where it was)		
9. The requested change in value is justified for the following reasons:			
(Your Road is Approaching on my side) I have done nothing to the lot to be raised in 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 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.
- A substantial improvement was added to the property.
- The property lost value due to a casualty.
- Occupancy change of at least 15% had a substantial economic impact on my property.

None

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 2-22-2024 Complainant or agent (printed) _____ Title (if agent) _____

Complainant or agent (signature) *Carl A. Smith*

Sworn to and signed in my presence, this ~~22~~² day of February 2024
(Date) (Month) (Year)

Notary *[Signature]*



Tax year 2023 BOR no. 3402-2352
 FEB 16 2024 County Harrison Date received Feb 16 2024

Complaint Against the Assessment of Real Property Other than Market Value

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

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

	Name	Street address, City, State, ZIP code	
1) Owner of property	RayLee Farms	26220 Westchester Rd	
2) Complainant if not owner		Tippecanoe OH 44699	
3) Complainant's agent			
4) Telephone number of contact person			
5) Email address of complainant			
6) Complainant's relationship to property, if not owner			
If more than one parcel number is included, see "Multiple Parcels" on back			
7) Parcel number from tax bill	# Acres, if applicable	Address of property	
090000237600	090000513004	SEE Attached	
090000274001	090000514000		
090000235001			
090000513001			
8) Indicate the reason for this complaint:			
<input type="checkbox"/> The classification of property under RC 5713.041. <input type="checkbox"/> The classification of property under RC 319.302. <input checked="" type="checkbox"/> The denial of a CAUV application filed under RC 5713.32 or the conversion of CAUV property under RC 5713.35. <input type="checkbox"/> The valuation of property on the agricultural land tax list. <input type="checkbox"/> Determination whether good cause exists for land on the CAUV program to remain idle under RC 5713.30(A)(4). <input type="checkbox"/> Determination of whether good cause exists for the failure to file a CAUV renewal application pursuant to RC 5713.351. <input type="checkbox"/> The denial of the partial exemption of a qualifying child care center under RC 323.16.			
9) If the complaint is seeking a change in the value of the property, complete line 9. Complainants appealing other issues do not need to complete this line.			
Parcel number	Column A Complainant's Opinion of Value (Full Market Value)	Column B Current Value (Full Market Value)	Column C Change in Value

10) The requested change is justified for the following reasons: I filled out the original form & sent it in but County did not receive it.

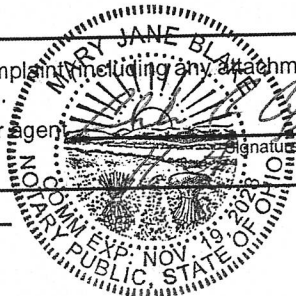
11) If the complainant is a legislative authority and the complaint is an original complaint with respect to property not owned by the complainant, R.C. 5715.19(A)(8) requires this section to be completed.
 The complainant has complied with the requirements of R.C. section 5715.19(A)(6)(b) and (7) and 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 2-16-24 Complainant or agent [Signature] Title (if agent) Owner

Sworn to and signed in my presence, this 16 day of Feb year 2024

Notary [Signature]
 Signature



RECEIVED
HARRISON COUNTY

Tax year 2023

BOR no. 3402-2353

DTE 1
Rev. 12/22

County Harrison

Date received Feb 13 2024

FEB 13 2024

Complaint Against the Valuation of Real Property

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

ALLISON M. ANDERSON
AUDITOR

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>Joe G. Gable</u>	<u>31050 Old Resnow Rd Frederick, MD</u>	
2. Complainant if not owner			
3. Complainant's agent			
4. Telephone number and email address of contact person		<u>740 359-0903</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>2700000 38000</u>			
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
<u>2700000 38000</u>	<u>35000</u>	<u>95630</u>	<u>30630</u>
9. The requested change in value is justified for the following reasons: <u>Doubt agree with tax values on this parcel</u> <u>Its all hillside + built in 1945 "MEDICULOUS APARTMENT"</u> <u>NEED RE APPRAISED</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 _____ 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.
- A substantial improvement was added to the property.
- The property lost value due to a casualty.
- 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 2-3-24 Complainant or agent (printed) Joe Gretchen Title (if agent) OWNER

Complainant or agent (signature) *Joe Gretchen*

Sworn to and signed in my presence, this 13th day of Feb 2024
(Date) (Month) (Year)

Notary *M. J. Blake*



Tax year 2023 BOR no. 3102-23-54 DTE 1 Rev. 12/22
 County Harrison Date received _____ **RECEIVED**

Complaint Against the Valuation of Real Property HARRISON COUNTY

Answer all questions and type or print all information. Read instructions on back before completing form.
 Attach additional pages if necessary. FEB 28 2024
 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.

ALLISON M. ANDERSON
AUDITOR

	Name	Street address, City, State, ZIP Code	
1. Owner of property	<u>Sharon L. Neitzelt</u>	<u>36530 Scio Bowerston Rd. Bowerston Ohio 44695</u>	
2. Complainant if not owner			
3. Complainant's agent			
4. Telephone number and email address of contact person <u>1740-945-1005</u>			
5. Complainant's relationship to property, if not owner <p align="center">If more than one parcel is included, see "Multiple Parcels" Instruction.</p>			
6. Parcel numbers from tax bill		Address of property	
<u>200000164000</u>		<u>36530 Scio BOWERSTON RD BOWERSTON, OHIO 44695</u>	
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
9. The requested change in value is justified for the following reasons: <u>Was Audited AS Sheds - These ARE NOT sheds - no doors - no floor</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 _____ 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.
- A substantial improvement was added to the property.
- The property lost value due to a casualty.
- 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 2.22.24 Complainant or agent (printed) Sharon L. Neitzelt Title (if agent) _____

Complainant or agent (signature) Sharon L. Neitzelt

Sworn to and signed in my presence, this 22nd day of February 2024
(Date) (Month) (Year)

Notary Jolene Jones Comm exp. 10-1-25

Tax year 2023 BOR no. 3401-23-55 DTE 1 Rev. 12/22
 County HARRISON Date received _____ RECEIVED

Complaint Against the Valuation of Real Property

HARRISON COUNTY

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 282024
 Original complaint Counter complaint
 Notices will be sent only to those named below.

ALLISON M. ANDERSON
 AUDITOR

	Name	Street address, City, State, ZIP code
1. Owner of property	<u>SEVEN RANGES PROPERTIES LLC</u>	<u>329 Cape August Pl, Belmont, NC 28012</u>
2. Complainant if not owner		
3. Complainant's agent		
4. Telephone number and email address of contact person		
	<u>Trent A. Smith</u>	<u>419-351-8342</u> <u>tsmith5614@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>060000017002</u>		<u>Plum Run Rd, URBANSVILLE, OH</u> <u>44483</u>

7. Principal use of property TIMBER, RECREATION

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>060000017002</u>	<u>49,170</u>	<u>71,430</u>	<u>22,260</u>

9. The requested change in value is justified for the following reasons:
I DO NOT HAVE 6150 FT of new fence as stated by auditor. There is about 880 ft. of new chainlink fence at Dominion REGULATING STATION. I have about 150 ft of woven wire fence on road frontage of Plum Run Rd. The decades old farm fence on property boundaries is not mine and wasn't built for my use.

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.
No royalties paid.

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.

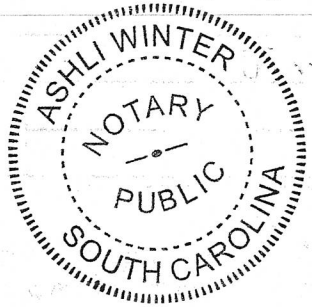
I declare under penalties of perjury that this complaint (including any attachments) has been examined by me and to the best of my knowledge and belief is true, correct and complete.

Date 2/14/24 Complainant or agent (printed) Trent A Smith Title (if agent) Co Owner, LLC

Complainant or agent (signature) *Trent A Smith*

Sworn to and signed in my presence, this 2/14/24 ^{14th} day of Feb. 2024
(Date) (Month) (Year)

Notary *Ashli Winter*
EX 3/18/2031



Tax year 2023 BOR no. 3402-23-56

DTE 1
Rev. 12/22

County Harrison Date received _____

RECEIVED

Complaint Against the Valuation of Real Property HARRISON COUNTY

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

FEB 28 2024

Original complaint Counter complaint

Notices will be sent only to those named below.

ALLISON M. ANDERSON

Name		Street address, City, State, Zip	
1. Owner of property	Cynthia L. Bowlin Family Trust	23 Keswick Cms, New Albany, OH43054	
2. Complainant if not owner			
3. Complainant's agent			
4. Telephone number and email address of contact person 614-395-2383 cbowlin50@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	
02-0000161.000		73814 Reservoir Hill Road, Flushing Oh 43977	
17.0000024.000			
17.0000063.000			
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
02-0000161.000	0	382370	
17.0000024.000	0	868060	
17.0000063.000	0	70910	
9. The requested change in value is justified for the following reasons: The tracts listed above have just been issued a permit to begin surface mining the property for coal. Most of the surface of this property will be destroyed in this process, and during the mining, I have no access to the property. ODNR Permit D-2520 I do not own the mineral rights. Therefore, I do not receive any compensation for the value of the surface being affected.			

10. Was property sold within the last three years? Yes No Unknown If yes, show date of sale 5/19/22
and sale price \$ 729000 ; 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.

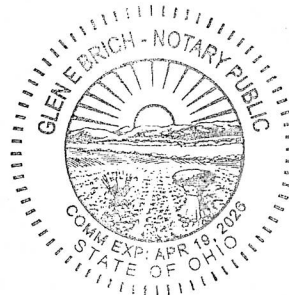
I declare under penalties of perjury that this complaint (including any attachments) has been examined by me and to the best of my knowledge and belief is true, correct and complete.

Date 1/29/24 Complainant or agent (printed) Cynthia Bowlin Title (if agent) _____

Complainant or agent (signature) _____
[Handwritten Signature]

Sworn to and signed in my presence, this 29th FEB ~~1-29-2024~~ day of JANUARY 2024
(Date) (Month) (Year)

Notary *[Handwritten Signature]*



Tax year 2023 BOR no. 3401-23-57 RECEIVED
~~2024~~ 536 HARRISON COUNTY
 County Harrison Date received 2/9/24 FEB 28 2024

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 **ALLISON M. ANDERSON**
AUDITOR

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

	Name	Street address, City, State, ZIP code	
1. Owner of property	John L. Pounds	Deceased, December 2008	
2. Complainant if not owner	Steve A. Pounds	89960 Plumer Rd Uhrndsville OH 44083	
3. Complainant's agent			
4. Telephone number and email address of contact person 740-269-0003			
5. Complainant's relationship to property, if not owner Steve owns the land, John owned the trailer, John has been deceased since December 2008			
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	Trailer has been vacant for roughly 24 years		
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
			0
9. The requested change in value is justified for the following reasons: Trailer has been vacant for roughly 24 years. There is no electric hooked up, and no water. John has been deceased since December 2008.			

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.

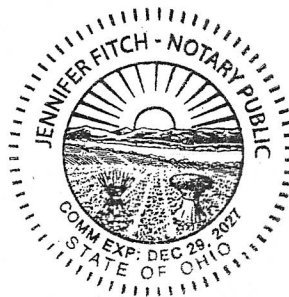
I declare under penalties of perjury that this complaint (including any attachments) has been examined by me and to the best of my knowledge and belief is true, correct and complete.

Date 2/20/24 Complainant or agent (printed) Steve Pounds Title (if agent) _____

Complainant or agent (signature) [Signature]

Sworn to and signed in my presence, this 20 day of February 2024
(Date) (Month) (Year)

Notary [Signature]



Tax year 2023 BOR no. 3402-23-58 RECEIVED
 County Harrison Date received _____ HARRISON COUNTY
 FEB 28 2024

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.

ALLISON M. ANDERS
 AUDITOR

	Name	Street address, City, State, ZIP code
1. Owner of property	Miller GAILA ET AL	587 MORNINGSTAR, TALMADGE OH 44278
2. Complainant if not owner		
3. Complainant's agent		

4. Telephone number and email address of contact person
 330-615-9249 gmiller71954@att.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
020000160003	39800 Jockey Hollow

7. Principal use of property HUNTING

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
020000160003	18,794	23,060	(4,266)

9. The requested change in value is justified for the following reasons:
 Purchase price of storage barn receipt
 NO ADDITIONAL IMPROVEMENTS

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

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.
- A substantial improvement was added to the property.
- The property lost value due to a casualty.
- Occupancy change of at least 15% had a substantial economic impact on my property.

NIA

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 2/19/24 Complainant or agent (printed) Gail Miller Title (if agent) _____

Complainant or agent (signature) Gail Miller

Sworn to and signed in my presence, this 19th day of February 2024

Notary [Signature]



DULCE FOSTER
Notary Public, State of Ohio
My Commission Expires
December 04, 2028

RECEIVED
HARRISON COUNTY DTE 1
Rev. 12/22

Tax year 2023 BOR no. 3402-23-59
 County HARRISON Date received FEB 28 2024

Complaint Against the Valuation of Real Property

Answer all questions and type or print all information. Read instructions on back before completing.
 Attach additional pages if necessary.
 This form is for full market value complaints only. All other complaints should use DTE Form 2

ALLISON M. ANDERSON
AUDITOR

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

	Name	Street address, City, State, ZIP code	
1. Owner of property	Levi E. Byler	32300 Clendening Lake Rd.	
2. Complainant if not owner			
3. Complainant's agent		Freeport	
4. Telephone number and email address of contact person <div style="text-align: center;">1740-658-3922</div>			
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
22- 22-0000 525.000/00	250,000	377,840	= 127,840
9. The requested change in value is justified for the following reasons: <div style="text-align: center; font-size: 1.2em;">second dwelling is Pole Building only part is liveable</div>			

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.
- A substantial improvement was added to the property.
- The property lost value due to a casualty.
- 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 2-28-24 Complainant or agent (printed) Levi Byler Title (if agent) _____

Complainant or agent (signature) *Levi E. Byler*

Sworn to and signed in my presence, this 28th day of Feb 2024
(Date) (Month) (Year)

Notary *M. J. Blake*



Tax year 2023 BOR no. 3402-23-60 RECEIVED ^{PT 1} _{2/22}
 County Harrison Date received 2-15-24 HARRISON COUNTY

Complaint Against the Valuation of Real Property FEB 28 2024

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 **DAE Form 2**
 Original complaint Counter complaint
 Notices will be sent only to those named below. **ALLISON M. ANDERSON**
AUDITOR

Name		Street address, City, State, ZIP code	
1. Owner of property	Kyle T Bordell + Brooke L. Smith	Lot 18 105 High Street	Frederick, OH 43973
2. Complainant if not owner			
3. Complainant's agent			
4. Telephone number and email address of contact person 740-424-8509 Smithb-2010@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	
100000218000		105 High Street Frederick, OH 43973	
7. Principal use of property 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
100000218000	\$1141.68	\$ 722.86	\$418.82
9. The requested change in value is justified for the following reasons: I am NOT Justified in the Reasoning I want to be Present for 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 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 2-27-24 Complainant or agent (printed) Brooke Bordall Title (if agent) _____

Complainant or agent (signature) Brooke Bordall

Sworn to and signed in my presence, this 27th day of February 2024
(Date) (Month) (Year)

Notary Jennifer Smith



Jennifer M. Smith
Notary Public,
State of Ohio

My Commission Exp. 6/30/2028

Tax year 2023 BOR no. 3102-23-61 DTE 1
 County Harrison Date received 2-15-23 RECEIVED
 HARRISON COUNTY

Complaint Against the Valuation of Real Property

Answer all questions and type or print all information. Read instructions on back before completing form. FEB 28 2024

Attach additional pages if necessary.
 This form is for full market value complaints only. All other complaints should use DAE Form 2
 Original complaint Counter complaint
 Notices will be sent only to those named below. ALISON M. ANDERSON
 AUDITOR

	Name	Street address, City, State, ZIP code	
1. Owner of property	KB Bordall Real Estate LLC	105 North High St. Freeport, OH 43973	
2. Complainant if not owner			
3. Complainant's agent			
4. Telephone number and email address of contact person 740-424-8509 smithb-2010@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	
10000183001		218 1/2 E Muskingum St. Freeport, OH 43973	
7. Principal use of property <u>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
10000183001	20.98	\$16.10	\$4.88
9. The requested change in value is justified for the following reasons: <u>I am Not Justified in the Reasons</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 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.
- A substantial improvement was added to the property.
- The property lost value due to a casualty.
- 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 2-27-24 Complainant or agent (printed) Brooke Bordell Title (if agent) _____

Complainant or agent (signature) Brooke Bordell

Sworn to and signed in my presence, this 27th day of February 2024
(Date) (Month) (Year)

Notary Jennifer Smith



Jennifer M. Smith
Notary Public,
State of Ohio

My Commission Exp.
6/30/2028