

Tax year 2024 BOR no. 3402-23-62 RECEIVED
 County Harrison Date received 2-15-23 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 **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	KB Bardak Real Estate LLC	218 1/2 E. Mustangum 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		
100000068001	218 1/2 E. Mustangum St Freeport, OH 43973		
7. Principal use of property <u>Business</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
100000068001	\$840.46	\$344.38	\$496.08
9. The requested change in value is justified for the following reasons: <u>I am Not Justified in the Reasoning</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 Bardsell Title (if agent) _____

Complainant or agent (signature) Brooke Bardsell

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. 6/30/2024

RECEIVED
 HARRISON COUNTY
 DTE 1
 Rev. 12/22
 FEB 27 2024

Tax year 2023 BOR no 3402-23-63
 County Harrison Date received _____

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	<u>Polly Nalley</u>	<u>88250 Henderson Rd Scio, OH 43888</u>
2. Complainant if not owner		
3. Complainant's agent		
4. Telephone number and email address of contact person	<u>7409453907 nalleyppoly88@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
 	
 	
 	

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>200000162001</u>	<u>\$ 30,000</u>	<u>\$ 52,540</u>	<u>\$ 22,540</u>

9. The requested change in value is justified for the following reasons:
There has been no improvements made on my home in anyway since 1999,

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 2/27/24 Complainant or agent (printed) Polly Nalley Title (if agent) owner

Complainant or agent (signature) Polly Nalley

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

Notary Mary Jane Blake



Tax year 2023 BOR no. 3402-23-64 RECEIVED FEB 1 12/22
 County HARRISON Date received _____
HARRISON COUNTY

Complaint Against the Valuation of Real Property FEB 27 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 Form **ALBISON M. ANDERSON**

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

AUDITOR

	Name	Street address, City, State, ZIP code	
1. Owner of property	<u>Linda Ledger</u>	<u>655 Mc. Cready Ave</u>	
2. Complainant if not owner			
3. Complainant's agent			
4. Telephone number and email address of contact person			
<u>740-942-3259</u>			
5. Complainant's relationship to property, if not owner			
If more than one parcel is included, see "Multiple Parcels" Instruction.			
6. Parcel numbers from tax bill		Address of property	
7. Principal use of property			
8. The increase or decrease in market value sought. Counter-complaints supporting auditor's value may have -0- in Column C.			
Parcel number	Column A Complainant's Opinion of Value (Full Market Value)	Column B Current Value (Full Market Value)	Column C Change in Value
<u>050001379000</u> ↓	<u>1,000.00</u>	<u>6,780</u>	<u>- 5,780</u>
9. The requested change in value is justified for the following reasons:			
<u>Just A empty lot.</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 NO 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. 27-2024 Complainant or agent (printed) Linda Ledger Title (if agent) _____

Complainant or agent (signature) Linda Ledger

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

Notary M. J. Blake



RECEIVED
HARRISON COUNTY
DTE
Rev. 12/22

Tax year 2023 BOR no. 3402-23-65
County HARRISON Date received FEB 27 2024

Complaint Against the Valuation of Real Property

ALLISON W. ANDERSON
AUDITOR

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 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	Kenneth Duncan	39495 DEERS LILLE RD CANTON OHIO 43907
2. Complainant if not owner		
3. Complainant's agent		
4. Telephone number and email address of contact person	(330) 806-5889	

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
040000117002	\$94,500.00	100,260	-5,750

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

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

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) Kenneth Duncan Title (if agent) _____

Complainant or agent (signature) Kenneth Duncan

Sworn to and signed in my presence, this 27th day of Feb 2024

Notary M. Jane Blake



Tax year 2021 - Current ²⁰²³ BOR no. 3102-23-66 RECEIVED DTE 1 JUN 12/22
 County Harrison Date received _____
HARRISON COUNTY

Complaint Against the Valuation of Real Property FEB 27 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 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	Kathern Woodburn	86229 Bakers Rdg Rd Jewett 439	
2. Complainant if not owner	Kathy Gifford	86231 Bakers Rdg Rd Jewett 439	
3. Complainant's agent			
4. Telephone number and email address of contact person 740-946-4825 kathyglenn2@yahoo.com			
5. Complainant's relationship to property, if not owner Niece			
If more than one parcel is included, see "Multiple Parcels" Instruction.			
6. Parcel numbers from tax bill	Address of property		
130000 868000	86265 Bakers Ridge Road		
130000 869000	86231 Bakers Ridge Road		
7. Principal use of property Homes 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
130000 868000	18510	50570	32060
130000 869000	11860	26770	14910
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.

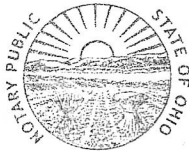
I declare under penalties of perjury that this complaint (including any attachments) has been examined by me and to the best of my knowledge and belief is true, correct and complete.

Date 2-26-2024 Complainant or agent (printed) RATHER WILSON Title (if agent) NA

Complainant or agent (signature) *Rather Wilson*

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

Notary *Kalyn E. Kovacik*



KALYN E KOVACIK
Notary Public
State of Ohio
My Comm. Expires
January 15, 2028

RECEIVED
HARRISON COUNTY

Tax year 2023 BOR no: 3402-23-67 DTE 2
 County HARRISON Date received FEB 26 2024 Rev. 08/21

ALLISON M. ANDERSON

Complaint Against the Assessment of Real Property Other than Market Value

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

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

	Name	Street address, City, State, ZIP code
1) Owner of property	LARRY SICKLE	162 MARTIN, CADIZ, OH, 43907
2) Complainant if not owner		
3) Complainant's agent		
4) Telephone number of contact person	(740) 381-6191	
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
05-0001486.000	Lot # 10-11 PT	162 MARTIN AV. CADIZ, OH

- 8) Indicate the reason for this complaint:
- The classification of property under RC 5713.041.
 - The classification of property under RC 319.302.
 - The denial of a CAUV application filed under RC 5713.32 or the conversion of CAUV property under RC 5713.35.
 - The valuation of property on the agricultural land tax list.
 - Determination whether good cause exists for land on the CAUV program to remain idle under RC 5713.30(A)(4).
 - Determination of whether good cause exists for the failure to file a CAUV renewal application pursuant to RC 5713.351.
 - 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
05-0001486.000	\$84,050	109,050	-25,000

10) The requested change is justified for the following reasons: **STRUCTURES ARE DEREGRETTATED: DENIED-FADED OLD ALLUMINIUM SIDING ON HOUSE. GARAGE STRUCTURAL ISSUES, ROOF & STRUCTURE OF DEPLORABLE COND**

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 2-26-24 Complainant or agent Larry Sickle Signature
 Sworn to and signed in my presence this 26th day of February year 2024



Tax year 2023
County Harrison

BOR no. 3402-23-68
Date received FEB 26 2024

Complaint Against the Valuation of Real Property **RON 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	DAVIS SUE Ellen Etal		20500 Hoop Road	
2. Complainant if not owner	Karl Hoop		Freeport, OH 43973	
3. Complainant's agent				
4. Telephone number and email address of contact person 740-1058-3574				
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		
09-0000 119.000		TR 118		
7. Principal use of property <u>AG.</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	
09-0000 119.000	\$175,770	\$222,770		
9. The requested change in value is justified for the following reasons: <u>Buildings are depreciating and many years old. Land is only used for hay, no crop production.</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 2/21/2024 Complainant or agent (printed) K.P.H. Title (if agent) _____

Complainant or agent (signature) Karl P. Hoop

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

Notary M. DeBelle



PLEASE CALL

RECEIVED
HARRISON COUNTY
REV. 12/22

Tax year 2023 BOR no. 3401-23-69
County Harrison Date received FEB 26 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 **100**

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	William M ² Laughlin	201 Water Alley, Bowerston 44695	
2. Complainant if not owner		Box 49	
3. Complainant's agent			
4. Telephone number and email address of contact person 740-269-0592			
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		
160000186000	201 Water Alley, Bowerston, OH 44695		
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
9. The requested change in value is justified for the following reasons: No business My Residence since 2000 This property is Residential only			

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 2-26-2024 Complainant or agent (printed) William McLaughlin Title (if agent) _____

Complainant or agent (signature) *William McLaughlin* *William McLaughlin*

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

Notary *M. J. Blake*



Tax year 2023 BOR no. 3402-23-70 FEB 23 2024 DTE 1 Rev. 12/22
 County Harrison Date received _____

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	CHARLES A. HARRAH	513 Lincoln Ave, Cadiz	
2. Complainant if not owner			
3. Complainant's agent			
4. Telephone number and email address of contact person 740-942-3934			
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
05 0060654000	30,000	141,800	-61,800
9. The requested change in value is justified for the following reasons: No Improvements on this house for over 20 years. The house is nearly 120 years old.			

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 2-23-2024 Complainant or agent (printed) Charles A. Harrah Title (if agent) _____

Complainant or agent (signature) Charles A. Harrah

Sworn to and signed in my presence, this 23rd day of Feb 2024
(Date) (Month) (Year)

Notary M. J. Blake



RECEIVED

HARRISON COUNTY

Rev. 12/22

Tax year 2023

BOR no. 3402-23-71

County HARRISON

Date received FEB 23 2024

Complaint Against the Valuation of Real Property

Answer all questions and type or print all information. Read instructions on back before filing for appeal. **ALISON M. ANDERSON**

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	MARJORIE DALTON	126 WALNUT ST. SC10, OH 43988	
2. Complainant if not owner			
3. Complainant's agent			
4. Telephone number and email address of contact person			
740-945-4063 mda247			
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
210000628000	62,000	84,420	-22,420
9. The requested change in value is justified for the following reasons:			
There's been no improvements NEEDS LOTS OF WORK			

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 2/23/24 Complainant or agent (printed) MARJORIE DALTON Title (if agent) OWNER

Complainant or agent (signature) Marjorie Dalton

Sworn to and signed in my presence, this 23rd day of Feb 2024

Notary Mary Jane Blake

